

**PREA AUDIT REPORT     Interim    Final**  
**ADULT PRISONS & JAILS**

**Date of report:** 6/12/18

<b>Auditor Information</b>			
<b>Auditor name:</b> DeShane Reed			
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<b>Telephone number:</b> (501) 777-3102			
<b>Date of facility visit:</b> September 25, 2017 through September 27, 2017			
<b>Facility Information</b>			
<b>Facility name:</b> Garland County Detention Center			
<b>Facility physical address:</b> 3564 Albert Pike Road, Hot Springs, AR 71913			
<b>Facility mailing address:</b> <i>(if different from above)</i> Same as Above			
<b>Facility telephone number:</b> (501) 651-7801			
<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	Jail	
<b>Name of facility's Chief Executive Officer:</b> Chief Stephen Elrod			
<b>Number of staff assigned to the facility in the last 12 months:</b> 31			
<b>Designed facility capacity:</b> 482			
<b>Current population of facility:</b> 326 on date of Site Visit			
<b>Facility security levels/inmate custody levels:</b> Maximum			
<b>Age range of the population:</b> 18 and above			
<b>Name of PREA Compliance Manager:</b> Lt. Russell Severns		<b>Title:</b> Director of Compliance and Programs	
<b>Email address:</b> rseverns@garlandcounty.org		<b>Telephone number:</b> (501) 651-7856	
<b>Agency Information</b>			
<b>Name of agency:</b> Garland County Sheriff's Office			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> N/A			
<b>Physical address:</b> 525 Ouachita Avenue Hot Springs, AR 71901			
<b>Mailing address:</b> <i>(if different from above)</i> Same as Physical Address			
<b>Telephone number:</b> (501) 622-3660			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Michael McCormick		<b>Title:</b> Sheriff	
<b>Email address:</b> mmcormick@garlandcounty.org		<b>Telephone number:</b> (501) 622-3660	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Steven Elrod		<b>Title:</b> Chief Department of Corrections	
<b>Email address:</b> selrod@garlandcounty.org		<b>Telephone number:</b> (501) 651-7808	

## AUDIT FINDINGS

### NARRATIVE

On September 25, 2017, in coordination and cooperation with the Garland County Sheriff's Office (GCSO), USDOJ Certified PREA Auditor DeShane Reed conducted a facility audit of the Garland County Adult Detention Center. The audit commenced with Pre-Audit Briefing meeting (8:30am) consisting of Garland County Adult Detention Center administration and supervisory staff. In attendance was the following from Garland County Adult Detention Center: Steven Elrod (Chief Deputy of Correction/PREA Coordinator), Russell Severns (Director of Programs/PREA Compliance Manager), Belinda Cosgrove (Captain of Operations), Donald Ansley (Shift Commander), Melissa Jarrett (RN/Health Services Administrator), and Rhonda Hadley (Classification Supervisor). The PRE-Audit meeting commenced with introductions, review of the PREA audit schedule and agenda, on-site document requests, lists of inmates for interviewing and a tour of the entire Garland County Adult Detention Center facility. Garland County Adult Detention Center opened in June 2015

The PREA audit commenced with a full tour of Garland County Adult Detention Center's multiple housing locations, program locations, warehouse, cafeteria, food prep kitchen, warehouse, laundry, showering locations, offices, recreation and educational locations within Garland County Adult Detention Center. After a complete tour and documentation, the PREA Auditor moved into interviewing a selecting a random sample of inmates. A total of 28 inmates were interviewed, with a specific selection focused on the following category of inmates, based on PREA audit requirements: (Inmates with prior victimization, LGBTI, disability, current allegation, limited English proficiency, and an inmate in segregation). The PREA Audit also consisted of 17 interviews of a random selection of Garland County Adult Detention Center staff including: Garland County Adult Detention Center PREA Compliance Manager, Investigation and Retaliation Team, Human Resources, Contractors, Volunteers, Medical/Mental Health Practitioners, Classification, and other Garland County Adult Detention Center Specialized staff. The PREA Auditor also reviewed multiple files and physical documents while on-site, which allowed the PREA auditor to verify if Garland County Adult Detention Center was compliance with PREA facility standards and/or confirm any barriers to compliance.

On September 27, 2017, the PREA Audit of Garland County Adult Detention Center concluded with a Post-Audit Debriefing meeting. The same representatives from the Pre-Audit Briefing meeting were in attendance. The PREA Auditor shared that the information presented by the auditor within this Post-Audit Debriefing meeting did not depict a final reporting. The PREA Auditor continued by sharing several highlights of the Garland County Adult Detention Center very clean and organized physical facility and the wealth of programs provided to inmates. The PREA Auditor also thanked Garland County Adult Detention Center for allowing this auditor unimpeded access to the entire facility, through tour, document access, inmate access, and flexibility of interviews. The PREA Auditor also shared any observable areas that were not meeting standards and requiring Corrective Action.

As it pertains to PREA Physical Plant observations, the PREA Auditor observed adequate and appropriate use of the 293 cameras throughout the Garland County Adult Detention Center. There were observable physical plant blind spots, which was not viewable by camera. The PREA auditor noted that some identified shower rooms, bathrooms and storage areas were without windows, mirrors, cameras, nor supervision to deter any PREA-related incidents of sexual abuse/harassment/assaults. The dental exam and other physical examination rooms were without window, cameras, or supervision to deter a PREA-related incident of sexual abuse, harassment/assaults. In other questionable areas, Garland County Adult Detention Center was able to show and share with the PREA Auditor their staffing plan, and monitoring rounds, as well as having good use of two-way mirrors and consistent staff supervision to serve as adequate substitutions and supplements.

The Post-Audit Debriefing meeting concluded with the Auditor thanking the Garland County Adult Detention Center staff for their cooperation, efficiency and coordination in allowing the audit to move along in an even flow. The PREA Auditor also informed the Garland County Adult Detention Center staff that a PREA Interim Audit report will be submitted 45 days from the conclusion of the facility audit. At the completion of GCADC's PREA Interim Audit Report, Corrective Actions were recommended and established for a 180-day period, to either adjust language in policy or establish consistency in practice.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify if PREA Standards with recommended Corrective Actions were in compliance. This PREA Auditor reviewed documentation adjustments to GCADC's related policies, on-site documentation, interviews, electronic data and website review, as well as observed various facility practices and procedures to verify consistency and competency.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

Garland County Adult Detention Center is a 482 inmate capacity Medium, Minimum, Close Custody, and Special Management County Jail which opened in June 2015. Garland County Adult Detention Center houses male and female inmates ages 18 and older. According to the facility, they do not house youthful inmates. The physical plant consists of approximately 1 building. Garland County Adult Detention Center has 5 multiple occupancy housing units, 5 single occupancy housing units, and 3 open bay dorm housing units. Each housing unit has 1 control center/base which monitors inmate housing and shower areas (most housing locations are two-levels). The additional services within the Garland County Adult Detention Center consists of intake/receiving/booking area, administrative, education, vocational training, recreation, maintenance, mental health offices, and dining halls.

Garland County Adult Detention Center rely heavily on a compilation of camera assistance, staff supervision through sight/sound supervision by Correctional Officers, as well as predictable and random unannounced rounds per shift by supervisory staff (Lieutenant or higher). Garland County Adult Detention Center video technology consists of recorded cameras in strategic locations throughout the facility. To make up for blind spots, Garland County Adult Detention Center relies on consistent and unpredictable staff sight and sound supervision, as well as two-way mirrors. At the time of the PREA Facility Audit, Garland County Adult Detention Center had approximately 96 staff employed, as well as approximately 55 volunteers and individual who may have contact with inmates within their daily roles at Garland County Adult Detention Center. Finally, Garland County Adult Detention Center employs a PREA Investigation Team of 6 staff to investigate allegations of sexual abuse. Garland County Adult Detention Center-related Forensic sexual assault medical exams are conducted off site at National Park Hospital and CHI-St. Vincent's Hospital by a Certified SANE Nurse. National Park Hospital and CHI-St. Vincent's Hospital are also used for other Specialty Services.

## **SUMMARY OF AUDIT FINDINGS**

The PREA site audit of Garland County Adult Detention Center consisted of a 3-day comprehensive assessment (September 25, 2017 through September 27, 2017), related to PREA's mission of prevention, detection, responding to instances of sexual abuse/sexual harassment, and the freedom from retaliation when reporting sexual abuse/harassment. The PREA Institution Audit also consisted of assessing the 43 PREA standards. The assessment of the Garland County Adult Detention Center included an exhaustive facility tour, review of electronic and on-site documents, reviewing investigations and retaliation follow-up documentation, comprehensive interviews with inmates, staff, volunteers, and Garland County Adult Detention Center Administration.

Based on the initial audit findings of 43 total PREA Standards, there were 15 PREA Standards in Compliance, 1 PREA Standard which was Non-Applicable, and 27 PREA Standards which were non-compliant and requiring Corrective Action: Garland County Adult Detention Center had 27 PREA standards area requiring Corrective Action: 115.17, 115.22, 115.31, 115.32, 115.33, 115.34, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.63, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.83, 115.86, 115.87, and 115.89. The identified PREA standard areas requiring Corrective Action were either non-existent, in their beginning stages of compliance and require procedural consistency over time to be considered in compliance, or the institution's policy language did not align with the specific PREA standard.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify if PREA Standards with recommended Corrective Actions were in compliance. This PREA Auditor reviewed documentation adjustments to GCADC's related policies, on-site documentation, interviews, electronic data and website review, as well as observed various facility practice to verify consistency and competency. This PREA Auditor concludes that GCADC is in compliance with the 42 PREA Standards. There was one PREA Standard Not Applicable (115.66).

