

**PREA AUDIT REPORT**     Interim     Final

**ADULT PRISONS & JAILS**

Date of report: 3/10/2017

<b>Auditor Information</b>	
Auditor name: Ronda Gibson	
Address: 193 Walker Street, Tiffin, Ohio	
Email: rkg4269@gmail.com	
Telephone number: 567-207-607	
Date of facility visit: 08/01/2016	
<b>Facility Information</b>	
Facility name: Washington County Jail	
Facility physical address: 101 Westview Avenue, Marietta OH 45750	
Facility mailing address: (if different from above) same	
Facility telephone number: 740-374-7677	
The facility is:	<input type="checkbox"/> Military <input checked="" type="checkbox"/> County <input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit <input type="checkbox"/> Municipal <input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit
Facility type:	<input type="checkbox"/> Prison <input checked="" type="checkbox"/> Jail
Name of facility's Chief Executive Officer: Captain Greg Nohe	
Number of staff assigned to the facility in the last 12 months: 37	
Designed facility capacity: 124	
Current population of facility: 98	
Facility security levels/inmate custody levels: minimum, medium, maximum	
Age range of the population: 18 -	
Name of PREA Compliance Manager: Brysen Lee	Title: Sergeant
Email address: brysen.lee@weso84.us	Telephone number: 740-374-7677, ext. 14
<b>Agency Information</b>	
Name of agency: Washington County Sheriff's Office	
Governing authority or parent agency: (if applicable) N/A	
Physical address: 309 Fourth Street, Marietta, OH 45750	
Mailing address: (if different from above) same	
Telephone number: 740-373-2833	
<b>Agency Chief Executive Officer</b>	
Name: Larry Mincks	Title: Sheriff
Email address: sheriff.mincks@weso84.us	Telephone number: 740-373-6623, ext. 300
<b>Agency-Wide PREA Coordinator</b>	
Name: Marvin Smith	Title: Lieutenant
Email address: marvin.smith@weso84.us	Telephone number: 740-374-7677, ext. 14



## AUDIT FINDINGS

### NARRATIVE

The Washington County Sheriff's Office contracted with Ronda Gibson, Independent PREA Certified Auditor to conduct an audit of its Jail. The purpose of the audit was to determine the degree of compliance with the federal Prison Rape Elimination Act (PREA) standards.

The facility was provided a sample notification to be hung within the jail housing units giving the notice of the PREA Audit and the name/contact information of the PREA Auditor. The facility was instructed to post such notices six weeks in advance of the on-site. The Auditor did view such notices hanging within the facility during the on-site visit. Within four weeks of the on-site review, the PREA Compliance Manager provided the Pre-Audit tool and supporting documentation to the Auditor. Prior to the visit, this Auditor reviewed relevant policies and procedures, operational forms and other relevant materials.

The on-site portion of the audit was conducted over a two day period, August 1<sup>st</sup> and 2<sup>nd</sup>, 2016. During this time, this Auditor conducted interviews of inmates and various staff including leadership, staff, volunteers, and contractors. A total of 17 interviews were held with 11 staff/contractors/volunteers. An interview for contracted housing was not completed since the facility does not ship inmates to other facilities for housing. A total of 13 interviews were held for inmates; however no youthful inmates were interviewed since none were in custody at the time of the on-site visit. The required interviews were conducted consistent with DOJ PREA audit expectations in content and approach, as well as individuals selected for specialized interviews (e.g., Facility Administrator, PREA Coordinator, PREA Compliance Manager, specialized staff, random inmates, contract staff, volunteers, etc.). In addition, an extensive facility tour was conducted which included all housing units/areas, kitchen, laundry, classrooms, recreation areas, program rooms, booking area, interview rooms, as well as administrative areas. While on tour, this Auditor was permitted unlimited access to the facility and was escorted by both the PREA Coordinator and Compliance Manager as well as the Facility Administrator. Inmates were randomly selected by obtaining a housing sheet during the on-site visit and picking a random number and counting the same number of each housing unit list. Due to the small population of the facility, this Auditor had to select the inmates who fit the specialized inmates as opposed to random selection of many inmates within the specialized categories.

Minimum staffing level is 6 officers on each 12 hour shift. This level is consistent all days of the week, including weekends and holidays. Shift start times are 0500 and 1700 hours. Post assignments are Booking (female), Control, Housing, Rover, Supervisor and Nurse and one female is required to always be on duty. The Control Room Officer monitors security cameras mounted both inside and outside the jail. The control room officer can easily lock/unlock doors to grant entry or release to authorized persons. Female deputies can pat down both genders while males can only pat down males only in exigent circumstances. Cross gender strip searches are not permitted except in exigent circumstances. The correction officers are required to have 24 hours of continuing education each year including topics such as self-defense, fire training, CPR and other training as directed by the Jail Administrator. The facility is unique in that the medical staff are being trained as Correction Officers with most having already attended the Corrections Academy for full service jail personnel. In addition, the facility has opted to train the volunteers/contractors/medical/mental health staff the same as the line staff. Eight new correctional staff hired within previous 12 months. All staff are considered first responders. The Washington County Sheriff's Office is a union environment with a Current Collective Bargaining Agreement which is currently enforce (term: March 11, 2014 through January 31, 2017).

Inmates receive three meals a day and have access to medical and mental health care as needed. Inmate visitation is offered once a week for a 30 minute period. Mental health services are provided by L&S and see inmates either on a referral or inmate request basis. The facility also provides GED/adult basic education services to the inmate. Thirteen volunteers were listed and verified as trained for PREA policies and required training topics. Volunteers are utilized for AA (Alcoholic Anonymous), GED/Adult Education, Church Services, Crossroads (Mental Health) and Clergy.



The Washington County Jail reports that it does not currently contract for the housing of its prisoners at other facilities; therefore, there are no agreements to be reviewed. The only exception to this would be if there is a conflict with an inmate which would cause Washington County to send an inmate to another facility (this is very rare and has not occurred in years).

In regards to investigations, the Jail Administrator and PREA Coordinator explain that any sexual misconduct allegations that could be criminal in nature are immediately referred to the Detective Division of the Washington County Sheriff's Office. The Jail leadership would be responsible for any investigations that are not criminal, mostly harassment and/or retaliation events.

The Washington County Jail leadership reports there is no Rape Crisis Service close to their area; therefore, the Victim Advocates from the Washington County Victim Assistance Agency is used for support for victims. Contact was also made with Marietta Hospital to confirm employment of Sexual Assault Forensic Nurses to conduct forensic examinations of inmate victims of sexual assault.

While at the facility, this Auditor reviewed inmate files, training records, investigative policies, and facility forms and programming information. Since there had been no investigations for the facility within the previous 12 months, there were no investigative files to review. All training logs and materials were also reviewed as well as background files on random staff, contractors and volunteers.

On the final day of the on-site audit, a closing debrief was held with Lt. Smith, PREA Coordinator to discuss the preliminary findings of the on-site and preliminary results of audit. Lt. Smith understood there would be a need for corrective action and some of those items were discussed at that time. Lt. Smith was receptive to meeting compliance and was pleased with the success of the audit to that point. This Auditor is confident the Washington County Jail can meet compliance with simple changes to policy, procedures, practices and completion of required training.

The following policies were provided for inspection/review during the audit process:

- 711 – Staffing
- 715 – Inmate Grievances
- 723 – Housing
- 733 – Strip and Body Cavity Search
- 760 – Prison Rape Elimination
- 762 – Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation
- 763 – Sexual Abuse Review Team
- 764 – PREA Risk Assessments and Accommodations Strategies
- 765 – Lesbian, Gay, Bisexual, Transgender and Intersex

Sheriff's Office Policies:

- 1000.2 – Policy
- 1000.3 – Recruitment
- 1000.4 – Selection Process
- 1000.5 – Background Investigation
- 1000.5.1 – Notices
- 1000.5.2 – Review of Social Media Sites
- 1000.5.3 – Documentation and Reporting
- 1000.5.4 – Records Retention
- 1000.6 – Disqualification Guidelines
- 1000.7 – Employment Standards
- 1000.7.1 – Standards for Deputies

Forms which were reviewed:

- Roll Calls
- Jail Schematic
- Organization Chart
- Jail Briefings
- Federal Housing Contract with US Marshalls
- Training sign-off sheets
- Training Curriculum outlines
- MOU with Victim Assistance Program



## DESCRIPTION OF FACILITY CHARACTERISTICS

The Washington County Jail is operated by the Washington County Sheriff's Office. The facility houses adult males and females and has classification levels of minimum, medium and maximum. The facility has appropriate policies in place to accommodate youthful offenders who are transferred to be prosecuted as adults; however, the facility reports it has not held a youthful offender in several years. The jail houses offenders of crimes ranging from misdemeanors to felony offenses. A housing agreement is also in place for the facility to house federal prisoners in the custody of the U.S. Marshall's Office. On the **first** day of the audit, there were 98 individuals in custody (73 male and 25 female) and 109 individuals on the second day (83 male and 26 female). At the time of the on-site interviews, there were no transgender or intersex inmates in custody as well as no inmates in custody that had previously reported victimization.

