## PREA Audit Report

### Auditor Information

**Auditor name:** Patrick J. Zirpoli  
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**Date of report:** 09/05/17

### Facility Information

- **Facility name:** Volusia County Division of Corrections (Correctional Facility) VCCF (Branch Jail) VCBJ
- **Facility physical address:** 1354 Indian Lake Road, Daytona Beach Fl. 32124
- **Facility mailing address:** (if different from above)
- **Facility telephone number:** 386-254-1565

**The facility is:**  
- ☒ County  
- ☐ Federal  
- ☐ State  
- ☐ Military  
- ☐ Municipal  
- ☐ Private not for profit  
- ☐ Private for profit

**Facility type:**  
- ☒ Jail  
- ☐ Prison

**Name of facility’s Chief Executive Officer:** Acting Warden Larry Langdon (VCCF) Acting Warden Rodney Prince (VCBJ)

**Number of staff assigned to the facility in the last 12 months:** 317

**Designed facility capacity:** 1494

**Current population of facility:** 1485

**Facility security levels/inmate custody levels:** Minimum to maximum

**Age range of the population:** Juveniles through adult

**Name of PREA Compliance Manager:** Linda Higgins & Karen White  
**Title:** Corrections Counselor  
**Email address:** lhiggins@volusia.org kgatlin@volusia.org  
**Telephone number:** 386-254-1586

### Agency Information

**Name of agency:** Volusia County Division of Corrections

**Governing authority or parent agency:**

**Physical address:** 1353 Indian Lake Road Daytona Beach, Fl. 32124

**Mailing address:** (if different from above)

**Telephone number:** 386-323-1565

**Agency Chief Executive Officer**

**Name:** Mark A. Flowers PH.D., CCE  
**Title:** Corrections Director  
**Email address:** mflowers@volusia.org  
**Telephone number:** 386-323-3505

**Agency-Wide PREA Coordinator**

**Name:** Glenda Powell  
**Title:** Program Services Manager  
**Email address:** gpowell@volusia.org  
**Telephone number:** 386-254-1534
AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (PREA) audit of the Volusia County Division of Corrections took place on August 21st through the 25th, 2017. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. Prior to the on-site portion of the audit, I reviewed all policies and data pertaining to the PREA Standards. The policies and procedures were provided to me by the Agency PREA Coordinator as well as the Facility PREA Compliance Manager while on site. The facility was posted on July 10, 2017, allowing time for inmates and staff to respond to me in writing. All documentation requested by me was provided in a timely and efficient manner, any follow-up requests were acted upon immediately.

I wish to extend my appreciation to Corrections Director Mark A. Flowers, Acting Warden Larry Langdon (VCCF), Acting Warden Rodney Prince (VCBJ), and all of the staff for their professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made. I would also like to thank Volusia County for its commitment to the operations of the Volusia County Division of Corrections, and the dedication to the safety of the staff, as well as their dedication to the care, custody, and control of the inmates incarcerated at the facility.

I need to recognize Glenda Powell, Agency PREA Coordinator, Karen White PREA Compliance Manager, and Linda Higgins PREA Compliance Manager. It is through their dedication and overall work ethic that the Volusia County Division of Corrections performed exceptionally well during the PREA Audit. They worked with me tirelessly through the audit process, and fulfilled any request I had.

Prior to the onsite audit, I had several opportunities to discuss the audit process, and expectations of the facility with Glenda Powell, Agency PREA Coordinator.

Upon my arrival on August 21st, I met with the administration of the Volusia County Division of Corrections, this included the Director, Acting Wardens, Agency PREA Coordinator, PREA Compliance Managers, and staff representing all departments of the agency. During this meeting, we discussed the overall audit process and I answered any questions.

After the entrance meeting, I was given a tour of the Volusia County Correctional Facility. I conducted the tour of the Volusia County Branch Jail on August 22, 2017. During both tours, informal interviews were conducted with both staff and inmates in several different areas. I viewed the complete facilities, all areas were accessible to me during the audit tour. I was able to view the inmates at the facilities in their housing units, work locations, and moving throughout the facility grounds.