This PREA Auditor concludes that GCADC is compliant with the 42 PREA Standards (1 PREA Standard was Not Applicable).

Number of standards exceeded: 0

Number of standards met: 42

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)
- 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 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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source to determine compliance for Standard 115.11 Garland County Adult Detention Center submitted their policy 1.1.8 Organizational Structure as evidence of compliance with PREA Standard 115.11. Policy 1.1.8 states, “The PREA Coordinator is a designated upper-level, agency-wide Detention Staff who is allowed sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. The PREA Compliance Manager is a designated Detention Staff who oversees the Detention Center’s compliance with the PREA Standards. The PREA Compliance Manager is not a full time position, but the Detention Center allows sufficient time and authority so the PREA Compliance Manager can develop and implement policies and procedures in an effort to move toward PREA compliance”

The Organizational Chart, which identified Steven Elrod as the Garland County Sheriff’s Office PREA Coordinator who oversees the agency’s efforts to comply with PREA standards in all Garland County DOC facilities. Steven Elrod was also present at the PREA Audit.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

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

According to Garland County Adult Detention Center’s Pre-Audit Questionnaire and a Letter to Auditor submitted by its Chief Deputy (dated 7/28/17) stating, “The Garland County Detention Center does not contract with any entities for the confinement of its inmates.” However, this PREA Auditor did not see any documentation in CCI’s submitted electronic folder to verify compliance with the above-mentioned standard.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### **Standard 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 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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.13. This PREA Auditor reviewed Garland County Adult Detention Center’s Policy 1.2.1 Budget – Staffing and 3.1.5 Security Inspections which states, “Absent exigent circumstances, daily walkthroughs of inmate housing units are conducted as follows: Shift Commander – at least once per shift; Relief Commander – at least twice per shift; Housing Supervisor – at least twice per shift.”

The PREA Auditor also reviewed Post Log Reports submitted through the Pre-Audit Questionnaire and while conducting the on-site audit, which verified unannounced rounds of Supervisory Staff. The auditor also was present on site and observed three unannounced rounds conducted by supervisory staff. Garland County Adult Detention Center employees are prohibited from alerting other employees that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.

This auditor was able to review on-site and discuss Garland County Adult Detention Center’s staffing plan with the facility’s Chief Deputy Sheriff and PREA Compliance Manager.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

#### **Standard 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)

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This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.14. This PREA Auditor reviewed GCADC’s Policy **1.1.3 Adult and Juvenile Separation** which states, “Juveniles and/or Youthful Offenders are not processed or held in the Adult Detention Center.” Additionally, during on-site visit, this PREA Auditor did not observe nor reviewed documentation submitted within the “Daily Population Report (12-month report) that any youthful inmates resided at GCADC.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

#### **Standard 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 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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for This PREA Auditor reviewed GCADC’s 3.1.11 Searches and Control of Contraband which states, *“All security staff are trained on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Detention Deputies may conduct pat searches. Male or female Deputies may conduct a pat search of a male inmate. A female Deputy will pat search all female inmates/arrestees. Strip searches and visual searches are only conducted by the same gender, female-female and male-male. The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. In that event, the circumstances will be documented. No searches or physical examinations will be done on a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown, it may be determined during conversations with the inmate, by the review of medical records through the medical provider, or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. If a new arrestee is of questionable gender and valid identification is not available to confirm the gender, then a female Detention Deputy will conduct the pat search.”*

Additionally, policy 3.1.26 was reviewed which states, *“Inmates shall be allowed to shower, perform bodily functions, and change clothing without “non-medical” staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks, etc.”*

While on-site, this PREA Auditor reviewed inmate search reports, as well as signed training rosters. A random selection of staff training certificates were verified within their training files. All random staff training files selected had trainings completed within the last 12 months.

This PREA auditor concludes this particular standard to be in compliance with the above-mentioned PREA Standard.

### **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)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.16. This PREA Auditor reviewed Garland County Adult Detention Center 3.3.8 Interpretive Services which referenced all the necessary PREA language to meet standard 115.16 policy compliance requirements. An examples of Garland County Adult Detention Center as it pertains to PREA Standard 115.16 states, *“The Detention Center provides interpretive services to all inmates which do not speak, read, write and/or understand the English language well enough to communicate effectively in English. The Detention Center takes appropriate steps to provide equal opportunity for all inmates (regardless of disability or limited English proficiency) to participate in or benefit from all aspects of facility efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Detention Center utilizes “Language Line Solutions” to provide for interpretive services when needed within the facility.”*

Additionally, during staff interviews, staff verified that they have knowledge of “Language Line Solutions” as well “Pacific Interpreters” as resources for LEP inmate interpretation services. This auditor was also able to verify interpretive services while on-site, by calling 1(866) 425-0217, then typing in an facility-specific access code and selecting the appropriate language.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### Standard 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)

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As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.17. GCADC also submitted their Sexual Harassment policy as evidence of compliance with PREA Standard 115.17. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.17.

During this auditor's initial site audit, this auditor interviewed GCADC's HR Director and reviewed HR documentation. The auditor confirmed that GCADC did not consistently perform criminal background records check before enlisting the services of contractors who may have contact with inmates (115.17). Long-term contractors of GCADC who may have contact with inmates are screened, however many short-term contractors who may have contact with inmates are not screened. Also, GCADC did not consistently conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have a system in place for otherwise capturing such information for current employees (115.17). Finally, upon reviewing random employee files, this auditor verified that the practice was inconsistent pertaining to PREA Standards 115.17. Though GCADC's policy may be in place, the practice was not consistent.

Due to this PREA Auditor not observing PREA Standard 115.17 being consistently practiced, compliance could not be concluded. A Corrective Action was established to adjust and mitigate GCADC's HR practice related to PREA Standard (115.17). This PREA auditor will monitor GCADC's practices over a period, before compliance can be concluded.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.17. This PREA Auditor interviewed HR personnel, visually observed GCADC's adjusted HR practices to verify consistency in background checks for contractors. This auditor pulled random files of employees with five or more years of employment and verified that each employee had an updated background check. Finally, the interviewed HR staff could clearly verbalize GCADC's HR process related to PREA Standard 115.17.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### Standard 115.18 Upgrades to facilities and technologies

- 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)

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This PREA Auditor interviewed Garland County Adult Detention Center’s PREA Coordinator and PREA Compliance Manager, who identified that Garland County Adult Detention Center was opened in June 2015. The facility has approximately 293 cameras. The persons designated to assist in the planning of or any future renovations to the existing facility, was and will be responsible for ensuring the guidelines for any modifications of GCADC’s physical plant or its electronic technology, consider the effect upon the agency’s ability to protect inmates from sexual abuse.

Additionally, excerpts from GCADC’s policy 2.2.3 Space Requirements states, “*The Detention Center was designed and constructed so it could operate in compliance with the Arkansas Jail Standards, ACA Adult Local Detention Facilities - 4th Edition, DOJ PREA Standards for Prisons and Jails (2012) and National Commission on Correctional Healthcare Standards for Health Services in Jails standards in order for the operation to be responsive to the standards. The Detention Center was designed and constructed to keep inmates free from sexual abuse. When establishing the Detention Center’s video monitoring system, care was taken to keep inmates free from sexual abuse.*”

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

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

- 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)

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This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.21. This PREA Auditor reviewed Garland County Adult Detention Center policy **3.1.26 Sexual Assault**, which referenced all the necessary PREA language to meet standard 115.21 policy compliance requirements. An excerpt from GCADC’s policy 3.1.26 states, “*It is the responsibility of the inmates, Detention Staff, volunteers, outside service providers, or visitors to report any act that might be considered sexual assault. All reports of sexual abuse are reported promptly.*”

- a. *A thorough investigation is conducted and documented whenever a sexual assault, abuse or threat is reported.*
- b. *When crimes are committed, the perpetrator and victim of, and witnesses to these crimes must be identified, and evidence of these crimes collected and preserved.*
- 2. *Detainees who are victims of sexual abuse have the option to report the incident to a designated staff member other than an immediate point-of-contact line officer. The Detention Center makes available the following for reporting allegations:*
  - a. *Tell a Detention Staff member,*
  - b. *Tell the PREA Compliance Manager,*
  - c. *Fill out an Inmate Grievance form,*
  - d. *Notify Medical Staff, and/or*
  - e. *Utilize PREA hotline as posted above the phones.*
- 3. *In the event of an alleged complaint of sexual assault, the deputy arriving on scene of a reported crime should:*
  - a. *Notify Central Control of the nature of the incident to insure quick response by the Shift Commander who immediately conducts an initial investigation.*
  - b. *Take control of the situation to prevent injury, or further injury, by separating the alleged victim from the alleged abuser.*
  - c. *Place the alleged victim under protective custody and notify Medical Staff.*
    - i. *The medical and psychological trauma of sexual abuse is minimized as much as possible by prompt and appropriate health intervention.*
    - ii. *Advise the alleged victim not to eat, drink, change clothing, wash, bathe, shower, rinse their mouth, brush their teeth, urinate or defecate until examined by a forensic specialist.*
    - iii. *Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services.*



10. *All case records associated with claims of sexual abuse, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with Part 115 (PREA National Standards).*
11. *Upon request a report will be prepared and submitted to the United States Department of Justice.*

This PREA auditor verified through documentation and an interviews with GCADC’s Health Services Administrator that GCADC utilizes the “National Park Hospital” as well as CHI St. Vincent’s Hospital for SANE Services. GCADC also utilizes Ouachita Behavioral Health and Wellness Center as an external victim support resource for inmates who have reported allegations of sexual abuse.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### **Standard 115.22 Policies to ensure 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.22. GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.22. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.22.