The Washington County Jail opened for operation in 2004 and is comprised of one building which has a rated capacity of 124 beds (62 being individual cells). The facility's supervision is indirect supervision with staff performing safety and security rounds at a minimum of every 60 minutes. The housing units have an upper and lower tier, both easily viewable from the Control post. Housing areas consist of both dormitory style and well as single occupancy secure cells. Each unit has separate bathroom and shower facilities – there are privacy panels which prevent incidental viewing of inmates when showering and/or using the bathroom.

The facility has a secure perimeter which is controlled by a Control Operator who controls the egress/ingress to the jail. The facility has a secure sallyport for all new arrests and/or transfers from other law enforcement agencies. All intakes are searched and processed in the booking area. All necessary safety and security related questions are asked at the time of booking which assist with the classification process. Inmates are permitted to walk freely among the housing units from 0530 hours and 1130 hours each day. The facility also has four holding cells which are utilized for new bookings until classification is determined or for those individuals who are unable to participate in the booking process (due to intoxication). The jail also has 12 lockdown cells which are used primarily for inmates who present a challenge either in dealing with other inmates or who are unable to follow facility rules/receive disciplinary action.

This Auditor walked through and observed the kitchen where inmate meals are prepared. The area was found to be neat and organized. Limited camera coverage was viewed in this area; however, this was corrected later by adding a mirror in order to view from around the corner. The laundry room was viewed which is where inmates perform the cleaning of uniforms/sheets/blanket/towels for the facility. The laundry room is monitored by camera. Inmate classrooms and interview rooms were viewed which all had cameras. Interview rooms had windows which were covered for privacy purposes, but, again, cameras are in the rooms allowing for video observation and video recall. The classrooms have large windows for easy viewing of programming sessions. The sallyport was also viewed which is used by law enforcement agencies to bring new arrests to the jail. A video arraignment computer system is used to conduct video arraignments with the municipal courts – limiting the movement of inmates outside of the facility.

The facility utilizes a pipe system which tracks the rounds completed by staff. Lt. Smith provided this Auditor with a pipe report that would identify if rounds are completed outside of the 60 minute timeframe.

Overall, the Washington County Jail is a very well maintained facility with a very open view design. The interior is brightly painted and is well-lit allowing for constant full view of the inmates in each of the housing areas.

## SUMMARY OF AUDIT FINDINGS

After initial review of submitted forms, policies, informational items and an on-site inspection, the Washington County Jail originally was found to have a total of 22 non-compliant standards; however, it is important to note this is a first-time audit for this facility and most of the items not in compliance were related policy language which were relatively simple corrections. After the 180 day corrective action period, the Washington County Jail is now PREA Compliant with 40 Standards being met, two (2) standards being exceeded and one (1) standard not being applicable. This auditor was impressed by the hard work and dedication of facility staff to achieve full compliance of the PREA standards.

Number of standards exceeded: 2

Number of standards met: 40

Number of standards not met: 0

Number of standards not applicable: 1



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

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

Resources used: Policy 760 – Prison Rape Elimination  
Agency Chart of Organization

The agency has a written policy which mandates zero tolerance toward all forms of sexual misconduct in the facility. Sexual misconduct is defined as "any behavior or act of a sexual nature directed toward an inmate by an employee, contractor, volunteer or other inmate which may be sexual harassment, sexual abuse or a combination of both" as defined by policy. This reviewer reviewed policy including such as well the agency's plan to prevent, detect and respond to sexual misconduct involving inmates and/or staff with inmates. All such information is contained within Policy 760 titled "Prison Rape Elimination." This same policy contains a plethora of definitions of prohibited behaviors regarding sexual abuse and sexual harassment as well as sanctions for prohibited behaviors.

An organizational chart was provided to this Auditor which clearly identified the PREA Coordinator, Lt. Marvin Smith, as reporting directly to Capt. Greg Nohe, Jail Administrator. Lt. Smith serves in an upper level supervisor capacity and has acknowledged he has sufficient time and resources to perform the duties of the PREA Coordinator. Lt. Smith believes he has tremendous support from Capt. Nohe and the agency chief executive officer, Sheriff Mincks, in order to execute the PREA standards.

Even though the Washington County Jail has one facility and is not required to assign a PREA Compliance Manager, it has elected to identify its Assistant Jail Administrator, Sgt. Brysen Lee, as its PREA Compliance Manager. Sgt. Lee also indicates he has sufficient time and resources to fulfill the expectations of a PREA Compliance Manager. The PREA Compliance Manager is not specified on the agency's organizational chart, but as stated previously, a PREA Compliance Manager is not required for this agency pursuant to PREA Standards.

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

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- Does Not Meet Standard (requires corrective action)
- Not applicable. This agency does not contract to confine its inmates at other facilities.

**Standard 115.13: Supervision and monitoring**

- Exceeds Standard (substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Resources used: Video camera system, video retrieval, floor reports, pipe reports

The Washington County Jail has several cameras within its facility which are viewed on an on-going basis by the Central Control operator. The Control Operator was able to navigate through the cameras and identify each housing unit. The Central Control operator post is manned on a 24 hour basis. The intercom communications between Central Control and the inmates appeared fully functional and had clear sound. Archived video can be accessed and was demonstrated by Lt. Marvin when requested by this Auditor. Lt. Marvin was able to retrieve video footage of unannounced supervisor rounds of a date(s) requested. Floor reports were reviewed which identified supervisor rounds within the units. The agency also utilizes a pipe system which can identify when a round is initiated or when rounds fall outside the expected timeframe of one hour. Some of the cameras did appear to have timing issues but appeared to be within minutes and could still be accessed. Lt. Marvin indicated 13 cameras were installed prior to the PREA Audit to address blind spots within the facility. The Auditor did view an area in the kitchen which was not easily viewed by kitchen staff and has no camera access. This area was located in the back of the kitchen with a wall that blocks supervision of inmates and/or staff from the rest of the kitchen. During the corrective action period, a mirror was installed to allow easy viewing around the corner to the area which need more supervision.

This auditor walked through each housing unit with Lt. Smith, Capt. Nohe and Sgt. Lee. Units were mostly wide open spaces with the exception of individual housing areas with one/two cells in some housing units which provided separation when needed for classification purposes. This Auditor could view the housing units from the Central Control Post clearly even without the aid of cameras. While observing in Central Control, this Auditor viewed staff physically present in/around the housing units on a continual basis.

The Washington County Jail has a formal staffing plan which is reviewed annually by Lt. Marvin (PREA Coordinator), Sgt. Lee (PREA Compliance Manager/Asst. Jail Administrator), and Jail Administrator Capt. Nohe. Agency staff indicate that the staffing is always complied with, even if additional staff are called to report to duty if minimum staffing cannot be maintained. The facility employs adequate staffing to accommodate its staffing plan. Policy 711 – Staffing Plan – indicates a minimum staffing of six posts to include Supervisor, Rover, Housing, Booking, Control Officer and Medical/Nurse. On the first day of the on-site audit, the facility population was 98 which was below the facility's designated capacity.

Correction Action 1: Increase ability to supervise area in kitchen which cannot be easily viewed from the main kitchen area.