Staff interviews were conducted throughout the week. During the interview portion of the audit, thirty-six formal staff interviews were conducted, as well as in-depth discussions with other staff available during the tour. Included in the interviews and discussions were the Director, Wardens, PREA Coordinator, PREA Compliance Managers, Medical Staff, Shift Supervisors, Counselors, Kitchen Staff, Volunteers, Contractors, and First Line Staff. The staff interviewed were randomly selected from all staff working during the audit, I selected random staff from different areas within the facility, as well as both shifts.
Also during the interview portion forty inmates at the facility were interviewed. I selected the inmates by obtaining a population sheet, and randomly selected the inmates from all housing units. The selected inmates included those who have identified as gay or bisexual, inmates identified as high risk for sexual victimization, identified as high risk for abusiveness, inmates who have reported sexual abuse or sexual harassment, juvenile inmates, and one inmate who identified as transgender.

All of the interviews were conducted in a very efficient manner, this was accomplished by the efforts of the PREA Coordinator and the PREA Compliance Manager’s.

The facility was prepared for the onsite audit and performed extremely well. Looking at the overall performance of the facility I was impressed with not only the facilities operations but the overall agencies operations and response to incidents of sexual abuse or sexual harassment. The seriousness of incidents of this nature are not overlooked by both staff and inmates alike. The interactions with the staff were positive and all were extremely helpful in making the audit process run as seamless as possible.

I utilized an overall methodology to make my determination of compliance with the standards. This included a complete review of all policies and documentation provided to me prior to the onsite audit. The documentation was then corroborated through visual inspection of the facility, as well as interviews with staff and inmates. I was able to determine that the facility has the policies in place to address all standards, and has put these policies into daily practice. In the standard-by-standard discussion I have specifically identified the policies and documentation utilized during this process, these policies and documentation are listed in italic type. I have also listed any visual evidence, as well as interviews that aided in making these decisions.
DESCRIPTION OF FACILITY CHARACTERISTICS

The Volusia County Division of Corrections consists of two facilities/buildings, the Correctional Facility (VCCF) and the Branch Jail (VCBJ), which are located on the same property. All inmates coming into the Volusia County Division of Corrections intake through the VCBJ, the VCCF houses all male county sentenced inmates, and all female inmates. The VCBJ houses pre-sentenced inmates, and a limited amount of trustees.

The facilities/buildings share staff who can be assigned at either the VCCF or the VCBJ on a six month rotation.

The mission of the Volusia County Division of Corrections is to protect the community by maintaining a secure jail that also is safe, humane, and constitutional in operation.

The main entrance to either building is controlled by a correctional officer in main control. All visitors to the facility need to pass through this area and be approved to enter the building. This process will allow access to the main portion of the facility.

Combined, the buildings have ten multi occupancy cell housing units, four dormitory style housing units, and two single cell housing units. Overall they have fifty six administrative segregation cells, and forty two disciplinary segregation cells.

The celled housing units have the toilets located within the cells, and the showers are located at the ends of the housing unit. The toilets are positioned to allow the inmate to toilet in privacy, and all of the showers have curtains to allow privacy.

The dormitory style housing units have the toilets and showers located along the back wall. All of the showers have curtains and the toilets have screens to allow for privacy.

During the last 12 months 23,917 inmates have been admitted to the Volusia County Division of Corrections with 10,678 staying for 72 hours or more and 4,080 staying for 30 days or more.

The average length of stay is 32 days.
SUMMARY OF AUDIT FINDINGS

The Volusia County Division of Corrections has exceeded in six standards, met thirty four standards, and three standards are not applicable to the agency.

This determination was made after reviewing all materials provided during the pre-audit, the interviews and facility tour conducted during the audit, and the final review of all findings.

Number of standards exceeded: 6
Number of standards met: 34
Number of standards not met: 0
Number of standards not applicable: 3
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)

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 102.21 & 305.13
Volusia County Division of Corrections Organizational Chart

The above listed policies mandate zero tolerance toward all forms of sexual abuse and sexual harassment and outlines the agency’s approach to preventing, detecting, and responding to such conduct. The policies were reviewed in their entirety and the staff were questioned on content of the agency policies during staff interviews. All staff interviewed understood the policies, and had previously reviewed the policies.

The agency has designated a Department PREA Coordinator. I confirmed during her interview that she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in the Facility. It should be noted that the agency PREA Coordinator reports directly to the Corrections Director.

The Department has identified PREA Compliance Managers (PCM) who report directly to the PREA Coordinator.