This PREA Auditor reviewed GCADC’s policy 3.1.26 and was unable to find clear policy language aligned with PREA Standard 115.22. Though GCADC did not utilize an external entity for investigations, the policy did not clearly reflect that. The policy required clear language regarding PREA Standard 115.22. Additionally, this PREA auditor verified through documentation and an interview the GCADC’s PREA Coordinator and PREA Investigation Team that GCADC is ran by the Garland County Sheriff’s Office (GCSO), who handles its external criminal investigation. GCADC’s PREA Investigator’s assists GCSO’s with gathering any evidentiary information for external investigations.

Though this PREA auditor observed this practice in place and active working at GCADC, the policy only met a portion of PREA Standard 115.22. This PREA Auditor could not conclude compliance due to the language in GCADC’s “Investigations” policy needing more alignment with 115.22. Due to GCADC’s policy not being completely in place at the time of the on-site audit (9/25/17-9/27/17), consistency in practice could not be fully determined and required monitoring over a period before compliance can be concluded. This PREA auditor concluded that this PREA Standard 115.22 was not in compliance with the above-mentioned PREA Standard. A Corrective Action was established.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.22. This PREA Auditor interviewed 1 PREA Investigator and reviewed GCADC’s policy adjustments. This auditor verified that all language in GCADC’s adjusted policy related to PREA Standard 115.22 is aligned with PREA Standard 115.22.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.31 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.31. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.31.

This PREA Auditor reviewed GCADC's policy 1.4.1 Training and Staff Development and concluded that the language in policy 1.4.1 did not clarify the topics discussed within the PREA Training. The topics should be spelled out in the policy as to what will be covered in the PREA trainings. This auditor also reviewed the physical files of 8 staff, as well as training documentation submitted in GCADC's Pre-Audit Questionnaire. All files contained the documentation verifying HR meeting with new hires about PREA policy. However, the auditor noticed that GCADC PREA trainings were documented as being 1 hour in length. This does not seem like enough time to effectively and comprehensively train staff on the 10 PREA training areas as stated in PREA Standard 115.31(a).

This PREA Auditor could not conclude compliance due to the language in GCADC's 1.4.1 policy needing more alignment with 115.31(a) at the time of the on-site audit (9/25/17-9/27/17). Additionally, this PREA auditor could not conclude compliance due to the 1-hour length of PREA trainings not being enough time to comprehensively cover the 10 areas identified in PREA Standard 115.31(a). Consistency in practice could not be fully determined and required monitoring over a period before compliance can be concluded. This PREA auditor concluded that this PREA Standard 115.31 was not in compliance with the above-mentioned PREA Standard. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.31. This PREA Auditor reviewed GCADC's adjusted training curriculum and example trainings during GCADC's Corrective Action period. GCADC has adjusted their trainings and dedicated one full day to PREA trainings for staff (related to 115.31). This auditor also reviewed GCADC's policy adjustments. This auditor verified that all language in GCADC's adjusted policy related to PREA Standard 115.31 is aligned with PREA Standard 115.31

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.32 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.32. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.32.

This PREA Auditor reviewed Garland County Adult Detention Center’s policy 1.4.1. This policy needed better clarity as to the contents of PREA trainings. The language in policy 1.4.1 needed more clarification regarding PREA’s zero tolerance for sexual harassment and sexual abuse. Additionally, this PREA Auditor could only verify that long term volunteers and contractors who had contact with inmates received PREA training, however short-term volunteers and contractors who had contact with inmates did not receive PREA Training. Due to the inconsistency in the practice, the auditor could not confirm that short-term volunteers and contractors received training. Finally, this auditor reviewed the files of 3 long-term volunteers and 1 Contractor. The auditor also interviewed 1 volunteer and 1 contractor. Both interviewees knew about PREA’s zero tolerance as well as their reporting responsibilities., however nothing was in their files which verified PREA-related trainings.

This PREA Auditor could not conclude compliance due to the language in GCADC’s 1.4.1 policy needing more alignment with 115.32 at the time of the initial on-site audit (9/25/17-9/27/17). Additionally, this PREA auditor could not conclude compliance due to no physical verification that short-term volunteers and contractors received training. Consistency in practice could not be fully determined and required monitoring over a period before compliance can be concluded. This PREA auditor concluded that this PREA Standard 115.32 was not in compliance with the above-mentioned PREA Standard. A Corrective Action was established.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.32. This PREA Auditor reviewed GCADC’s adjusted training curriculum and example volunteer and contractor training files from during GCADC’s Corrective Action period. GCADC made adjustment to their trainings by establishing a condensed PREA training for volunteers and contractors. GCADC also created a “*PREA Short-Term Contractor Acknowledgement Statement*” as evidence of contractors/volunteers being trained. This auditor also reviewed GCADC’s policy adjustments. This auditor verified that all language in GCADC’s adjusted policy, related to PREA Standard 115.32, is in alignment.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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)

**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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.33 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.33. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.33.

This PREA Auditor reviewed GCADC’s 3.1.26 Sexual Assault, 3.3.8 Interpretive Services, 3.5.1 Booking and Orientation which referenced all the necessary language to meet PREA Standard 115.33 policy compliance requirements. Though the policy language meets the PREA Standard 115.33, this auditor did not observe this standard being met for LEP inmates. Also during interviews with inmates, could not consistently verify interpretive services access.

Additionally, though PREA videos were observed playing on each housing dayroom each day of the on-site visit, GCADC did not produce documentation that inmates participated in PREA Education. Additionally, this auditor observed the PREA videos being played on the dayroom floor, however due to the noise level on the dayroom floor, the videos seemed ineffective. Though GCADC’s policy language met PREA Standard 115.33 policy compliance requirements, this PREA Auditor did not observe PREA Standard 115.33 being consistently practiced, compliance could not be concluded. A Corrective Action was established to adjust and mitigate GCADC’s practices, the monitor GCADC’s practices over a period, before compliance can be concluded.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.33. This PREA Auditor interviewed a random selection of staff and inmates (specifically LEP inmates), visually observed GCADC’s practices to verify consistency. Each staff could verbalize the process and their role in response an

LEP inmate requiring services. This auditor also interviewed inmates who shared that LEP services signage is posted throughout the institution where inmates frequent. This auditor also observed LEP services signage while onsite. Additionally, this auditor observed GCADC's adjustments to their inmate education and orientation regarding PREA. GCADC has partnered with a volunteer who conducts weekly orientation and PREA education weekly (or more if needed). These PREA education and orientation classes are conducted in an identified private space, where clear communication, questions, and answer engagement can occur.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **Standard 115.34 Specialized training: 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.34 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.34. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.34.

This PREA Auditor reviewed Garland County Adult Detention Center's 1.4.1 Training and Staff Development, which referenced all the necessary PREA language to meet standard 115.34 policy compliance requirements. An excerpt from GCADC's 1.4.1 policy as it pertains to PREA Standard 115.34 states, *"In addition to the general training provided to all employees, to the extent the Detention Center itself conducts sexual abuse investigations, investigators receive training in conducting such investigations in confinement settings to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral."*

The auditor also interviewed and reviewed files and documentation of GCADC's four PREA Investigators, to verify specialized sexual abuse and sexual harassment investigation training. Three of the four investigators had the appropriate trainings and documentation. GCADC's one investigator who was responsible for GCADC's criminal investigations was scheduled to attend one appropriate training to meet PREA Standard 115.34. This auditor also reviewed documentation from GCADC's training tracking system and verified compliance of the three GCADC PREA Investigators, and verified that each of their specialized training was up-to-date.

During GCADC's Corrective Action period (10/2017-4/2018), this PREA Auditor follow-up to verify that GCADC's criminal investigator attended the training to update his specialized training file. Documentation was submitted to verify training attendance and participation. Additionally, during follow-up visit to GCADC (4/5/18-4/6/18), this auditor also visually verified compliance by reviewing all investigator's files.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

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

- 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 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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.35. This PREA Auditor reviewed Garland County Adult Detention Center’s, 4.2.1 Health Service Management which referenced all the necessary PREA language to meet standard 115.35 policy compliance requirements. An excerpt from GCADC’s 4.2.1 state, “All new full-time employees complete a formalized, 40 hour orientation program before undertaking their assignments. The Health Authority ensures documentation of same. At a minimum, the orientation program includes instruction in the following:

- a. The purpose, goals, policies, and procedures for the facility /agency
- b. Security and contraband regulations
- c. Key control
- d. Appropriate conduct with inmates
- e. Responsibilities and rights of employees
- f. Universal precautions
- g. Occupational exposure
- h. Personal protective equipment
- i. Bio-hazardous waste disposal
- j. An overview of the correctional field
- k. How to detect and assess signs of sexual abuse and sexual harassment;
- l. How to preserve physical evidence of sexual abuse;
- m. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- n. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.”