*Corrective Measures Jan 2017: A concave mirror has been added to the wall in the obscure kitchen area that allows correction and kitchen staff to view activities in the dishwashing area.*

### **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)

Resource used: Policy 723 - Housing

The agency has not held youthful inmates within the previous 24 months. Regardless, the agency does have policies and practices in place in the event such should occur, but no records were available within



the audit timeline for review since no youth had been held. The agency staff has identified its practice would be to place youthful offenders in its holding area where there is constant supervision to eliminate opportunities of sight, sound or touch with adult inmates. In addition, staff and supervisors confirmed via interview that if youthful offenders were held, accommodations would be made to ensure such inmates would receive the full amenities and programming available to adult offenders. The GED/adult education instructor verified she would provide her services to youth if one was indeed held at the facility.

### **Standard 115.15: Limits to cross-gender viewing and searches**

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

Resources used: Policy 733 – Strip and Body Cavity Search  
Policy 765 – Lesbian, Gay, Bisexual, Transgender and Intersex  
Training Records

The Washington County Jail does not conduct any cross gender strip or visual body searches which is supported by policy (733) and staff interviews. The facility holds both male and female inmates and the facility staffing plan requires both male and female staff to be on-duty at all times. The medical staff of the Washington County Jail would not conduct any body cavity searches as such would be conducted at the local medical facility. Despite not allowing cross gender searches, the agency has trained its staff (corrections and medical) on how to effectively conduct a cross gender pat down in the event such would be necessary.

The facility has implemented and maintains strict adherence to its policies which allow for inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing breasts, buttocks or genitalia, except in exigent circumstances. Inmate interviews verify these practices are followed and no inmates reported any opposite gender staff even being in the housing units. During a walk-thru, this Auditor did not view any situations where inmates could be viewed in the aforementioned activities. The only cross gender supervision witnessed by this Auditor was in the booking area which is always manned by a female deputy. However, if interaction of any male inmates held in the booking area is needed, male staff are readily available to assist. Since the facility does not allow cross gender supervision in the housing units, there is no need for announcement when conducting rounds. The only cross gender supervision in the housing units is during the supervisor "unannounced rounds."

Policy 765 requires the facility not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Medical Staff confirmed they would assist with such when needed to assist with the determination of genital status. At the time of the audit on-site, there were no transgender or intersex inmates to interview to confirm this process.

Facility training records were reviewed to verify 100% of the staff have been trained on how to conduct cross-gender pat down searches as well as searches of transgender and intersex inmates. Such training included a video as provided by the PREA Resource Center. Training logs were reviewed during the initial audit which showed a couple staff that had not yet completed the required training. Since completion of the corrective action period, records show that all required personnel, volunteers, etc. have received the required training.

Corrective Action 1: At the time of the on-site inspection, some training was not completed. Facility staff had already initiated getting the final individuals to complete the training. Updated training sign off sheets need to be sent to comply with this standard.

*Corrective Measure Jan 2017: The training sign off sheet now has sign-offs by all required individuals.*

Corrective Action 2: After review of the provided information, this Auditor did not see policy relative to 115.15(d) which requires the announcement of opposite gender staff into a housing unit. While it is not a common practice for this facility to have opposite genders enter a housing unit during normal jail operations, PREA standards require a policy on this and it is logical to believe that a supervisor may enter a housing unit as part of normal practices (versus unsupervised rounds).

*Corrective Measure Jan 2017: Prison Rape Elimination Act policy now includes requirement for announcement of opposite gender staff when entering inmate housing areas.*

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

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)

Resources used: Policy 760 – Prison Rape Elimination

The facility demonstrated several options to address its efforts to assist inmates with disabilities and/or inmates who are limited English proficient. The agency has postings throughout the agency of contact information to report incidents of sexual misconduct and also has the same information on kiosks within each housing area. The facility also runs a video every 30 days of the Prison Rape Elimination Act to educate the inmates. Lt. Smith provided copies of the video in both English and Spanish. The Inmate Handbook is also available in the Spanish language. At the time of the on-site, one limited English inmate was interviewed who reported he was not offered a Spanish inmate handbook at the time of booking. Lt. Smith immediately made such available to the inmate. A list of translators was provided to the Auditor (several languages included), although staff report the use of translators is rare. Policy 760 dictates the use of translators when needed to successfully communicate with limited English inmates. The video accommodates those inmates who are blind (via audio) and deaf (via close captioning).

Facility policy prevents the use of inmate interpreters/readers/assistants except in limited circumstances for special needs inmates. Staff confirm other inmates have assisted but on a very limited basis just during the booking process and only upon the inmate's approval. Booking staff indicate it is rare to have an inmate who is unable to communicate during the booking process. Staff and Supervisors report there have been no incidents of use of inmate readers/interpreters/assistants within the previous 12 months.

Corrective Action 1: Interpreters have not been PREA trained.

*Corrective Measure Jan 2017: The two designated interpreters have received and signed-off on required PREA training.*



## 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)

Resources: Sheriff's Office Policies:

- 1000.2 – Policy
- 1000.3 – Recruitment
- 1000.4 – Selection Process
- 1000.5 – Background Investigation
- 1000.5.1 – Notices
- 1000.5.2 – Review of Social Media Sites
- 1000.5.3 – Documentation and Reporting
- 1000.5.4 – Records Retention
- 1000.6 – Disqualification Guidelines
- 1000.7 – Employment Standards
- 1000.7.1 – Standards for Deputies

The Washington County Sheriff's Office has undergone a massive overhaul of its hiring practices to ensure the employment of ethical, professional and moral employees. The materials developed by Capt. Nohe are very extensive and would likely screen out individuals who have engaged in sexual abuse in a correctional facility, or have been convicted of engaging in a sexual activity in the community facilitated by force, threat of force or coercion or if a victim did not consent. However, this Auditor did not find provisions to screen for individuals who may have been civilly or administratively adjudicated to have engaged in the sexual activity as described above. During the initial audit, files of existing personnel did not include the most recent comprehensive employment screening process since it was just recently developed. With that said, there was no evidence that recent employees had been screened for any of the provisions of 115.17 (a1-a3). While it is not expected to "go back" and conduct backgrounds on seasoned employees, the agency has performed LEADS checks of its employees to confirm with PREA standards. Policies have since been updated to incorporate all the employee screening requirements.

Further, while the Jail Administrator acknowledges the agency would consider incidents of sexual harassment when determining to hire/promote anyone, the provided documentation does not show such question is asked or considered. This specific question is quite vital since incidents of sexual harassment can occur with no criminal, administrative or civil ramifications or record. In addition, this Auditor was told an agency background check would include contacting previous correctional employers to inquire of any previous sexual misconduct substantiated allegations or any resignation during a pending investigation; however, agency policy does not specify this. Again, relevant facility policies have been updated during the corrective action period.

Agency policy requires a background check every five years for all employees/contractors/volunteers who have contact with inmates. The agency defines a background check as a LEADS run to verify no arrests, warrants or wants. Five year period is calculated on the anniversary date of the employee. Lt. Smith provided files of contracted providers who have contact with inmates which identified LEADS checks on each.

The agency, during the initial audit, had not provided any documentation which states a continuing affirmative duty to disclose any sexual misconduct as specified in this section nor does it specify that

omissions of such information would be grounds for termination. Agency policy has since been amended to include this.

Corrective Action 1: Agency policy does not reflect the criteria in 115.17(a) and 115.17(b). While it is believed the agency could determine the same information through their detailed background process, PREA standard requires this criteria in policy.

*Corrective measures Jan 2017: A revised Prison Rape Elimination Act policy now includes all required criteria in 115.17 (a) and (b).*

Corrective Action 2: The Agency's background process has been greatly expanded recently; however, no policy was presented to the Auditor relative the criteria in 115.17(c). While it is believed a previous institutional employer would be contacted, there was no policy provided which required inquiry regarding substantiated allegations of sexual abuse or any resignation pending investigation of an allegation of sexual abuse.

*Corrective measures Jan 2017: A revised Prison Rape Elimination Act policy now includes all required criteria in 115.17 (c).*

Corrective Action 3: No policy information was provided to the Auditor which reflects the requirement in 115.17(d) to perform background checks on contractors who have contact with inmates. Lt. Smith had made sure checks were completed; however, policy needs to reflect this requirement.

*Corrective measures Jan 2017: A revised Prison Rape Elimination Act policy now includes all required criteria in 115.17 (d).*

Corrective Action 4: No policy was provided to reflect 115.17(e) which requires background checks on employees every five years. Lt. Smith did provide employee files which identified LEADS run on employees, a policy is simply needed.