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 The agency does not contract for housing of inmates
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)

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

Staffing Plan Annual Review dated April 25, 2017, reviewed and signed by Warden and PREA Coordinator

Staff plan roster

JMS Computer Entries for Unannounced Rounds

The agency has developed a facility staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities have taken into consideration all areas enumerated under this standard. Compliance was determined by reviewing the policies. I further questioned management staff on the policies and the ability to fully staff the facility at all times. I was informed that the facility will fill posts with overtime if needed to be at full compliment. The facility also has the ability to collapse posts and limit inmate activity and movement when needed.

The staffing plan has not been deviated from within the last 12 months. I confirmed during staff interviews that any posts would be filled with overtime.

The administration meets on a daily basis to review incidents that have occurred at the facility, as well as discussing normal facility operation. During these meetings, they discuss any adjustments that may need to be made to the staffing plan, deployment of video monitoring and other technologies, and any resources available. This was confirmed during the management staff interviews.

The agency has implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. These unannounced rounds take place during all shifts at the facility. The agency has a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring. I further confirmed the rounds are occurring during the staff and inmate interviews as well as reviewing the housing unit daily log book and the computer entry into the Jail Management System (JMS).
**Standard 115.14 Youthful inmates**

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

**Documentation reviewed:**

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

Over the past 12 months the facility has housed youthful offenders, during the onsite visit six male youthful offenders were currently being incarcerated.

The male youthful offenders are housed in an area that is isolated where sight and sound separation could be maintained. They are also under direct supervision at all times.

During the audit I observed several youthful offenders being escorted throughout the building, they were kept under direct supervision by staff.

The youthful offenders attend school on a daily basis, this was confirmed during the facility tour when the instructor was on the housing unit.

The male youthful offenders are housed at the VCBJ, if the agency had any female offenders in custody they would be housed at the VCCF.

I interviewed two of the youthful offender. They confirmed that they are kept sight and sound separated from the other inmates, they also confirmed that they are receiving daily recreation, programming and schooling. This was further confirmed during staff interviews.

**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)

**Documentation reviewed:**

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 400.23*
The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches unless in exigent circumstances or when performed by a medical practitioner. I further confirmed this procedure during staff and inmate interviews.

The above outline procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The directives further dictates that staff of the opposite gender announce their presence when entering an inmate housing unit. I reviewed the policy in its entirety. The practices were confirmed during the staff and inmate interviews as well as during the facility tour when I observed the announcements taking place.

The facility does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown, it is determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. This practice is outlined in the training curriculum for LGBTI. I further confirmed the practices during the staff and medical interviews. I further confirmed this practice during the interview with an inmate who identified as transgender.

The agency has trained security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. This was confirmed by reviewing the provided training materials. I further verified this training during security staff interviews.

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

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 303.05, 305.09 and 305.13

Inmate Handbook in Large Print, Spanish and English
The agency has taken appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. These steps include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The facility outlines the response to inmates in these categories in the above directives. This plan outlines procedures for inmates who are not only non-English speaking, but all who are enumerated in this standard. I confirmed the use of this plan during the staff and inmate interviews.

The agency has taken steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient. The agency has a contract for telephonic language interpretation, video interpretation and interpreters through the court.

The inmate rule pamphlet is available in multiple languages and braille.

The agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants. The contracted services for telephonic language interpretation and in person sign language interpretation is available 24 hours a day.

I interviewed several inmates who were either limited English speaking or disabled, they all informed me that they have received all of the information on PREA.

**Standard 115.17 Hiring and promotion decisions**

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

*Documentation reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13, 102.08, 102.09, 102.24, and 104.01.*
County of Volusia No Harassment Policy and Equal Employment Opportunity and Sexual Harassment Policy Review Forms

The agency has policies and procedures in place that identify anyone who had been convicted of sexual abuse in a confinement setting, engaged in or attempted to engage in sexual activity in the community or has been civilly or administratively adjudicated for the same. The agency has developed a questionnaire that asks the individual the questions enumerated in this standard.

During the interviews with staff I verified that the questionnaire is being utilized. I further verified the utilization of this questionnaire by reviewing personnel files, I found that the questionnaire was filled out.

The agency further polygraphs all potential employees.

The agency considers any incidents of sexual harassment when hiring or promoting anyone or enlisting the services of any contractor. This was confirmed during interviews.

The agency conducts background checks on all new employees, this was confirmed during the human resources interviews, and while reviewing personnel files. The agency conducts an in depth background investigation which includes contacting any prior employer, this was confirmed during the interviews and review of personnel files.