The auditor also reviewed a sample of 10 medical and mental health training files to verify training documentation. Each electronic training tracking file and physical file had the appropriate documentation and PREA training verification. The PREA Auditor also interviewed GCADC’s Health Services Administrator and Senior Mental Health Clinician, to verify specialized sexual abuse and sexual harassment training, as well as reporting sexual abuse and sexual harassment procedures. Each was able to respond to questions regarding medical and mental health’s roles when a PREA-Related incidents occurs within GCADC.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

#### **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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.41. GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.41. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.41.

This PREA Auditor reviewed GCADC’s policy 3.6.1 Classification. Though portions of GCADC’s policy had PREA-related language, it did not properly clarify the risk screening tool’s assessment questions/criteria as stated in PREA Standard 115.41. Examples of what needed be added within GCADC’s policy to strengthen its compliance with PREA-related standard 115.41 was: “The objective screening instrument shall include, at minimum, the following criteria assessment questions:

- 1. The presence of a mental, physical or developmental disability;

2. Age;
3. Physical build;
4. Previous incarcerations;
5. Exclusively nonviolent criminal history;
6. Prior convictions for sex offenses against an adult or child;
7. Is, or is perceived to be, gay, lesbian, bisexual, transgender, intersex or gender nonconforming;
8. Previously experienced sexual victimization;
9. Prior acts of sexual abuse, prior convictions for violent offenses and/or history of prior institutional violence or sexual abuse; and
10. Offender's perception of vulnerability"

Additionally, this PREA Auditor reviewed GCADC's "PREA Intake Form," which was being used by GCADC's Intake and Classification team. GCADC's "PREA Intake Form" did not capture important components to assist in room, housing, supervision, and programmatic decisions. Additionally, GCADC's policy needed more clarification. The language in GCADC's policy should be adjusted to meet PREA Standard 115.41, and monitored over a period before compliance can be determined. Due to the policy adjusts/changes not being in place, consistency in practice could not be determined. This PREA Auditor could not conclude compliance. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.41. This PREA Auditor interviewed the Classification Director who displayed and demonstrated GCADC's new electronic system used at inmate booking and classification. The system captures each of the requirements within PREA Standard 115.41. GCADC's new system also captures other important information which assists with room, housing, supervision, and programmatic decisions. GCADC's Classification Director also demonstrated how the system takes inmate information, scores the inmate, identifies each inmate's risk/vulnerability level, then the appropriate bed/housing is assigned. Additionally, the system disallows any direct supervision staff to change an inmate's room assignment, housing, programmatic status unless overridden by a supervisory staff. Additionally, a random selection of intake staff could verbalize the process demonstrated to the Classification Director. Finally, the language in GCADC's policy was adjusted to meet PREA Standard 115.41.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

#### **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)
- 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.42 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.42. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.42.

This PREA Auditor reviewed GCADC's policy 3.6.1 Classification which referenced, "All inmates shall be assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This information is used to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. At a minimum, ten (10) percent of the rated capacity of the Detention Center is to be made available for single occupancy use. (See 2.2.1 Detention Center Capacity) These cells are provided when indicated for the following:

- a. maximum and close custody;
- b. inmates with severe medical disabilities;

- c. inmates suffering from serious mental illness;
- d. sexual predators; and
- e. inmates likely to be exploited or victimized by others

Though portions of GCADC’s policy had PREA-related language, it did not properly clarify the how the information obtained from the risk screening tool would be used. Furthermore, GCADC’s policy had no mention of how the risk screening tool is used regarding transgender and intersex inmates. This auditor submitted some examples which should be added within GCADC’s policy to strengthen its alignment and compliance with PREA Standard 115.42. Additionally, when interviewing GCADC’s Classification staff, they could not identify how their PREA Risk assessment screening tool is used in identifying room, housing, supervision, and programmatic assignments.

The PREA Coordinator and PREA Compliance Manager also verified the PREA Intake Form was not consistently used in identifying an inmate placement, supervision, and programming within the facility. Additionally, this PREA Auditor confirmed that housing unit staff had the autonomy to change an inmate’s room and bedding assignment without seeking approval from the Classification or Supervisory staff approval. Furthermore, the housing staff did not have any risk screening information when making such room and bedding adjustments. Additionally, this PREA Auditor reviewed GCADC’s “*PREA Intake Form*,” which was being used by GCADC’s Intake and Classification team. GCADC’s “*PREA Intake Form*” did not capture important components to assist in room, housing, supervision, and programmatic decisions. Additionally, GCADC’s policy needed more clarification. The language in GCADC’s policy should be adjusted to meet PREA Standard 115.42, and monitored over a period before compliance can be determined.

Due to inconsistent Classification practice being in place to confirm that the risk assessment screening tool (*PREA Intake Form*) is used to assist in placement, supervision, and programming decisions, compliance cannot be confirmed. Additionally, due to the policy adjusts/changes not being in place, consistency in practice could not be determined. This PREA Auditor could not conclude compliance. A Corrective Action was established.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.42. This PREA Auditor interviewed the Classification Director who displayed and demonstrated GCADC’s new electronic system used at inmate booking and classification. The system captures each of the requirements within PREA Standard 115.42. GCADC’s new system also captures other important information which assists with room, housing, supervision, and programmatic decisions. GCADC’s Classification Director also demonstrated how the system takes inmate information, scores the inmate, identifies each inmate’s risk/vulnerability level, then the appropriate bed/housing is assigned. Additionally, the system disallows any direct supervision staff to change an inmate’s room assignment, housing, programmatic status unless overridden by a supervisory staff. Additionally, a random selection of intake staff could verbalize the process demonstrated to the Classification Director. Finally, the language in GCADC’s policy was adjusted to meet PREA Standard 115.42.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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)

**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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.43 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.43. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.43.

Though portions of GCADC’s policy 3.4.1 Special Management Units had PREA-related language, it did not properly clarify specifics related to this PREA Standard. This auditor recommended that GCADC adopt the language of PREA Standard 115.43 within their own policy (in the applicable section), then establish their consistency of practice around such language within the standard. This would give

GCADC staff and future PREA Auditors clear understanding of the PREA-Related components within the policy, rather than having to jump around the policy section to identify if all the PREA-related policy pieces are in place.

Additionally, this PREA auditor also toured and reviewed documentation from GCADC's Protective Custody and Special Management Units (SMU). GCADC's physical plant was extremely unique in their set-up. Though some individuals were in Special Management Units, they were still afforded opportunity to be out of their cell and afforded access. This is because each of their housing units had a main dayroom and multiple sub-dayrooms (up to 8 in any particular). This allowed for inmate in Special Management Units to still can be out of their rooms, eat, read and watch television, hygiene, shower, etc. without being in the mainstream population.

This auditor also interviewed 3 inmates who identified as LGBTI. All 3 inmates shared that they have not been placed in a SMU solely because of their risk level. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification. Additionally, due to the policy adjust/change not being in place, consistency in practice cannot be determined and should monitored over a period before compliance can be determined. A Corrective Action was established.

During GCADC's Corrective Action period, GCADC submitted their adjusted 3.4.1 Special Management Units policy related PREA Standard 115.43. This auditor reviewed the adjusted policy and concluded the GCADC's policy is aligned with PREA Standard 115.43. Finally, when this auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), onsite documentation verified compliance with PREA Standard 115.43.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.51 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.51. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.51.

This PREA Auditor reviewed Garland County Adult Detention Center's to verify all the necessary PREA language to meet standard 115.51 policy compliance requirements. Though portions of GCADC's policy 3.1.26 Sexual Assault had PREA-related language, it did not properly clarify specifics related to this PREA Standard 115/51. This auditor recommended that GCADC align its policy language with PREA Standard 115.51. This will give GCADC staff and future PREA Auditors clear understanding of the PREA-related components within the policy, rather than having to jump around GCADC's policy sections to identify if all the PREA-related policy language is in place.