*Corrective measures Jan 2017: A revised Prison Rape Elimination Act policy now includes all required criteria in 115.17 (e).*

Corrective Action 5: No information was provided to the Auditor relative 115.17(f) and the agency's requirement of employees to have a continuing affirmative duty to disclose misconduct.

*Corrective measure Feb 2017: A revised Prison Rape Elimination Act policy now includes an employee's continuing affirmative duty to disclose misconduct.*

Corrective Action 6: No information/policy was given to the Auditor relative 115.17(g).

*Corrective measures Jan 2017: A revised Prison Rape Elimination Act policy now includes all required criteria in 115.17 (g).*

### **Standard 115.18: Upgrades to facilities and technologies**

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



Resources used: Video camera system, pipe system, intercom system

Lt. Smith reported the recent addition within the previous few months of 13 cameras within its facility to resolve what it considered blind spots within its facility. The Washington County Jail is a smaller facility but has good lines of sight and wide-view angles of its camera monitoring system. On the majority, all video footage witnessed in Central Control was clear and in color with the exception of one camera which had recently been replaced but not yet "hooked" into the system.

### **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)

Resource used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Policy 762 – Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation provides a checklist of tasks to be completed in sexual misconduct investigations. This uniform protocol was confirmed by the interview of Detective Sergeant. The protocol utilized by this agency appears to be developmentally appropriate although there have been no investigations involving youthful offenders/victims within the facility (again, no youthful inmates have been held at this facility in the prior 12 months) and also delineates clear procedures related to evidence collection. This same procedure also clearly states how physical evidence should be preserved (i.e. youth will not shower, toilet, drink, change clothes, or brush their teeth) until examined by a SANE. To ensure potential evidence is preserved, staff are formally trained on how to respond to an allegation of sexual assault

Agency policy indicates the use of a Sexual Assault Nurse Examiner (SANE) and victim advocates when an investigation is initiated and/or upon request by an inmate victim. Upon contact with Marietta Hospital, Emily Hupp (Shift Coordinator) indicated the hospital uses SAFE (Sexual Assault Forensic Examiners) Nurses versus SANE Nurses. Ms. Hupp indicated the hospital has three SAFE Nurses who rotate being on-call so that a SAFE Nurse is always available when needed. Ms. Hupp did not believe any other staff person would be utilized to conduct the forensic evaluation portion of a sexual assault case as a SAFE would always be used. Per Policy, SAFE Nurses and Victim Advocates are part of the team approach to a report of sexual abuse of an inmate.

It should be noted that the Washington County Sheriff's Office sits in a mostly rural area and rape crisis services are not locally available, therefore, victim advocates are utilized for any and all services as required by PREA provided to inmates.

Agency Policy 762 requires the examination by a SANE or a qualified medical practitioner who can perform forensic medical exams (in the absence of a SANE). The same policy indicates the presence of a victim advocate for any forensic exam and through the investigatory process to provide support, crisis intervention, information and referrals.

There have been no SANE exams within the previous 12 months; therefore, there are no records to review.

## **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)

Resources Used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation  
Victim Assistance Letter of Agreement

Review of agency policy and interviews of Jail Supervisors and Jail Administrator confirm that all allegations of sexual misconduct that could be considered criminal action would be referred to the Detective Division of the Washington County Sheriff's Office for investigation. The agency does not refer investigations outside of its agency. Jail leadership would conduct its own investigation regarding inmate allegations of harassment and/or retaliation unless the events are egregious and/or rise to the level of criminal conduct. Policy 762 requires criminal and administrative investigations for any allegations of sexual misconduct. An investigative checklist is included as an Appendix to Policy 762 which gives a listing of required actions after a report of sexual assault. The investigative policy also dictates to contact a Victim Advocate for support to victims. A copy of a letter of agreement was provided to the Auditor between the Washington County Sheriff's Office and the Washington County Victim Assistance Program.

The agency policy regarding referral of allegations of sexual misconduct for criminal investigation was reviewed on the agency's website at the time of the on-site audit. Staff interviews verify any such referral would be documented by report.

## **Standard 115.31: Employee training**

Exceeds Standard (substantially exceeds requirement of standard)

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

Resources used: Policy 760 – Prison Rape Elimination

During the initial audit, agency policy 760 indicated the required training as listed in PREA Standard 115.31(a1-10), however, the curriculum of training provided to staff were missing the following the following items:

- \*common reactions of sexual abuse and sexual harassment victims
- \*how to detect and respond to signs of threatened and actual sexual abuse

This has since been remedied and the facility is now in compliance by providing training materials and curriculum which includes all mandatory topics.

Since the facility houses both male and female inmates, all staff are trained on the topic of cross gender searches even though policy prevents such except in exigent circumstances.

The agency also requires training of its contracted mental health person as well as the teacher and medical staff. Sexual misconduct training is required by staff on an annual basis. Sign-offs were



reviewed with a limited number of individuals who had NOT completed all the training at the time of the on-site.

Corrective Action 1: The training curriculum provided to the Auditor did not include all components of 115.31(a), specifically #6 and #7. In addition, the curriculum outline made to reference to review of the agency's zero tolerance policy; however, staff did confirm it was indeed trained on the policy.

*Corrective Measures Jan 2017: The agency has provided an updated Prison Rape Elimination Policy which includes all required training components of 115.31(a).*

Corrective Action 2: The training lists provided to the Auditor identified staff that had not yet signed off on required training. Facility staff, during the on-site, had communicated with those individuals to get training completed.

*Corrective Measures Jan 2017: The agency has provided an updated sign off list of all required staff, volunteers and contractors which reflects everyone has received the mandated training.*

### **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)

Resources used: Policy 760 – Prison Rape Elimination  
Training Curriculum

The Washington County Jail's policy on volunteer training is the same as that of staff. The provided curriculum does not specify volunteers as part of the training but sign-offs show volunteers included. Policy 760 indicates all volunteers and contractors who have contact with inmates will be advised of their responsibilities under the facility's zero tolerance policy. In the opinion of this Auditor, the agency has exceeded the expectation regarding the content of volunteer/contractor training since it requires the same training as that staff receive. An interview with the GED instructor and the Mental Health Contracted Professional resulted in confirmation of receiving the training as outlined if the curriculum provided to this Auditor. The only shortfall found is that interpreters have not been PREA trained. Interpreter services have not be used in more than 24 months; however, they are considered volunteers and are required to have PREA training.

As stated previously, the agency retains documentation of completed training in the form of sign-off sheets which are signed by each person who either attends the classroom training or completes the review of provided training material.

Corrective Action 1: Interpreters have not received PREA training.

*Corrective Measures Jan 2017: The agency has provided an updated sign off list for training which now includes the two specified interpreters.*

### **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)

Resources used: Policy 760 – Prison Rape Elimination

Policy 760 requires inmates to receive the inmate rule book at the time of intake and also mandates the viewing of the PREA educational video on a monthly basis. All inmates interviewed confirmed receipt of an inmate rule book at the time of intake and viewing of the PREA video (for those inmates having been in custody longer than 30 days). The inmate handbook and housing kiosks contain information relative to the facility's response to PREA as well as contact information to report incidents of sexual misconduct to a deputy or detective (outside of the jail). Inmates are required to view a PREA video on the third weekend of each month regarding PREA – all inmates are required to sign that the video was watched each month, regardless of whether the video was watched the month before. Some inmates who had previous experience with incarceration at Ohio prisons, also indicated seeing similar videos at the prisons. Inmates also sign for receipt of inmate rule book at the time of intake. Lastly, the agency also has posted signage throughout the agency which provides a contact number on how to report incidents of sexual misconduct to a detective/deputy (outside of the Jail) as well as the contact number for the Victim Assistance Program. The posters also include the confidential email address where complaints/reports can be made (this would be for family and friends of inmates since inmates have no email access). Posters, Inmate Handbooks and Kiosks are available in the Spanish language.

### **Standard 115.34: Specialized training - Investigations**

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

Resources used: Training Certificates

The Washington County Sheriff's Office provided a list of detectives to the Auditor who would conduct investigations of sexual misconduct within the Jail as well as copies of training certificates for required training including, but not limited to, specific training relative to conducting investigations inside a correctional facility (specifically "PREA: Investigating Sexual Abuse in a Confinement Setting" as presented by the National Institute of Corrections).