The agency performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates. This is documented in the policy, I also confirmed this during the interviews and documentation review.

Criminal history checks are being conducted every five years on all employees, this was confirmed by reviewing documentation of the checks and during staff interviews.

The agency asks all applicants and employees who may have contact with inmates directly about previous misconduct in written applications and interviews. This is utilized in the hiring and promotion system.

The agency has a policy that states material omissions regarding conduct, or providing false information, shall be grounds for termination of employment.

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)

Documentation reviewed:
During the agency level interviews I verified that when the agency is designing a new facility or modifying existing facilities, they consider their ability to protect inmates from sexual abuse.

I confirmed during agency and facility interviews that they consider their ability to protect inmates from sexual abuse when installing or updating any security technology at the facilities.

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

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

**Documentation reviewed:**

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 400.23

The agency is responsible for conducting the initial investigation, these investigations are conducted by the shift supervisors. Any investigation deemed to be administrative will be conducted by the Public Protection Division, and any criminal investigations will be conducted by the Volusia County Sheriff’s Office.

The agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for both administrative proceedings and criminal prosecutions. The protocol is developmentally appropriate for youthful inmates.

These protocols are outlined in the above policy, all staff interviewed understood these protocols.

The facility transports all victims to Halifax Health Medical Center for forensic examinations, this hospital is equipped with Sexual Assault Nurse Examiners. These examinations are provided at no cost to the victim.

The Volusia Rape Crisis Center is utilized for victim advocacy. If requested by the victim, the victim advocate, will accompany and support the victim through the forensic medical examination process and investigatory interviews, providing emotional support, crisis intervention, information, and referrals.

These above procedures were confirmed during the staff interviews, and when reviewing the investigations completed.
Standard 115.22 Policies to ensure referrals of allegations for investigations

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 400.23

The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This was confirmed through review of polices which outline the procedures for investigating sexual abuse and sexual harassment. I further verified all allegations are investigated during investigator interviews, staff interviews and review of the investigative reports.

The agency investigates all allegations. I verified that the investigative procedure is published on the agencies website.

The agency has policies in place that govern the investigative process. This was confirmed during policy review and investigator interviews.

Standard 115.31 Employee training

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

Training materials Utilized for PREA Training

Training Logs

The agency provides training to all employees on the areas enumerated in this standard. I reviewed the training curriculum and materials, I found that they address all areas. I further confirmed the training during the staff interviews and the review of training records. The employees receive the initial training
and annual updates. It was confirmed during staff interviews that they also receive updates during roll calls.

All employees receive training on cross gender pat searches and searches of youthful inmates. This was confirmed during review of training materials and during staff interviews.

The employees are verifying the receipt of the training through a signature, this was verified during the review of the sample verification logs.

**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)

*Documentation reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 900.02*

*PREA Training Video*

The agency has trained all volunteers and contractors who have contact with inmates on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. This was confirmed during the volunteer and contractor interviews at the facility. The facility has trained 641 volunteers and contractors to date.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. At a minimum they are notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This was confirmed during the volunteer and contractor interviews.

The agency maintains all documentation confirming that volunteers and contractors understand the training they have received. This documentation is maintained at the facility level, this was confirmed during review of the volunteer and contractor acknowledgment forms.
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)

Documentation reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 301.02*

*Inmate Handbook*

During the intake process, inmates receive information explaining the agency’s zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. This was confirmed during the inmate and staff interviews, I also confirmed this process by visually watching inmates being processed into the facility.

The facility provides comprehensive training through a PREA video to all inmates at the facility. The inmates are provided the opportunity to ask questions on the agencies policies on zero tolerance and reporting procedures. I confirmed the comprehensive education through both inmate and staff interviews.

The facility provides inmate education in formats accessible to all inmates, this includes inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility provides materials to inmates in Spanish, they also have a contract for interpretation of other languages. The counselors would provide education to other individuals if needed.

The inmates sign receiving the information and watching a video on PREA.

The facility has all key information on the zero tolerance policy and reporting avenues to inmates provided through signage placed throughout the facility. I viewed this signage during the facility tour. I further confirmed that the signage has been in place during the inmate and staff interviews.
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)

The agency does not conduct the investigations.