Additionally, this PREA auditor interviewed 28 inmates regarding their knowledge on how to report sexual abuse and sexual harassment. The consensus of inmate had clear knowledge on internal avenues of reporting. However, less the 5 inmates knew about external reporting avenues or third-party reporting. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification and alignment with PREA Standard 115.51. Additionally, due to the policy adjust/change not being in place, consistency in practice could not be determined and should monitored over a period before compliance can be determined. Additionally, inmates need further education on their accesses to third-party and external public or private entities. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.51. This PREA Auditor interviewed a random selection of 15 inmates to verify if external and third-party reporting education was improved and consistency established by GCADC. Each inmate could identify external and third-party reporting avenues. Additionally, information was posted through housing areas with telephone number, regarding external and third-party

reporting. Finally, GCADC's 3.1.26 Sexual Assault policy was adjusted. The policy order was adjusted and aligned with PREA Standard 115.51.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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)

**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.**

PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.52. This PREA Auditor reviewed Garland County Adult Detention Center's policy 3.3.3 Inmate Grievance, which referenced all the necessary PREA language to meet standard 115.52 policy compliance requirements. Excerpts from GCADC's policy 3.3.3 Inmate Grievance as it pertains to PREA Standard 115.52 states, "There is no imposed time limit when an inmate may submit a grievance regarding an allegation of sexual abuse and they may be filed at any time of the day or night. PREA related grievances are subject to the following:

- a. An inmate who alleges sexual abuse by a staff member may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance is not referred to a staff member who is the subject of the complaint.
- b. The Security Director or PREA Coordinator shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90 day time period shall not include time consumed by inmates in preparing any administrative appeal.
  - i. May claim an extension of time to respond, up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The inmate shall be notified in writing of any such extension and provide a date by which a decision will be made.
- c. At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension; the inmate may consider the absence of a response to be a denial at that level.
- d. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.
- e. After receiving such a grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the staff member shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to the Shift Commander on duty so that immediate action may be taken. An initial response shall be provided within 48 hours, with a final decision provided within 5 days excluding weekends and holidays.
- f. An inmate may receive a disciplinary for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Additionally, this PREA auditor interviewed 28 random inmates, 17 security staff, and specialized staff, who all understood the understood GCADC's administrative procedures to address inmate grievances regarding sexual abuse or sexual harassment. Additionally, each understood that there is no time limit on grievances regarding sexual abuse or sexual harassment.

This PREA auditor concludes this particular standard to be in compliance with the above-mentioned PREA Standard.

### **Standard 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.53 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.53. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.53.

This auditor did not see enough PREA-related language in GCADC’s policy to determine that all the necessary PREA language was present to meet standard 115.53 policy compliance requirements. GCADC’s policy 3.1.26 Sexual Assault had very little PREA-related language, and does not properly clarify specifics related to this PREA Standard 115.53. This auditor recommended that GCADC adopt aligning language to PREA Standard 115.53 within their own policy (in the applicable section) then establish their consistency of practice around such language within the standard. This will give GCADC staff and future PREA Auditors clear understanding of the PREA-Related components within the policy, rather than having to jump around policy sections to identify if all the PREA-related policy pieces are in place.

This PREA Auditor also reviewed GCADC’s Inmate Handbook, which gives clear information regarding internal and external counseling services available to inmates. Also, reviewed documentation which verifies that the facility does maintain an Memorandum of Understanding (MOU) with Ouachita Behavioral Health and Wellness, through which the GCADC’s Mental Health Professionals can refer inmates for professional counseling services. This auditor also reviewed Arkansas Department of Human Services Performance Based contract which states “A letter signed by the Community Mental Health Clinic (CMHC) Board Chairman, indicating that the CMHC Board has reviewed the plan, and is committed to its full implementation, including delivery of services to the following populations in the priorities listed below.

- a. Individuals subject to Act 911 of 1989.
- b. Individuals who are committed to the public mental health system by the Courts for dangerousness to others.
- c. Forensic populations, including persons with a mental illness who are incarcerated in city or county detention facilities, released from these facilities, or from state detention facilities, or are on probation; except to the extent that the law provides for mental health services to be provided by the Department of Corrections or the Department of Community Punishment.”

This PREA Auditor could not conclude compliance due to the language in GCADC’s policy needing more PREA-related clarification. Finally, due to the policy adjust/change not being in place, consistency in practice cannot be determined and should monitored over a period before compliance can be determined. A Corrective Action was established.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.53. This auditor reviewed GCADC’s adjusted policy to verify if aligned with PREA Standard 115.53. This auditor also toured selected portions of the institution, reviewed medical and mental health department documentation from within the corrective action period, and observed demonstrative staff consistency in practice and knowledge of adjusted policy. This auditor observed evidence from reviewing documentation and dialogue, to concluded compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

**Standard 115.54 Third-party 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.54 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.54. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.54.

This PREA Auditor reviewed GCADC's policy 3.1.26 Sexual Assault to verify if all the necessary PREA language to meet standard 115.54 policy compliance requirements. GCADC's policy 3.1.26 Sexual Assault had very little PREA-related language pertaining to standard 115.54. It did not properly clarify specifics related to PREA Standard 115.54. This auditor recommended that GCADC align their policy language with PREA Standard 115.54, to give GCADC staff and future PREA Auditors clear understanding of the PREA-related components within GDAC's policy. Additionally, this PREA Auditor did verify posters, posted throughout facility which identified third party options such as telling family, friends, and counsel.

Finally, this PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification. Additionally, due to the policy adjustment/change not being in place, consistency in practice cannot be determined and should monitored over a period before compliance can be determined. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.54. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.54. This auditor also toured selected housing locations and visitation rooms of the institution, to verify if signage and posters which identified third party options were still present. All signage was present. This auditor also interviewed a random selection of inmates. Each interviewed inmate knew of their third-party reporting options, as well as who they can report. This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

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

- 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 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.**

The PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.61. This PREA Auditor reviewed WIDOC's Executive Directive #72 Sexual Abuse and Sexual Harassment in Confinement (PREA) XIV C. 1. (Page 11), which referenced all the necessary PREA language to meet standard 115.61 policy compliance requirements. Excerpts from WIDOC's Executive Directive #72 as it pertains to PREA Standard 115.61 states, "*Employees shall accept reports made verbally, in writing, anonymously, and from third parties; promptly document any verbal reports; and immediately report:*

- a. *Any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the DOC;*
- b. *Any incidents of retaliation against offenders or employees who reported such an incident; and/or*
- c. *Any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation."*

This auditor interviewed 17 random staff, covering multiple shifts and disciplines within CCI. This auditor asked all the same question, “If you witnessed or was informed of sexual abuse or sexual harassment here at CCI, what steps do you take in reporting this alleged sexual abuse or sexual harassment?” Each interviewed staff verbally shared their reporting procedures based on their specific role. The responses were consistent with PREA reporting standards. The PREA auditor also verified the most current PREA training of each randomly selected staff. Each staff’s file was in compliance with PREA training standards. Finally, the auditor interviewed the CCI PREA Investigators, who were well versed in their responsibilities, once any reports of sexual harassment and sexual abuse occur.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### **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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.62. This PREA Auditor reviewed Garland County Adult Detention Center’s policy 3.1.26, which referenced all the necessary PREA language to meet standard 115.62 policy compliance requirements. Excerpts from GCADC’s policy 3.1.26 as it pertains to PREA Standard 115.62 states, “*Inmates at high risk for sexual victimization shall only be placed in segregated housing after an assessment of all available alternatives has been made, and it has been determined that there are no other alternative available means of separation from likely abusers. Inmates placed in segregated housing for this purpose shall have equal access to all programs and privileges.*”

This auditor also interviewed 17 random security and specialized staff, within GCADC. This auditor asked all the same question, “If you learn an inmate is at risk of imminent sexual abuse, what actions do you take to protect the inmate...and how quickly do you take such actions?” Each interviewed staff was able to verbally share that they would immediately report the inmate’s imminent risk issue to their immediate supervisor, or the highest ranking officer on duty, with the goal of further investigation or reassigning the inmate to another housing location pending the outcome of further investigation.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### **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)

**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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.63 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.63. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and

reviewed onsite documentation to verify consistency with meeting PREA Standard 115.63.

This PREA Auditor reviewed Garland County Adult Detention Center's policy 3.1.26 to verify all the necessary PREA language to meet standard 115.63 policy compliance requirements. GCADC's policy 3.1.26 did not contain the necessary language to confirm compliance with PREA standard 115.63. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification. Additionally, due to the policy adjustment/change not being in place, consistency in practice cannot be determined and should be monitored over a period before compliance can be determined. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.63. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.63. This auditor also interviewed GCADC's PREA Compliance Manager and PREA Coordinator. Each verified procedures of reporting to other confinement facilities. This auditor also reviewed a letter submitted by GCADC to another facility (within the corrective action period), which contained all the components to comply with PREA Standard 115.63. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **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)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.64. This PREA Auditor reviewed Garland County Adult Detention Center's policy 3.1.26 which referenced all the necessary PREA language to meet standard 115.64 policy compliance requirements. Excerpts from GCADC's policy 3.1.26 as it pertains to PREA Standard 115.64 states, "In the event of an alleged complaint of sexual assault, the deputy arriving on scene of a reported crime should:

- a. Notify Central Control of the nature of the incident to insure quick response by the Shift Commander who immediately conducts an initial investigation.
- b. Take control of the situation to prevent injury, or further injury, by separating the alleged victim from the alleged abuser.
- c. Place the alleged victim under protective custody and notify Medical Staff.
  - i. The medical and psychological trauma of sexual abuse is minimized as much as possible by prompt and appropriate health intervention.
  - ii. Advise the alleged victim not to eat, drink, change clothing, wash, bathe, shower, rinse their mouth, brush their teeth, urinate or defecate until examined by a forensic specialist.
  - iii. Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services.
  - iv. Ensure that all alleged victims shall be transported to the appropriate outside facility for prompt forensic and medical treatment and crisis intervention counseling as required.
- d. Any inmate reporting sexual assault/abuse during their present incarceration is provided with a medical evaluation and necessary treatment by a qualified health care professional.
  - i. Administer necessary first aid.
  - ii. Prepare the appropriate ER paperwork.
  - iii. Document findings in individual's medical record.
  - iv. Upon the return of the inmate from the emergency room, ensure the paperwork from the ER is returned and reviewed, and that the alleged victim is referred to mental health and medical for appropriate follow-up.
- e. Place the alleged perpetrator(s) under administrative confinement, pending investigation of the complaint by the PREA Coordinator.
- f. Update Central Control and advise if further assistance as needed. Other situations may necessitate different actions by the discovering deputy. However, priority shall always be given to preservation of life.