Corrective Action 1: No policy was presented to the Auditor relative 115.34(a). The agency staff have received the required training, but the policy does not state the requirement to obtain it.

*Corrective Measure Jan 2017: The agency has provided an updated Prison Rape Elimination Policy which reflects the requirement for investigative staff to receive training specialized training relevant a confinement setting.*

Corrective Action 2: No policy was presented to the Auditor relative to 115.34(b). In addition, no training certificates or other documentation was received to confirm the training topics in this standard. It is assumed the detectives have received such training in their official capacity, documentation simply needs to be provided.

*Corrective Measures Jan 2017: The agency has provided copies of mandated specialized training certificates for four staff members who would be assigned to conduct sexual misconduct within the jail setting.*



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

- 1 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)

Resources used: Policy 760 – Prison Rape Elimination  
Training Logs  
Training curriculum

The facility employs LPNs which have all received the same training as correctional staff. Policy 760 states part-time and medical staff will have the training was specified in 115.35(a). Since the curriculum for staff training includes required coverage of PREA policy, all contents of 115.35(a) are met. Medical staff would not routinely be involved in evidence collection/retention/forensic exams as inmates who are sexually assaulted would be taken to the local medical facility for SANE evaluations.

Agency Mental Health staff are contracted with L&P Services, but said services are not paid for by Washington County Sheriff's Office (paid via community mental health). Regardless, mental health staff confirm to have received the same training as correctional staff (this is also supported by training sign-off sheets).

Corrective Action 1: Some medical staff had not completed the required training listed in 115.35(d) (e.g., Nurse Practitioners, etc.)

*Corrective Measures Jan 2017: The agency has provided the required training and sign-off sheet to Facility Nurse Practitioners.*

### **Standard 115.41: Screening for risk of victimization and abusiveness**

- 1 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)

Resources used: Policy 764 – PREA Risk Assessments and Accommodations Strategies  
Booking forms

During the on-site audit, this Auditor reviewed booking screening forms to verify inmates are being sufficiently screened for sexual victimization and abusiveness. The screening form provided includes all the necessary criteria in 115.41(d and e). Policy 764 provides for booking practices to ensure effective screening and classification. Staff and inmates confirm the booking process within the Washington County Jail is completed timely, always within ten (10) hours of reception. Jail leadership indicates ALL inmates are screened at the time of intake and the screening criteria is used to classify housing and for programming placement. Policy 764 also requires there be referral to medical/mental health when a reassessment is warranted due to referral, request, incident of abuse or receipt of information which bears on an inmate's risk of victimization or abusiveness. Agency policy states that no inmate can be disciplined for refusing to answer questions related to the inmate's mental, physical or developmental disability, the inmate's sexual orientation, whether the inmate's has prior sexual victimization, or the inmate's own perception of vulnerability. Interviews with agency staff verify that the information contained within the screening tool is only viewed/shared with those staff who perform classification after

being received at intake. Interviewed staff also could recite from memory most of the questions on the risk assessment which affirms the screening tool is used consistently. Staff indicate that a supervisor would be responsible for re-assessments after a referral, request, incident of sexual abuse or when other information is received which bears on the inmate's risk of sexual victimization and/or abusiveness. When asked, staff could not recall a transgender or intersex inmate being in the facility since the facility incorporated PREA practices.

### **Standard 115.42: Use of screening information**

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)

Resources used: Policy 764 – PREA Risk Assessments and Accommodations Strategies  
Policy 765 – Lesbian, Gay, Bisexual, Transgender and Intersex

Facility reports one person within the previous 12 months who was offered medical and mental health follow up after intake upon disclosure of prior victimization but that person was subsequently released before said services were received. Policy 764 provides clear direction on utilization of the screening tool to assist with classification, program assignments and ensuring safety of inmates who identify as high risk of victimization and/or abusiveness.

Policy 765 ensures that the housing/programming decisions for inmates who identify as transgender or intersex are determined on a case by case basis. Through staff interviews, confirmation as been received that such inmates would be entitled to and would participate in all programming offered by the facility (e.g., recreation, church, etc.). In instances when a transgender or intersex inmate was held in custody long-term, the agency policy (765) dictates the requirement to reassess those individuals at least twice a year to determine if any threats of safety are present. Agency policy regarding classification would integrate LGBTI inmates into the general population as opposed to placing them in dedicated units. This is supported by interviews with the PREA Coordinator, PREA Compliance Manager as well as an interview with a gay inmate who was very complimentary of the staff and the treatment he has received at the Washington County Jail during his many incarcerations there.

The facility design allows for all inmates, including transgender and intersex inmates, to shower separately from other inmates.

### **Standard 115.43: 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Review of Policy 762 indicates that involuntary segregation would not be used to classify inmates at high risk of sexual victimization unless an assessment has been made and no alternatives are available. The facility has a detailed screening and tracking of inmates who present as high risk and it appears such is monitored closely. The smaller size of this facility and the high attentiveness of the staff make this



Auditor believe inmates are well supervised, monitored closely and there is quick reaction/response anytime any inmate is at risk. As stated previously, agency policy requires that all inmates, including those at high risk of victimization, would have the same opportunities to participate in programs, recreation, education, and work opportunities. This was supported by inmate interviews and interviews with staff who supervise inmates in segregated housing. In this particular facility, staff are cross trained for all posts. Lt. Smith reports that no inmates have been kept in involuntary segregation due to at risk of sexual victimization within the previous 12 months; therefore, there were no records to review for compliance purposes. Agency policy further requires that any such inmate who would be placed in involuntary segregation be reviewed every 30 days to determine whether a continued separation from the general population is needed.

### **Standard 115.51: Inmate reporting**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Jail has incorporated several methods in which inmates can report sexual misconduct within its facility. Pursuant to agency policy and based upon observation, inmates can inform staff directly (verbally) of any reports of abuse, harassment or retaliation. The agency also has a "kite" system in which inmates can submitted written reports as well. Posters throughout the facility provide a phone number for the Washington County Sheriff's Office Detective Division (separate building) as well as a number for the Washington County Victim Assistance Program through the County Prosecutor's Office. All reports of possible sexual misconduct are referred directly to the PREA Coordinator for coordination and enforcement of all policies, procedures and follow up.

Inmates are advised of their opportunity to remain anonymous when reporting to an outside agency (shown on the agency website as well as on the housing kiosks). An outside agency who makes a report of possible sexual misconduct within the jail will be referred to the PREA Coordinator who will ensure that outside agencies have accessibility to the inmate/victim and will also ensure the investigation is completed in a timely and professional manner.

The agency reports it does not hold Immigration and Customs Enforcement detainees but does have a contract to hold US Marshall prisoners.

### **Standard 115.52: Exhaustion of administrative remedies**

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Resources used: Policy 715 – Inmate Grievances

The Washington County Jail, via Policy 715, identifies an Inmate Grievance Procedure in which inmates have a tool to report sexual misconduct in the facility. The policy has no specified timeframes, thereby there would be no perceived time limit in which inmates would need to make a submission. The inmate handbook and housing kiosks provide notification of an inmate grievance process.

There have been no grievances filed related to allegations of sexual misconduct for the facility within the previous 12 months; therefore, there were no records to review for compliancy. Agency policy does state that an inmate may be disciplined if a grievance related to an allegation of sexual misconduct was filed in bad faith.

Corrective Action: Agency policy does not address criteria (3) and (4) of 115.52(b).

*Corrective Measures Jan 2017: The agency has submitted revised policies for Prison Rape Elimination Act and Inmate Grievances which include the required criteria of 115.52(b).*

Corrective Action 2: Agency policy does not address 115.52(c).

*Corrective Measures Jan 2017: The agency has submitted a revised policy for Inmate Grievances which includes the required criteria of 115.52(c).*

Corrective Action 3: Agency policy does not address 115.52(d).

*Corrective Measures Jan 2017: The agency has submitted a revised policy for Inmate Grievances which includes the required criteria of 115.52(d).*

Corrective Action 4: Agency policy does not address 115.52(e).