Standard 115.35 Specialized training: Medical and mental health care

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

All medical and mental health care practitioners have been trained on the following:

- How to detect and assess signs of sexual abuse and sexual harassment;
- How to preserve physical evidence of sexual abuse;
- How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
- How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

This was confirmed by reviewing the training materials, and during the review of training certificates at the facility. I also confirmed this training with the medical and mental health staff during interviews.

The medical staff at the facility do not conduct sexual assault examinations.

The medical and mental health care practitioners also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner’s status at the agency. This was confirmed during the review of training certificates at the facility. I also confirmed this training with the medical and mental health staff during interviews.
Standard 115.41 Screening for risk of victimization and abusiveness

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

Documentation reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13, 301.02, 201.01, and 201.01*

*Classification Questionnaire*

*Intake Sheet*

*PREA Predator form*

*PREA victim Form*

All inmates are assessed during the intake process, which is completed upon arrival at the facility. This instrument identifies all areas of victimization enumerated in this standard. This was verified through interviews with staff and inmates, as well as review of the completed screening instruments.

The initial screening for risk of being sexually abusive considers any known prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. This was confirmed during review of the screening tool and interviews with both staff and inmates.

The facility is reassessing all inmates within 30 days of arrival, this reassessment is being conducted by staff, and they are taking into considerations all information available to them at the time of reassessment. This was confirmed by reviewing the reassessment documentation and staff interviews.

The facility would reassess an inmate’s risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may change the inmate’s risk of sexual victimization or abusiveness. This was confirmed during the staff interviews.

Inmates are informed during the screening process that they will not be disciplined for refusing to answer, or for not disclosing complete information. This was confirmed during review of the screening tools, and during the staff and inmate interviews.

The agency implements control on the dissemination of screening information at the facility level. The information from the screening tools are only available to case managers, medical if needed, and administration.
The inmates are further screened by the medical department, this screening also asks questions regarding sexual victimization. If the inmate would identify as being at risk a task would automatically be created for them to be seen by mental health.

**Standard 115.42 Use of screening information**

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

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13, 301.02, and 305.12*

*Transgender Intersex Review Board Form*

The agency utilizes the information from the screening instrument and reassessment to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was confirmed during review of the policy and I confirmed these procedures during staff and inmate interviews.

The agency makes all of these determinations on an individualized basis, this ensures the safety of each inmate. This was confirmed during policy review, and staff and inmate interviews.

In deciding whether to assign a transgender or intersex inmate to a male or female housing unit, and in making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether the placement would present management or security problems. During the interviews with the transgender individual at the facility I confirmed that this process was in place. They also confirmed that their own views were taken into consideration during these decisions. The transgender inmate informed me that he is given the opportunity to shower separately from other inmates, this practice was confirmed with the staff.

I confirmed during interviews and review of the transgender inmates file that placement and programming assignments for each transgender or intersex inmate is reassessed every thirty days.

The agency does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status. This was confirmed during agency level interviews, as well as inmate interviews, several inmates at the facility interviewed identified as gay, bisexual and transgender.
Standard 115.43 Protective custody

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

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

*PC Committee Review*

During the staff interviews I verified that no inmates identified as vulnerable are being placed in involuntary protective custody. The facility has enough housing units that give them the opportunity to place inmates in other housing units to protect them without having to utilize a segregated housing unit.

I verified this procedure during the inmate interviews, several had identified as vulnerable during the initial screening. They related that they were not placed in segregated housing.

The agency policies also state that at no time will an inmate be placed on involuntary segregation status because the inmate is at high risk of victimization.

In the last 12 months, there were no inmates held in involuntary segregated housing.

Standard 115.51 Inmate reporting

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

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13, 300.02, and 102.08*

*Inmate Handbook*

*PREA Brochure*
The facility provides the inmates the information on reporting in the inmate manual provided at intake and through signage throughout the facility. The inmates can report directly to any staff or through the reporting line to the Rape Crisis Center. During the interviews with both staff and inmates I confirmed that they were aware of the reporting avenues.

The staff interviews related that they understood the agency policy that states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency provides in policy a method for staff to privately report sexual abuse and sexual harassment of inmates. The policy allows the staff to go outside their immediate chain of command.

The agency has started to implement a Kiosk system for submitting requests. This will give the inmates a further reporting avenue.

**Standard 115.52 Exhaustion of administrative remedies**

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

*Documentation reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 300.02*

*Inmate Handbook*

The agency has a system in place for an inmate to file a grievance on a PREA related issue, this grievance will be responded to within forty eight hours.