- g. *Notify the PREA Coordinator and Security Director of the situation.*
- h. *Secure areas where the assault is alleged to have occurred, and treat the area as a crime scene. Protect the crime scene and preserve evidence:*
  - i. *Protect all areas where physical evidence exist i.e.; lock down inmates; isolate them away from the scene, etc.*
  - ii. *Take custody of physical evidence and retain it in your possession until it can be placed into evidence. If evidence is in a cell, simply isolate the cell to avoid any contamination.*
  - iii. *An evidence property receipt will be utilized to establish and maintain the chain of custody.*
- i. *Observe all conditions, events, and remarks and record them for the Incident Report.*

This auditor also interviewed 15 random security and specialized staff within GCADC, as well 1 medical and 1 mental health staff. This auditor asked all the same question, “If you witnessed or were informed of sexual abuse or sexual harassment here at CCI, what steps do you take in reporting this alleged sexual abuse or sexual harassment and preserving/protecting the alleged crime scene?” Each interviewed staff verbally shared their reporting procedures and procedures, within their specific role, to preserve/protect the crime scene. All trainings of these 17 random staff was in compliance with PREA training standards, which included PREA first responder training.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

### **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)

**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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.65. This PREA Auditor reviewed Garland County Adult Detention Center’s policy 3.1.26, which referenced all the necessary PREA language to meet standard 115.65 policy compliance requirements. Excerpts from GCADC’s policy 3.1.26 states, “*It is the responsibility of the inmates, Detention Staff, volunteers, outside service providers, or visitors to report any act that might be considered sexual assault. All reports of sexual abuse are reported promptly.*

- a. *A thorough investigation is conducted and documented whenever a sexual assault, abuse or threat is reported.*
- b. *When crimes are committed, the perpetrator and victim of, and witnesses to these crimes must be identified, and evidence of these crimes collected and preserved.*
- c. *Detainees who are victims of sexual abuse have the option to report the incident to a designated staff member other than an immediate point-of-contact line officer. The Detention Center makes available the following for reporting allegations:*
  - a. *Tell a Detention Staff member,*
  - b. *Tell the PREA Coordinator,*
  - c. *Fill out an Inmate Grievance form,*
  - d. *Notify Medical Staff, and/or*
  - e. *Utilize PREA hotline as posted above the phones.*
- d. *In the event of an alleged complaint of sexual assault, the deputy arriving on scene of a reported crime should:*
  - a. *Notify Central Control of the nature of the incident to insure quick response by the Shift Commander who immediately conducts an initial investigation.*
  - b. *Take control of the situation to prevent injury, or further injury, by separating the alleged victim from the alleged abuser.*
  - c. *Place the alleged victim under protective custody and notify Medical Staff.*
    - i. *The medical and psychological trauma of sexual abuse is minimized as much as possible by prompt and appropriate health intervention.*
    - ii. *.Advise the alleged victim not to eat, drink, change clothing, wash, bathe, shower, rinse their mouth, brush their teeth, urinate or defecate until examined by a forensic specialist.*

- iii. *Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services.*
    - iv. *Ensure that all alleged victims shall be transported to the appropriate outside facility for prompt forensic and medical treatment and crisis intervention counseling as required.*
  - e. *Any inmate reporting sexual assault/abuse during their present incarceration is provided with a medical evaluation and necessary treatment by a qualified health care professional.*
    - i. *Administer necessary first aid.*
    - ii. *Prepare the appropriate ER paperwork.*
    - iii. *Document findings in individual's medical record.*
    - iv. *Upon the return of the inmate from the emergency room, ensure the paperwork from the ER is returned and reviewed, and that the alleged victim is referred to mental health and medical for appropriate follow-up.*
  - f. *Place the alleged perpetrator(s) under administrative confinement, pending investigation of the complaint by the PREA Coordinator.*
  - g. *Update Central Control and advise if further assistance as needed. Other situations may necessitate different actions by the discovering deputy. However, priority shall always be given to preservation of life.*
    - a. *Notify the PREA Coordinator and Security Director of the situation.*
    - b. *Secure areas where the assault is alleged to have occurred, and treat the area as a crime scene. Protect the crime scene and preserve evidence:*
      - i. *Protect all areas where physical evidence exist i.e.; lock down inmates; isolate them away from the scene, etc.*
      - ii. *Take custody of physical evidence and retain it in your possession until it can be placed into evidence. If evidence is in a cell, simply isolate the cell to avoid any contamination.*
      - iii. *An evidence property receipt will be utilized to establish and maintain the chain of custody.*
    - c. *Observe all conditions, events, and remarks and record them for the Incident Report.*
  - h. *The Shift Commander or designee shall review and sign the reports and ensure all copies are distributed. Reports are forwarded to the following:*
    - a. *Chief Deputy*
    - b. *Security Director*
    - c. *PREA Coordinator*
    - d. *Criminal Investigation Division (CID)."*

This PREA Auditor also verified through reviewing PREA-related investigation reports Each report verified that a coordinated response was in place. During the on-site audit, this PREA auditor reviewed GCADC's "Medical Response Protocol", which identified medical member's roles and responsibilities when a PREA-related incident occurs. Additionally, this PREA auditor interviewed GCADC's security staff and their PREA Investigation Team. Each investigator was able to identify their coordinated duties within their roles, when an incident of sexual abuse has occurred.

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- N/A 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.**

According to a Garland County Adult Detention Center, no collective bargaining agreements have been entered into or renewed since August 20, 2012, or since the last PREA audit. According to a letter from Chief Deputy of Corrections, "*The Garland County Sheriff's Office nor its Detention Centers are part of a union. As such the agency has not nor will enter into any agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation.*"

This PREA auditor concludes this particular standard (115.66) to be Not Applicable to the above-mentioned PREA Standard.

### **Standard 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.67 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.67. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.67.

This PREA Auditor reviewed Garland County Adult Detention Center's policy 3.1.26 Sexual Abuse to verify all the necessary PREA language to meet standard 115.67 policy compliance requirements. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification. This PREA auditor also interviewed the PREA Investigation Team members, as well as mental Health staff. There was no documentation that verified that retaliation monitoring is occurring when a PREA incident/investigation is conducted. This PREA Auditor recommend developing a "*Retaliation Monitoring Form*," which includes: date and time of monitoring checks, documentation notes, as well as signatures of monitoring officer and the person being monitored.

Finally, due to the policy adjustment/change not being in place, consistency in practice cannot be determined and should monitored over a period before compliance could be determined. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.67. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.67. This auditor concluded that GCADC's adjusted 3.1.26 Sexual Abuse policy was aligned with PREA Standard 115.67. This auditor also reviewed 3 completed investigations which occurred during GCADC's corrective action period, to verify if retaliation monitoring was consistently administered throughout each investigation. Each investigation had documented retaliation monitoring forms attached. This auditor also received a copy of GCADC's "*Retaliation Monitoring Form*," as additional evidence of compliance. This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.68 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.68. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.68.

Though portions of GCADC's policy 3.4.1 Special Management Units had PREA-related language, it did not properly clarify specifics related to this PREA Standard. This auditor recommended that GCADC adopt the language of PREA Standard 115.68 within their own policy (applicable to section 115.43), then establish their consistency of practice around such language within the standard. This would give GCADC staff and future PREA Auditors clear understanding of the PREA-Related components within the policy, rather than having to jump around the policy section to identify if all the PREA-related policy pieces are in place.

Additionally, this PREA auditor also toured and reviewed documentation from GCADC's Protective Custody and Special Management Units (SMU). GCADC's physical plant was extremely unique in their set-up. Though some individuals were in Special Management Units, they were still afforded opportunity to be out of their cell and afforded access. This is because each of their housing units had a main dayroom and multiple sub-dayrooms (up to 8 in any particular). This allowed for inmate in Special Management Units to still can be out of their rooms, eat, read and watch television, hygiene, shower, etc. without being in the mainstream population. This auditor also interviewed 3 inmates who identified as LGBTI. All 3 inmates shared that they have not been placed in a SMU solely because of their risk level.

This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification. Additionally, due to the policy adjust/change not being in place, consistency in practice cannot be determined and should monitored over a period before compliance can be determined. A Correction Action was established.

During GCADC's Corrective Action period, GCADC submitted their adjusted 3.4.1 Special Management Units policy related PREA Standard 115.68. This auditor reviewed the adjusted policy and concluded the GCADC's policy is aligned with PREA Standard 115.68 (applicable to 115.43). Finally, when this auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), onsite documentation verified compliance with PREA Standard 115.68.

This PREA auditor concludes that GCJDC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.71 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.71. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.71.