*Corrective Measures Jan 2017: The agency has submitted a revised policy for Inmate Grievances which includes the required criteria of 115.52(e).*

Corrective Action 5: Agency policy does not address 115.52(f).

*Corrective Measures Jan 2017: The agency has submitted a revised policy for Inmate Grievances which includes the required criteria of 115.52(f).*

### **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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation  
Housing Kiosks  
Posters  
Victim Assistance Letter of Agreement

During the on-site visit and through review of provided materials, the Washington County Jail provides inmates the ability to contact the local Victim Assistance Program through the County Prosecutor's Office. The victim advocates play an integral role in many ways – an outside source to report sexual misconduct, emotional support services, as well as individuals who will be present with inmates who are victims of sexual assault during interviews and/or exams. Phone numbers for the Victim Assistance Program is provided on housing kiosks and posters hung throughout the facility. The PREA Coordinator reports there is no local rape crisis service; therefore, the Victim Assistance Program is utilized in that role. Agency policy also indicates that outside agencies working with inmate victims (e.g. victim



advocates), will be given plentiful access to the inmates in which they service. A copy of a letter of agreement with the Washington County Victim Assistance Program was provided which outlines the services to be provided to inmates held at the facility who report sexual misconduct.

Agency policy requires staff to inform an inmate, upon access to outside agencies, the extent to which communication will be monitored as well as the possibility of forwarding of reports to appropriate authorities in accordance with mandatory reporting laws. Since there were no instances of this nature, there were no records and/or inmates to confirm compliancy.

The agency does not hold detainees for Immigration and Customs Enforcement but does have a contract to hold prisoners for US Marshalls.

#### **Standard 115.54: Third-party reporting**

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

Resources used: Agency website

The Washington County Sheriff's Office website provides information to the public on how friends/family of inmates can make reports of sexual misconduct by: (1) phone number to the Detective Division of the Washington County Sheriff's Office which is located at a separate building/location from the Jail, (2) phone number to the Washington County Victim Assistance Program, (3) address to submit written communication to the Victim Assistance Program, and (4) email address to submit email communication to the Detective Division of the Washington County Sheriff's Office. The website also gives the address in order to send written communication to the Victim Assistance Program.

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

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation  
Collective Bargaining Agreement

Agency Policy 762 requires that all staff are to report any knowledge, suspicion or information related to incidents of sexual misconduct or retaliation. It also indicates any neglect or violation of responsibilities associated with reporting is also prohibited. This was confirmed through interviews of staff, mental health practitioners and medical staff. Further the agency Collective Bargaining Agreement, Section 17.3: Duty to Report states "Employees have the responsibility to report actual or perceived violations of rules or standards of conduct by another employee or any other agency." Further, medical staff indicates they would disclose a duty to report to inmates if an allegation was reported to them.

Agency Policy also prohibits the information pertaining to reports of sexual misconduct and/or information related to an inmate's risk of sexual victimization to be limited for purposes of investigation,

housing and/or program assignments. All reports of sexual misconduct are forwarded to the PREA Coordinator, Lt. Smith, therefore this is evidence of limited exposure to other staff.

The Washington County Jail has elected to train all its staff, volunteers and contractors under the same curriculum which includes being informed and reviewing policy related to mandatory reporting and a duty to report. Interviews with staff, medical and mental health confirm their knowledge of the requirement to report all incidents of sexual misconduct, harassment and/or retaliation. Agency policy also dictates a mandatory requirement to report sexual misconduct incidents to applicable outside agencies if the victim/inmate is less than 18 years of age or considered a vulnerable adult.

As stated previously, the facility reports all incidents of possible criminal conduct related to sexual misconduct to the Detective Division within its Sheriff's Office. The same is reported to the PREA Coordinator so that appropriate follow up can be made related to the investigation and care for the inmate(s). Any incidents involving non-criminal conduct in reports of sexual misconduct are reported directly to the PREA Coordinator for further inquiry as well as follow up for the care of the inmate.

### **Standard 115.62: Agency protection 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Within the previous 12 months, the agency reports no incidents in which an inmate was subjected to substantial risk of imminent sexual abuse. Agency policy 762 requires the immediate response by staff in incidents of sexual misconduct by either staff or inmates. Even though the agency has had no incidents of sexual misconduct in the recent past, interviews with incarcerated individuals found that they (the inmates) believed the staff to be very responsive when a critical incident occurs in the jail – believing the staff would keep them safe if a problem presented itself.

### **Standard 115.63: Reporting to other confinement facilities**

- 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Policy 762 states that anytime an allegation of an inmate being sexually abused at another facility is received, the Washington County Jail's Compliance Manager (Lt. Lee) will notify the Compliance Manager (or appropriate person) at the facility where the abuse is alleged to have occurred. Such notification is to occur as soon as possible but no more than 72 hours from the time of the report and shall be documented. Agency policy also states that the Compliance Manager at the Washington County Jail shall be the receiver of any similar reports that allege abuse at his facility that were made at another correctional facility. The Washington County Jail reports no such incidents within the previous 12 months of either reporting to another facility or of a report received from another facility.



### Standard 115.64: Staff first responder 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Jail has a very detailed policy related to the response of staff/agency when a report of sexual abuse occurs. This policy shows a teamwork approach by staff, medical, mental health, victim advocates and detectives. A simplified first responder flowchart is included with the policy which gives clear, concise direction at a glance. First responder binders are located at each post so staff would have immediate access to the policy expectations. The policy provides for the actions of the first responder as well as reporting to facility management and subsequent reporting to the Detective Division. There are steps taken to include medical staff for emergency medical treatment (if needed) as well as inclusion of victim advocates and mental health staff. The policy also indicates that if a report of sexual abuse is taken by a non-staff member, that person is to notify the victim that he/she is to take no actions which could damage or destroy evidence. Staff interviews showed each staff member were fully aware of the necessary steps as a first responder.

The agency reports no incidents of sexual abuse within the previous 12 months; therefore, there were no records which could be examined for compliancy. Interviews with detectives and staff verified they were well trained and versed on the expected course of action in the event of a report of sexual abuse.

Corrective Action 1: Policy 762 addresses criteria #1-3 of 115.64(a), but does not include the evidence collection specificity in #4.

*Corrective Measures Jan 2017: The agency has provided an updated Prison Rape Elimination Act policy which includes the required criteria relative evidence collection from the alleged abuser.*

### Standard 115.65: Coordinated response

- 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation  
First Responder Checklist/Flowchart  
First Responder Binders

Policy 762 outlines a clear institutional plan to respond to incidents of sexual abuse within its facility. The plan includes the listed expectations of the first responder, medical staff, victim advocates, agency leadership, detectives as well as follow up by medical and mental health staff. A First Responder checklist is included with the policy as is a simplified flowchart of first responder responsibilities which gives steps to be taken at a glance. First Responder Binders are located at each post.

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

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

Resources used: Washington County Sheriff's Office Collective Bargaining Agreement  
Policy 762 – Sexual Misconduct Reporting, Response, Investigation and  
Prevention of Retaliation

The Washington County Sheriff's Office has one collective bargaining agreement for all deputies and correctional staff. With that said, after an initial review of the agreement, there was nothing seen which precludes the agency from being able to remove staff from duties during the investigation of allegation of sexual abuse or that such removal could not be executed at the discretion of the agency at the conclusion of an investigation after a finding of staff inappropriate behavior. Agency policy prescribes for periodic status checks and protection for those persons who express a fear of retaliation after cooperating in an investigation.

Corrective Action 1: While this Auditor is confident the facility would be responsive in instances of retaliation, agency policy did not address 115.67(a) regarding protective measures.

*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Policy which includes the required criteria and the Jail Administrator will assign a Supervisor to monitor retaliation to staff or inmates who report sexual misconduct and/or are involved in the investigation thereof.*

Corrective Action 2: Agency policy contains most of 115.67(c); however, it does not include "inmates who were reported to have suffered sexual abuse" within its language about retaliation monitoring.

*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which includes the required verbiage.*

**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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and  
Prevention of Retaliation

Agency policy indicates Detectives are in charge of monitoring retaliation against inmates and/or staff during and following an investigation of sexual misconduct. All reports of possible retaliation are to be submitted to either the PREA Coordinator, Jail Administrator or PREA Compliance Manager and the PREA Compliance Manager ensures such reports are investigated pursuant to policy.