If the incident was found to have occurred the grievance would immediately be given to the outside investigators for follow up investigation.
Standard 115.53 Inmate access to outside confidential support services

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

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

*PREA Brochure*

The facility provides inmate’s access to outside victim advocates for emotional support services related to sexual abuse through the Volusia Rape Crisis Center.

The facility provides the contact information to the inmates.

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)

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

*Website Information*

The agency has the reporting information posted in both lobbies of the buildings and in the visitors building.

They have the following posted on their website:

If you have information regarding abuse or believe that an inmate currently in VCDC custody has been subjected to abuse, please call the Internal Affairs PREA Reporting Hotline number at 386-254-1541. You may also use the Volusia Rape Crisis Center’s free confidential Sexual Assault Hotline @ 1-800-503-7621, or you may submit a complaint form in person to the Warden or PREA Coordinator at the jail. The Division will accept all third-party reports received through: (1) VCDC’s grievance system; (2)
verbal reports (made in-person or via telephone); (3) written communication such as a letter or email; (4) contact with Division officials. When filing a report of sexual abuse or sexual harassment with the Division, some helpful information to include in the report is the date, time, and location of the incident and any involved parties. However, no one piece of this information is required to submit a report.

**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)

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

The agency policy states that an employee receiving a complaint of or otherwise has knowledge of alleged sexual misconduct shall immediately report the complaint. The staff interviewed understood their responsibilities under this policy. During interviews with staff who reported an allegation I verified that they followed the policy.

The policy further states that information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim. All staff interviewed understood this requirement.

During the interviews of medical and mental health staff I confirmed their duty to report, they understood their obligations to report an incident to security staff.

All allegations are being reported to the proper investigators. This was confirmed during staff interviews and review of the investigations.

During the review of the investigations I found they all were properly reported.
Standard 115.62 Agency protection duties

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 201.03
The agencies policies dictate that when staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The staff interviewed understood their responsibility and all responded that they would immediately take appropriate steps to protect the inmate.

Standard 115.63 Reporting to other confinement facilities

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

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13
The interviewed staff understood their responsibilities under this policy.
**Standard 115.64 Staff first responder duties**

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 Addendum for Collection Time Frame*

The agency policies outline the initial response by staff. This response includes stopping the alleged incident, safeguarding the victim, arrange for medical services, detaining the alleged perpetrator and preserving evidence. The staff interviewed understood their responsibilities if they were the first responder to an allegation.

The volunteers and contractors interviewed related that if they were a first responder they would request that the victim not take any actions that could destroy physical evidence, and then notify security staff.

I interviewed several staff who were first responders to incidents. They explained to me the first steps they had taken to ensure the safety of the inmate, and preservation of evidence.

**Standard 115.65 Coordinated response**

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

The above listed policies outline the facility plan to coordinate and respond to an incident of sexual abuse. This coordinated response includes first responders, medical and mental health practitioners, investigators, and facility leadership. During the interviews with the staff they all understood their roles in a sexual abuse investigation.
Standard 115.66 Preservation of ability to protect inmates from contact with abusers

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

Not applicable, the agency does not enter into any collective bargaining agreement.

Standard 115.67 Agency protection against retaliation

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

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13, 102.21, 301.02, 302.02
Volusia County Harassment Policy

The PREA Coordinator and PCM’s would monitor for retaliation after an incident.

I confirmed this procedure during staff interviews and review of the investigative reports and supporting documentation.
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)

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

During the staff interviews I found that the staff understands the restrictions of utilizing protective custody post-allegation. They related that the facility has the ability to move inmates to a separate housing unit without having to utilize segregation.

I reviewed the investigations and found that the facility did not utilize any post allegation protective custody in any of the incidents reported.

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)

Documentation Reviewed:

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

The agency policies and procedures outline a prompt response to any allegation made. I determined that the allegations are immediately investigated. This was confirmed during the initial responder’s interviews and the investigation review.

All administrative investigators have received special training in sexual abuse investigations pursuant to § 115.34.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.
They further determine credibility of a victim, witness, or suspect on an individual basis, regardless of the individual’s status, for example employee or inmate. Victims may not be required to take a polygraph or other truth telling test to determine to proceed with an investigation of an incident involving a sex related offense.

All investigations include a determination if employee action or lack of action contributed to the occurrence. All investigations are documented in an investigative report.