This PREA Auditor reviewed Garland County Adult Detention Center's policy 3.1.26 Sexual Abuse to verify all the necessary PREA language to meet standard 115.71 policy compliance requirements. GCADC's policy 3.1.26 did not clarify the PREA administrative and criminal investigation. The submitted policy by GCADC highlighted what a security staff does, rather showing the distinct procedures of a PREA investigator who conducts administrative investigation and who conducts criminal investigation.

While on-site, the PREA Investigation team were in synchronized in sharing how they conduct investigations. They also verbalized and submitted documentation where they followed protocol pertaining to conducting investigations. Though GCADC's practice appeared to be in place, GCADC's policy 3.1.26 Sexual Abuse is not aligned with the practice. Both policy and consistent practice must be aligned for the PREA standard 115.71 to be in compliance. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more alignment and clarification. Additionally, due to the policy adjust/change not being in place, compliance cannot be

concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.71. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.71. This auditor concluded that GCADC's adjusted 3.1.26 Sexual Abuse policy was aligned with PREA Standard 115.71. This auditor also reviewed 3 completed investigations which occurred during GCADC's corrective action period, and verified that GCADC's investigative practices have improved. GCADC developed their retaliation monitoring throughout each investigation. Each investigation had documented retaliation monitoring. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.72 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.72. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.72.

This PREA Auditor reviewed GCADC's to verify all the necessary language to meet PREA Standard 115.72 policy compliance requirements. In reviewing excerpts from GCADC's policy 3.1.26 Sexual Abuse as it pertains to PREA Standard 115.72, this auditor concluded that GCADC's policy 3.1.26 did not contain the necessary language to confirm compliance with PREA standard 115.72. This auditor also verified through 3 random investigations where "*Preponderance of the Evidence*" is utilized in determining the outcome of allegations of sexual abuse and sexual harassment. Though each investigation had the appropriate preponderance of evidence language, GCADC's policy language did not match its practice. This PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more PREA-related language. Additionally, due to the policy adjust/change not being in place, consistency in practice could not be determined and should be monitored over a period before compliance can be concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.72. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.72. This auditor concluded that GCADC's adjusted 3.1.26 Sexual Abuse policy was aligned with PREA Standard 115.72. This auditor also reviewed 3 completed investigations which occurred during GCADC's corrective action period, and verified that GCADC's investigative practices have improved. GCADC continued to utilize "*Preponderance of the Evidence*" in determining the outcome of allegations of sexual abuse and sexual harassment. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.73 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.73. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.73.

This PREA Auditor reviewed Garland County Adult Detention Center’s to verify all the necessary PREA language to meet standard 115.73 policy compliance requirements. In reviewing excerpts from GCADC’s policy 3.1.26 as it pertains to PREA Standard 115.73, this auditor concluded that GCADC’s policy 3.1.26 did not contain aligning language to confirm compliance with PREA standard 115.73. This auditor also interviews GCADC’s PREA Investigators, as well as reviewed 2 random investigation to verify if the alleged victim is being notified of the outcome of concluded investigations. This PREA Auditor could not verify through GCADC templates, forms, or other documentation to conclude that this practice is consistently occurring.

Finally, this PREA Auditor could not conclude compliance with PREA Standard 115.73, due to victim notification not being documented or verifiable in GCADC’s completed investigation packets. Also, this auditor could not conclude compliance with PREA Standard 115.73, due to the language in GCADC’s policy needing more PREA-related clarification. Due to the policy adjust/change not being in place, and consistency in practice could be verified, this PREA Standard 115.73 should monitored over a period before compliance could be concluded.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.73. This auditor reviewed GCADC’s adjusted policy to verify if aligned with PREA Standard 115.73. This auditor concluded that GCADC’s adjusted 3.1.26 Sexual Abuse policy was aligned with PREA Standard 115.73. This auditor also reviewed 3 completed investigations which occurred during GCADC’s corrective action period, and verified that GCADC’s investigative practices have improved. GCADC developed their victim notification process by implementing a “*Investigation Outcome Notification Form*” which is utilized to notify the victim after investigations (excluding unfounded investigation conclusions). Each investigation had documented “*Investigation Outcome Notification Forms*” (excluding unfounded investigation conclusions). This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 115.76 Disciplinary sanctions for staff**

- 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.76 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.76. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.76.

This PREA Auditor reviewed GCADC’s policy 1.3.13 to verify all the necessary language to meet PREA standard 115.76 policy

compliance requirements. In reviewing GCADC's policy 1.3.13 as it pertains to PREA Standard 115.76, this auditor concluded that GCADC's policy 1.3.13 did not contain the necessary language to confirm compliance with PREA standard 115.76.

Though the auditor verified through interviews with GCADC's Human Resources, PREA Coordinator, and PREA Compliance Manager that the standard of practice is consistent with the above PREA standard 115.76, this PREA Auditor could not conclude compliance due to the language in GCADC's policy needing more clarification related to PREA Standard 115.76. Due to the policy adjust/change not being in place, though consistent practice could be determined, this PREA standard 115.76 should be monitored over a period before compliance can be concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.76. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.76. This auditor concluded that GCADC's adjusted policy 1.3.13 was aligned with PREA Standard 115.76. This auditor also reviewed the 1 example where GCADC enacted disciplinary action on a staff, within GCADC's corrective action period. Through this document review, this auditor verified that GCADC remained in compliance in practice. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

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

- 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.77. GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.77. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.77.

This PREA Auditor reviewed Garland County Adult Detention Center's to verify all the necessary PREA language to meet standard 115.77 policy compliance requirements. In reviewing this excerpt from GCADC's policy 3.1.26 as it pertains to PREA Standard 115.77, this auditor concluded that GCADC's policy 3.1.26 did not contain the necessary language to confirm compliance with PREA standard 115.77. GCADC's policy 3.1.26 language should be more aligned with PREA Standard 115.77.

This auditor verified through interviews with GCADC's Human Resources, PREA Coordinator, and PREA Compliance Manager that the standard of practice is consistent with the above PREA Standard 115.77. However, this auditor could not conclude compliance due to the language in GCADC's policy needing to be more aligned with PREA Standard 115.77. Finally, due to the policy adjust/change not being in place, and consistency in practice could not be determined. As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.76. GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.76. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.76. If consistent practice could be determined, this PREA standard 115.77 would be monitored over a period before compliance can be concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.76. This auditor reviewed GCADC's adjusted policy to verify if aligned with PREA Standard 115.77. This auditor concluded that GCADC's adjusted policy 3.1.26 was aligned with PREA Standard 115.77. This auditor also reviewed the 1 example where GCADC enacted disciplinary action on a staff, within GCADC's corrective action period. Though no documented disciplinary action was enacted on a volunteer/contractor within this corrective action period, this auditor can conclude that such practice is in place based on the action taken against the 1 reviewed staff. Through this document review, this auditor verified that GCADC remained

in compliance in practice. This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 115.78 Disciplinary sanctions for 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.78 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.78. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.78.

This PREA Auditor reviewed GCADC’s to verify all the necessary PREA language to meet standard 115.78 policy compliance requirements. In reviewing the excerpt from GCADC’s policies 3.1.26 and 5.3.1 as it pertains to PREA Standard 115.78, this auditor concluded that GCADC’s policy 3.1.26 and 5.3.1 did not contain the necessary language to confirm compliance with PREA standard 115.78. The auditor also was informed through interviews with GCADC’s Compliance Manager the PREA Investigation Team that the standard of practice is consistent with the above standard 115.78. Additionally, this auditor reviewed GCADC’s policy 3.3.4 *Inmate Rules and Discipline*, which documented behavioral offenses and levels of disciplinary response, however similar PREA language within this policy 3.3.4 was not clarified.

This PREA Auditor cannot conclude compliance due to the language in GCADC’s policies needing language aligned with PREA Standard 115.78. Due to the policy adjust/change not being in place and consistency in practice could not be determined, this PREA Standard 115.78 should monitored over a period before compliance can be concluded.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.78. This auditor reviewed GCADC’s adjusted policies 3.1.26, 5.3.1, and 3.34 to verify if aligned with PREA Standard 115.78. This auditor concluded that GCADC’s adjusted policies were aligned with PREA Standard 115.78. This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 115.81 Medical and mental health screenings; 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.81 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.81. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.81.

This PREA Auditor reviewed Garland County Adult Detention Center’s policies 3.1.26 Sexual Assault; 4.2.5 Health Appraisals; and 4.2.21 Health Records Files which referenced all the necessary PREA language to meet standard 115.81 policy compliance requirements. However, this PREA Auditor had to sift through three different policies to identify compliance. This PREA Auditor recommended, a central policy location to place PREA Standard 115.81.

Additionally, this PREA auditor interviewed GCADC’s Health Services Administrator (HSA) and Lead Mental Health Clinician who seemed not to be aligned in understanding of 14-day and 30-day follow-up timelines associated with PREA standard 115.81. Actually, GCADC’s HSA was extremely knowledgeable of the procedures and her medical screening documentation verified so. The Lead Mental Health Clinician’s documentation and meeting GCADC’s 14-day and 30-day follow-up timeline. In reviewing the Mental Health Clinician’s follow-up documentation and timelines, the randomly selected files follow-up sessions were outside the timelines identified in 115.81.