Corrective Action 1: 115.67(c) – Policy 762 is missing “and of inmates who were reported to have suffered sexual abuse” on page 11 of its policy.

*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which includes the required verbiage.*

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

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The agency reports that no inmates who have alleged to have suffered sexual abuse have been placed in involuntary segregation within the past 12 months – there are no incidents of alleged sexual abuse within the previous 12 months for this facility. Therefore, there are no records to review. At the time of the on-site audit, there were no inmates in custody who had alleged sexual abuse at the facility. Interviews of staff, supervisors and Jail Administrator attest that all inmates, even those might be placed in involuntary segregation as related to an incident of sexual abuse, would still be given the same opportunities for programming as other inmates. Even though this Auditor did not have the opportunity to speak with inmates who fell within this category and there were no records to review, it is believed the small size of the facility allows for the easy attainment of this practice.

### **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)

Resources used: Policy 760 – Prison Rape Elimination  
Policy 762 – Sexual Misconduct Reporting, Response, Investigation and Prevention of Retaliation

Agency policy 762 requires for the prompt, thorough and objective investigation of incidents of sexual misconduct, including any reports submitted via third party and/or anonymous reports. Training certificates have been provided that verify detectives have received the required training related to investigations in a correctional setting. Agency policy also states “investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators and witnesses and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.” This policy also requires for investigations to be in written format and to include a thorough description of physical, testimonial, and documentary evidence and attach copies of evidence when feasible. Policy further requires for substantiated allegations of sexual misconduct that are criminal shall be referred to prosecution (Washington County Prosecutor’s Office). The agency, per policy, would not terminate an investigation upon the departure of an alleged abuser from custody or employment. All of these items were confirmed by Lieutenant Detective interviewed as part of the PREA on-site audit.

All investigations related to criminal actions would be referred to the Detective Division of the Washington County Sheriff's Office. Incidents of harassment and retaliation would be reviewed/investigated by Jail command staff unless an incident is egregious involving staff and/or constitutes a criminal act. The agency would not refer investigations to third party agencies unless the Sheriff would decide to refer an investigation to the Bureau of Criminal Investigation of the Attorney General's Office for complicated cases involving staff. It is felt such would be rare circumstance and it has not occurred in many years.

Corrective Action 1: Policy 760 indicates the criminal investigative files are retained for a period of five years; however, standard 115.71(i) indicates the records are to be retained for the duration of the incarceration of the alleged abuser or while abuser is employed by agency, plus five years.

*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which includes the required time period for records retention.*

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Agency policy indicates the standard for substantiating an allegation of sexual abuse or harassment as the preponderance of the evidence.

### **Standard 115.73: Reporting to 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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Sheriff's Office's policy 762 identifies the Detective Division as being responsible for notification to inmates who have alleged sexual abuse within its jail facility. A detective will notify an inmate victim whenever the abuser (staff or other inmate) has been indicted and/or convicted of an offense related to the sexual abuse. In addition, a detective will notify an inmate victim if an administrative investigation has led to a policy or agency violation for sexual misconduct as being substantiated, unsubstantiated or unfounded. If the alleged abuser is a staff member, a detective would also inform the inmate victim if the the offender staff member has been removed from working inside the jail and/or if the staff member is no longer working at the agency. Any notifications or attempts at notification made pursuant to this notification standard, per policy, will be documented. Lastly, the policy states that the agency's responsibility to give notification will terminate with the release of the inmate from custody.

Since the Washington County Jail has had no allegations of sexual misconduct within the previous 12 months, there were no records available for review.



### Standard 115.76: Disciplinary sanctions for staff

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Sheriff's Office policy states that "any employee who has engaged in sexual misconduct, retaliation or any conversations or correspondence which suggests a romantic or sexual relationship with an inmate shall be subject to discipline consistent with the employee standards of conduct, which may include termination of employment. The employee may also be subject to criminal prosecution. Termination is the presumptive discipline for an employee that has been found guilty of sexual misconduct. The policy also requires for detectives to work in conjunction with the prosecutor's office for the prosecution of sexual misconduct cases which are criminal in nature. The agency Collective Bargaining Agreement Section 18.4 – Progressive Action states "in instances where more severe discipline is warranted, the Employer may discipline the member according to the severity of the incident."

Corrective Action 1: The policy provided to the Auditor does not address 115.76(c) in its entirety.

*Corrective Measures Jan 2017: The agency has submitted a revised Prison Rape Elimination Act policy which includes the required information.*

Corrective Action 2: The policy provided to the Auditor does not address 115.76(d).

*Corrective Measures Jan 2017: The agency has submitted a revised Prison Rape Elimination Act policy which includes the mandated reporting to law enforcement agencies and/or relevant licensing bodies.*

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

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Jail's policy 762 states it is applicable to all persons employed by the agency as well as any volunteers and independent contractors. However, the initial policy had no reference to corrective action in the policy for volunteers and/or contractors. This has since been corrected by amending/updating facility policy.

Lt. Smith reports there have been no volunteer or contractor PREA violations in the previous 12 months.

Corrective Action 1: The policy provided to the Auditor does not address 115.77(a).

*Corrective Action March 2017: An updated Prison Rape Elimination Act policy has been provided which includes the required components of 115.77a*

Corrective Action 2: The policy provided to the Auditor does not address 115.77(b). The policy does not include "sexual harassment"

*Corrective Action March 2017: An updated Prison Rape Elimination Act policy has been provided which includes "sexual harassment" as misconduct for contractors and/or volunteers.*

### **Standard 115.78: Disciplinary sanctions for inmates**

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

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The Washington County Jail's policy 762 explains the administrative and criminal sanctions involved with substantiated allegations of sexual misconduct by inmates. The policy confirms that inmates, upon a substantiated finding or a criminal finding of sexual misconduct, an inmate shall be considered for disciplinary control. The policy further states inmates "shall be given appropriate programming and interventions" as it relates to the sexual offense. Lastly, the policy does stipulate inmates who report allegations of sexual misconduct in good faith will not be issued a conduct report regardless of whether the claim can be substantiated or if the inmate later recants – each claim will be determined on a case by case basis and evaluated on its own merits. Agency policy and the inmate rule book identifies sexual activity as a serious rule violation within the jail.

The jail has had no reports of sexual activity between inmates during the previous 12 months.

Corrective Action 1: The policy provided for compliance of this standard does not address 115.78(b).

*Corrective Action March 2017: The agency has submitted a revised Prison Rape Elimination Act policy which includes the appropriate references to inmate sanctions for misconduct.*

Corrective Action 2: The policy provided for compliance of this standard does not address 115.78(c).

*Corrective Action March 2017: The agency has submitted a revised Prison Rape Elimination Act policy which includes references for consideration of an inmate's mental disabilities/illness.*

Corrective Action 3: Regarding 115.78(d), the policy does include inmates "shall be given programming;" however, the standard requires for the inmate to be required to participate in therapy, counseling, or other interventions designed to address the underlying issues. Interview of contracted mental health staff indicate their services can accommodate this need.

*Corrective Action March 2017: The agency has submitted an updated Prison Rape Elimination Act policy which indicate agency shall consider counseling for offenders.*

Corrective Action 4: The policy provided for compliance evidence of this standard does not address 115.78(e).



*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which includes the required verbiage relative to discipline of staff for sexual contact with a staff member when the staff member did not consent.*

Corrective Action 5: Agency policy and the inmate rule book identifies sexual activity between inmates as a serious rule violation; however, the policy does not include that sexual activity will not constitute sexual activity if it determines the activity is not coerced.

*Corrective Measures Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which includes the required verbiage relative to a report of sexual abuse made in good faith being based upon a reasonable belief that the alleged conduct occurred shall not constitute a false reporting of an incident or act of lying.*

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

Exceeds Standard (substantially exceeds requirement of standard)

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

Resources used: Policy 764 – PREA Risk Assessments and Accommodations Strategies  
Booking Medical Release Form

Agency policy indicates that a follow up will be conducted with medical or mental health within 14 calendar days of intake for any inmate who reports to have experienced prior sexual victimization or previously perpetrated sexual abuse, whether such events occurred in the facility or in the community. Interviews with medical staff confirmed this practice and that appropriate referrals to mental health professionals would be made if needed. The agency reports no instances where a follow up was completed for any inmates who reported previous victimization or perpetration. The policy restricts the information as contained in any risk assessment screening to medical, mental health and/or staff who require the information for appropriate classification and/or programming assignments. The Auditor was directed to the Booking Medical Release Form as "informed consent" but the form that was given at the time of the initial audit was only relative to release of medical information, not informed consent. A newly created informed consent was provided during the corrective action period which brought this standard into compliance.