It was confirmed during interviews that any allegations rising to a violation of criminal law is considered for prosecution. If the incident possibly involves criminal activity, they would refer the case to the appropriate office responsible for prosecuting criminal violations in the jurisdiction where the incident occurred.

The investigator maintain the report of investigation for a period of five years after the alleged perpetrator is no longer an employee.

The departure of an employee alleged to have committed sexual misconduct or the victim of sexual misconduct is not a basis for terminating an investigation of alleged sexual misconduct.

During interviews and review of the investigations I determined that all of the above are practiced on a regular basis.

**Standard 115.72 Evidentiary standard for administrative investigations**

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

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

The administrative investigator does not impose any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

During the investigation review and investigator interviews I verified that they are applying preponderance of evidence to make a determination.
Standard 115.73 Reporting to inmates

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

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13
The PREA Coordinator and PCM’s understand their obligation on reporting back to an inmate upon completion of an incident.

During the review of the investigations and interviews I found that the above procedures are being followed.

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)

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 102.21
The facility has policies in place for disciplinary sanctions for staff. Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies, and termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

The disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to the Volusia County Sherriff’s Office, and to any relevant licensing bodies.
I reviewed the investigations and found that these policies are being adhered to.

**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)

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and is reported to the Volusia County Sheriff’s Office law enforcement agencies, and to relevant licensing bodies.

I confirmed during the interviews and investigation review that these practices are in place.

In the past 12 months, no contractors or volunteers have been reported to law enforcement.

**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)

*Documentation Reviewed:*

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 301.02*

Inmates are subject to formal disciplinary process, any sanction is commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

The disciplinary process considers whether an inmate’s mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.

The facility would offer therapy or mental health services through the medical department.
Policy states that a complaint of alleged inmate on inmate sexual conduct made in good faith based upon a reasonable belief that the alleged inmate on inmate sexual conduct occurred may not be considered a false report or lying, even if the required investigation does not establish sufficient evidence to substantiate the allegation of inmate on inmate sexual conduct.

Investigator and staff interviews confirmed that when an investigation of inmate on inmate sexual abuse is substantiated the inmate is referred for disciplinary sanctions.

**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)

**Documentation Reviewed:**

*Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13*

*Armor Correctional Health Services Inc. Policy and Procedures*

*Armor Consent*

*Armor Health Evaluation*

*Armor Intake Health Screening*

*Armor PREA Mental Health Evaluation*

When the aforementioned screening indicates an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

All information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions. These decisions include housing, bed, work, education, and program assignments.

During the staff and inmate interviews I confirmed that these procedures are in place. The staff further understood their obligation to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.
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)

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

The facility’s medical department ensures that victims of sexual assault receive prompt and appropriate medical intervention. The nature and scope are determined by medical and mental health practitioners according to their professional judgment.

The policy further states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term, follow up plans.

The above services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews.

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

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

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13 & 400.23

The facility has the policies and procedures in place for ongoing medical and mental health care. The staff informed me that the services would be coordinated by facility medical personnel. I further confirmed this with the medical staff.

I reviewed the investigations conducted, these services were offered to all involved in an allegation.
Standard 115.86 Sexual abuse incident reviews

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

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

During the administrative interviews I confirmed that the incident reviews are taking place during the aforementioned daily meetings if applicable, and if not during a meeting with specific administration.

I further confirmed the incident reviews through interviews.

Standard 115.87 Data collection

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

Documentation reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

Incident Report Data Collection

PREA Supervisor Checklist Data Collection

I reviewed the annual reports from 2013 through 2016. I also confirmed during the interviews that the data is being collected.
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)

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

During agency interviews I confirmed that the data collected is reviewed in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The agency identifies problem areas, takes corrective action on an ongoing basis. They have prepared annual reports which are available on the website. The reports compare data from year to year, and assesses the agencies progress in implementing sexual safety throughout the agency.

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)

Documentation Reviewed:

Volusia County Division of Corrections Policy and Procedure Manual Policy 305.13

The agency digitally retains all data collected, this data is available to the public through the website. The annual reports are published on the website. All personal identifiers have been removed from the reports. The agency has a policy in place that maintains all sexual abuse data for at least 10 years from the date received.

Staff interviews further confirmed this procedure.
AUDITOR CERTIFICATION

I certify that:

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

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

☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Digital signature

Auditor Signature 9/5/17 Date