This PREA Auditor could conclude compliance due to the language in GCADC’s policy needing to be aligned with PREA-Standard 115.81. Moreover, GCADC demonstrated inconsistent practice in meeting 14-day and 30-day follow-ups after initial screenings. Due to the policy adjust/change not being in place, and inconsistency in practice, this PREA Standard 115.81 should monitored over a period before compliance could be concluded.

After GCADC’s Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.81. This auditor reviewed GCADC’s adjusted policies 3.1.26, 4.2.5, and 4.2.21 to verify if aligned with PREA Standard 115.81. This auditor concluded that GCADC’s adjusted policies were aligned with PREA Standard 115.81. This auditor also reviewed 6 random medical and mental health screening files, which occurred from within GCADC’s corrective action period. This auditor verified that all reviewed files had appropriate documentation and met their 14-day and 30-day follow-up timeline threshold. Finally, GCADC’s medical team developed a notification system as a reminder of approaching timelines. This auditor concluded that GCADC is in compliant with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.82. This PREA Auditor reviewed Garland County Adult Detention Center’s policies 3.1.26 and 4.2.6 Emergency Treatment of Inmate Injuries/Illnesses, which referenced all the necessary PREA language to meet standard 115.82 policy compliance requirements. Excerpts from GCADC’s policy 3.1.26 states, “*Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services.*” Excerpts from GCADC’s policy 4.2.6 states, “*Inmate victims of sexual abuse receives timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. (See 3.1.26 Sexual Assault)*”

- a. *Inmate victims of sexual abuse while incarcerated are offered information by Medical Staff about access to emergency contraception and sexually transmitted infections prophylaxis where medically appropriate.*
- b. *Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.”*

The auditor also interviewed 28 inmates regarding access and timeliness of non-emergency emergency healthcare, specifically if a PREA-related incident occurs. Each inmate verified that medical services responsiveness at GCADC is very good. In interviewing the GCADC Health Services Administrator (HAS), she allowed this PREA auditor to view sick call and PREA-related medical files. Each has very good medical response times to inmates (1-48 hours).

This PREA auditor concludes this particular standard to be in compliance and meets the above-mentioned PREA Standard.

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

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.83. This PREA Auditor reviewed Garland County Adult Detention Center’s policy 4.2.14 Serious and Infectious Diseases; 4.2.5 Health Appraisals; and 3.1.26 Sexual Assaults, which referenced all the necessary PREA language to meet standard 115.83 policy compliance requirements. The auditor also interviewed 28 inmates regarding ongoing medical care for victims of sexual abuse/assault and abusers. The responses were a unanimous “Yes” regarding ongoing medical services.

This auditor’s interviews with inmates and staff verified that GCADC’s practices are in place. This PREA Auditor also reviewed multiple medical files, which were well-organized and had documentation of inmate requests and follow-ups. This PREA Auditor conclude compliance

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 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 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.**

As a part of this PREA Auditor’s initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.86 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.86. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and

reviewed onsite documentation to verify consistency with meeting PREA Standard 115.86.

This PREA Auditor reviewed Garland County Adult Detention Center's submitted policies related to PREA Standard 115.86. However, this auditor could not find policy language related to 115.86. This auditor could not conclude that GCADC followed PREA standard 115.86, due to no language in policy. The auditor also verified through interviews with GCADC's PREA Coordinator and Compliance Manager that GCADC had not had PREA-related incidents on their weekly meeting agendas, however they would start adding PREA Report-ins to future meeting agendas.

Due to the policy adjust/change not being in place, and inconsistency in practice compliance could not be determined. Additionally, GCADC's practices regarding incident reviews should be monitored over a period before compliance can be concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.86. This auditor reviewed GCADC's adjusted policies Incident Reviews to verify alignment with PREA Standard 115.86. After reviewing this policy, this auditor concluded that GCADC's policy adjustments were aligned with PREA Standard 115.86. This auditor also reviewed 6 months of incident review documentation, and verified that PREA incident report-ins were on each agenda and its meeting notes. This auditor also reviewed documentation of procedural adjustments to ensure improved "sight and sound" supervision. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.87. GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.87. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.87.

This PREA Auditor reviewed Garland County Adult Detention Center's policy 1.1.4 Facility Reports, which referenced a portion of the PREA language to meet standard 115.87 policy compliance requirements, however did not capture the full breadth of PREA Standard 115.87. Excerpts from GCADC's policy 1.1.4 stated, "*Annually, a PREA Report is developed to assess and improve the effectiveness of the facilities sexual abuse prevention, detection, and response policies, practices, and training following DOJ protocols in accordance with PREA standards. This report is made readily available to the public through the agency website. Sexual abuse data is collected and retained for at least 10 years.*" This PREA Auditor recommended policy adjustments which better align with PREA Standard 115.87.

Example language from PREA Standard 115.87 which was recommended to be adopted in GCADC's policy was, "*The DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including facilities with which it contracts for the confinement of offenders, using a standardized instrument and set of definitions. The extracted data, at minimum, shall include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data shall be aggregated annually, reported to the Department of Justice as requested and, with personal identifiers removed, posted publicly to the DOC's website annually.*"

Finally, this PREA Auditor could not conclude compliance due to the language in GCADC's policy 1.1.4 Facility Reports needing to be more aligned with PREA Standard 115.87. Due to the policy adjust/change not being in place, consistency in practice could not be determined. GCADC's PREA Standard 115.87 should be monitored over a period before compliance could be concluded. A Corrective Action was established.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.87. This auditor reviewed GCADC's adjusted policy 1.1.4 Facility Reports to verify alignment with PREA Standard 115.87. After reviewing this adjusted policy, this auditor concluded that GCADC's adjusted policies were aligned with PREA Standard 115.87. This auditor also reviewed GCADC's 2016 and 2017 annual reports. Each report met PREA Standard 115.87's criteria by aligning their report with the *Department of Justice Survey of Sexual Victimization* questions. These annual reports were published on Garland County Sheriff Office's (GCSO) website. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **Standard 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 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.**

This PREA Auditor reviewed pre-audit documents submitted via electronic source and on-site documentation to determine compliance for Standard 115.88. This auditor reviewed the Garland County Adult Detention Center's 2016 and 2017 PREA Annual Data Report. After this PREA Auditor's examination of this reports, the PREA Audit concludes that GCADC's report contains all the elements and language to meet this 115.88 PREA Standard.

This PREA auditor concludes this particular standard is in compliance with the above-mentioned PREA Standard.

### **Standard 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 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.**

As a part of this PREA Auditor's initial audit of Garland County Adult Detention Center (GCADC), this auditor reviewed pre-audit documents submitted via electronic source to determine compliance with Standard 115.89 GCADC also submitted their PREA policy as evidence of compliance with PREA Standard 115.89. Additionally, while on site (9/25/17-9/27/17), this auditor also observed practice and reviewed onsite documentation to verify consistency with meeting PREA Standard 115.89.

This PREA Auditor reviewed Garland County Adult Detention Center's policy 1.1.4 Facility Reports, which referenced a portion of the PREA language to meet standard 115.89 policy compliance requirements, however did not capture the full breadth of PREA Standard 115.89. Example language from PREA Standard 115.89 which was recommended to be adopted in GCADC's policy was, "All data shall be securely retained and maintained for at least 10 years after the date of initial collection. The DOC shall collect accurate, uniform data from incident-based documents such as reports, investigation files and sexual abuse incident reviews for every allegation of sexual abuse within facilities, including facilities with which it contracts for the confinement of offenders, using a standardized instrument and set of

*definitions. The extracted data, at minimum, shall include the information to answer all questions from the most recent version of the Department of Justice Survey of Sexual Victimization. This data shall be aggregated annually, reported to the Department of Justice as requested and, with personal identifiers removed, posted publicly to the DOC's website annually."*

Finally, this PREA Auditor could not conclude compliance due to no language in GCADC's policy 1.1.4 Facility Reports representing PREA Standard 115.89. Due to the policy adjust/changes not being in place, consistency in practice could not be determined. GCADC's PREA Standard 115.89 should be monitored over a period before compliance could be concluded.

After GCADC's Corrective Action period, this PREA Auditor returned for a follow-up visit to GCADC (4/5/18-4/6/18), to verify compliance with PREA Standard 115.89. This auditor reviewed GCADC's adjusted policy 1.1.4 Facility Reports to verify alignment with PREA Standard 115.89. After reviewing this adjusted policy, this auditor concluded that GCADC's adjusted policies were aligned with PREA Standard 115.89. This auditor also reviewed GCADC's 2016 and 2017 annual reports. Each report aligned with PREA Standard 115.89's policy by aligning their data reporting with the Department of Justice Survey of Sexual Victimization questions. These annual reports were published on Garland County Sheriff Office's (GCSO) website. This auditor concluded that GCADC is in compliance with this standard.

This PREA auditor concludes that GCADC is in compliance with the above-mentioned PREA Standard.

### **AUDITOR CERTIFICATION**

I certify that:

- X The contents of this report are accurate to the best of my knowledge.
- X No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- X 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.

DeShane Reed, MSM, USDOJ Certified PREA Auditor

June 12, 2018

Auditor Signature

Date