Corrective Action 1: The agency medical staff indicates informed consent is obtained in instances of allegations of sexual abuse; however, no form was available for the auditor. Agency staff directed the Auditor to the medical release which is signed by inmates at the time of intake but the release is not relative to what is needed for 115.81(e).

*Corrective Measures Jan 2017: The agency has provided an updated Prison Rape Elimination Act policy as well as a copy of a revised Informed Consent form which bring this standard to compliancy.*

### **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)



Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

Interview of medical staff at the Washington County Jail indicated they would not normally provide medical services to any incident of alleged sexual abuse as victims would be taken to the hospital for forensic examination. Upon questioning, the nurse did verify the medical staff would provide emergency medical attendance if the victim was injured or required such until transport could be made. The facility does have 24 hour medical but does not have around the clock mental health staffing. Emergency on-site medical care is available while mental health services would be received when the contracted mental health staff are on duty. Victim Advocates are used as emotional support for victim inmates at the time of a sexual assault per policy. Jail medical and mental health contracted staff will follow up with inmate victims when on duty and follow any recommendations as made by other medical and/or mental health professionals who treated the victim initially. Medical staff reported that if a victim is sent to the hospital for emergency treatment and/or forensic exam, the victim would receive information relative to emergency contraception and sexually transmitted infections prophylaxis at the hospital. Agency policy requires that medical and mental health services provided to a victim of sexual abuse is provided at no cost to the victim regardless of whether the inmate names the name of the offender and/or participates in the investigation.

**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)

Resources used: Policy 762 – Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation

The medical and mental health staff will receive referrals from correctional staff that identify inmates who have been victimized by sexual abuse in any jail, prison or juvenile facility and provide supportive follow with those inmates, pursuant to agency policy. Upon speaking with medical and mental health staff, they confirm that the services provided inside the Washington County Jail are consistent with the level of care which is available in the community. Agency policy and medical staff confirm pregnancy tests, relevant pregnancy related information and sexually transmitted infection testing/prophylactics would be offered to female inmate victims of sexual abuse if not already provided by the hospital which may have performed emergency medical treatment and/or forensic evaluation. All services, according to policy, medical staff and facility leadership, would be provided without cost to the inmate victim.

Medical services staff report victims of sexual abuse would typically be taken directly to the hospital for a forensic examination and the medical staff at the facility would, of course, perform follow up as needed to include, but not be limited to, treatment of any injuries, reaffirm victim received information regarding pregnancy, STDs, etc. The medical staff would also follow up with any test results from the hospital to relay to the victim. Mental health staff report they would provide on-going support, and counseling to the victim as well as referral to outside agencies should the victim be released from custody.

**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)

Resources used: Policy 763 – Sexual Abuse Review Team

The Washington County Jail policy 763 provides for the existence of a Sexual Assault Review Team (SART) which consists of the Jail Administrator, Investigator, Special Services (e.g., Mental Health), PREA Compliance Manager as well as any other staff member who may provide relative information of the sexual misconduct incident. Per the policy, the SART will review all sexual abuse incidents (unless determined unfounded) within 30 calendar days of the conclusion of the investigation (extension can be granted by the PREA Compliance Manager in exigent circumstances). The SART will review the incident for all the criteria as specified in 115.86(d) and compile a written report which gives detailed recommendations on improvements (if any) to policies, practices, facilities, technology and/or staffing. Such report would be submitted to the PREA Compliance Manager and Managing Officer who should implement said recommendations or provide a written explanation for not doing so. Since there have been no sexual misconduct incidents, there were no records to review.

### Standard 115.87: Data collection

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Resources used: Policy 760 – Prison Rape Elimination

The Washington County Jail has been very fortunate to have had no incidents of sexual misconduct within its facility within the previous 12 months. With that said, there were no records to be reviewed as might relate to allegations reported and/or investigations. Regardless, it is necessary for the agency to have compiled reporting for its agency, even if the numbers are zero, for purposes of this standard. Lt. Smith did acknowledge having received a reporting form from the Department of Justice in order to report sexual abuse, harassment and/or retaliation. The agency planned to begin compiling similar data to develop a statistical instrument which followed the same data collected on the DOJ form. Agency policy states the necessary data is to be compiled but no such document was provided. Agency policy indicates the annual report which includes aggregated data and identification of problem areas would be posted on the agency website, but no report was seen. All records related to sexual abuse incidents would be retained for a period of five years per policy. A corrective action was listed previously for investigative records related to inmates to be retained for the length of the inmate offender's incarceration, plus five years and for the length of a staff member's employment, plus five years. Aggravated collective data is to be retained for a period of ten (10) years per policy. The Washington County Jail does not contract for the confinement of its inmates; therefore, 115.87(e) is not applicable.

Corrective Action 1: The agency had not provided a standardized instrument by which to collect/report for every allegation of sexual misconduct in its facility pursuant to 115.87(a)(c).

*Corrective Measures Jan 2017: The facility has provided an updated Prison Rape Elimination Act policy which includes specificity of data collection details. The Agency will collect the same data as that required of the Survey of Sexual Violence by the US Department of Justice.*

Corrective Action 2: The agency had no compiled an aggregated report of incident based sexual abuse data to comply with 115.87(b)

*Corrective measures March 2017: The agency has submitted a copy of the SSV-3 Survey of Sexual Victimization for 2015.*

### Standard 115.88: Data review for corrective action

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

Resources used: Policy 760 – Prison Rape Elimination

Agency policy provides for the review of aggravated data for purposes of determining the agency's effectiveness in the prevention, detection and response to sexual misconduct events in its facility. The review is to identify problem areas, recommend and impose corrective action on an ongoing basis and requires the preparation of an annual report of the agency's findings related to the review. During the initial review period, no report was available for the Auditor on this standard. It is believed that since there were no incidents reported within the previous 12 months that no report was needed. However, a data report would still be required pursuant to the standard. Policy does state the report is to be submitted to the Jail Administrator for review/approval and shall be posted on the agency website. Per policy, redactions can be made to any such report if the material would present a safety and/or security issue for the facility. A report has since been completed and a copy submitted to this Auditor bringing the matter into compliance.

Corrective Action 1: In order to comply with 115.88(a), an annual report is to be compiled pursuant to this section.

*Corrective Measure Jan 2017: The agency has submitted an updated Prison Rape Elimination Act policy which indicates the requirement of an annual report.*

Corrective Action 2: Per 115.88(b), the report is to include the current year data as well as a comparison to previous year's corrective actions.

*Corrective Measure March 2017P: The agency has submitted a copy of its 2015 SSV-3 Survey of Sexual Victimization.*

Corrective Action 3: Per 115.88(c), the agency is to provide the results of its annual report to the public or the agency website (if applicable).

*Corrective Measure March 2017: The agency has made its report accessible to the public via its agency website.*

### Standard 115.89: Data storage, publication, and destruction

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

Resources used: Policy 760 – Prison Rape Elimination

The Washington County Jail states its will retain its aggravated data and relative reports for a period of 10 years. Policy states that any collective data would be made available to the public on its agency



website. Agency policy requires that all personal identifiers be removed from any data report that is published for public review. Facility staff report that PREA data will be stored in the office of the Assistant Jail Administrator, Sgt. Lee. Criminal cases will be stored with the Detectives who investigate such cases within the Criminal Division of the Washington County Sheriff's Office

Corrective Action: Agency website does not contain an aggravated data report as required by 115.89(b).

*Corrective Measure March 2017: The agency has submitted its 2015 SSV-3 Survey of Sexual Victimization.*

### AUDITOR CERTIFICATION

I certify that:

*neg*

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

*neg*

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

*neg*

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.

*[Handwritten Signature]*  
\_\_\_\_\_  
Auditor Signature

*March 10, 2017*  
\_\_\_\_\_  
Date