

PREA AUDIT REPORT Interim X Final
ADULT PRISONS & JAILS

Date of report: September 12, 2016

Auditor Information			
Auditor name: Barbara King			
Address: 1145 Eastland Ave Akron, Ohio 44305			
Email: Barbannkam@aol.com			
Telephone number: 330 733-3047 / 330 618-7456			
Date of facility visit: August 10-12, 2016			
Facility Information			
Facility name: Santa Rita Jail			
Facility physical address: 5325 Broder Blvd, Dublin, California 94568			
Facility mailing address: <i>(if different from above)</i> Click here to enter text.			
Facility telephone number: 925-551-6500			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Gregory J. Ahern, Sheriff			
Number of staff assigned to the facility in the last 12 months: 248			
Designed facility capacity: 3,601			
Current population of facility: 2,063			
Facility security levels/inmate custody levels: Maximum, Medium, Minimum, Administrative Isolation			
Age range of the population: 18-86			
Name of PREA Compliance Manager: Sean Tyrrell		Title: Compliance Sergeant	
Email address: styrell@acgov.org		Telephone number: 925-551-6941	
Agency Information			
Name of agency: Alameda County Sheriff's Office			
Governing authority or parent agency: <i>(if applicable)</i>			
Physical address: 1401 Lakeside Drive, 12 th Floor, Oakland, California 94612			
Mailing address: <i>(if different from above)</i>			
Telephone number: 510-272-6878			
Agency Chief Executive Officer			
Name: Gregory J. Ahern		Title: Sheriff/Coroner	
Email address: gahern@acgov.org		Telephone number: 510-272-6866	
Agency-Wide PREA Coordinator			
Name: Jason Arbuckle		Title: Compliance Lieutenant	
Email address: jarbuckle@acgov.org		Telephone number: 925-551-6569	

AUDIT FINDINGS

NARRATIVE

The PREA audit of the Santa Rita Jail was conducted on August 10-12, 2016 by Auditor Barbara King. A month prior to the audit, the auditor received the PREA Pre-Audit Questionnaire and documents on a thumb drive provided by the agency. The auditor communicated with the agency and facility requesting further documentation for clarification and review. The Alameda County Sheriff's Office website was reviewed prior to the audit. A tentative schedule was set with the Compliance Lieutenant for the audit timeframe.

The afternoon before the audit, the auditor met with the Compliance Sergeant and the Compliance Lieutenant. A detailed schedule for the audit was discussed. The facility provided the requested information to be used for the random selection of offenders and staff to be interviewed (random and specific category) including an alpha listing of all offenders housed at the facility and by housing unit, lists of staff by duty position and shifts, lists of offenders for specific categories to be interviewed, list of staff who perform risk assessments, and a list of volunteers on site during the audit.

The audit began with an entrance meeting on August 10, 2016 with the Compliance Sergeant, Compliance Lieutenant, and the Facility Commander. During this meeting, it was determined that operational it would be better for the facility if the auditor could interview offenders and staff in each of the housing units. The auditor adapted the schedule to interview the offenders and the staff in each of the housing units while conducting the facility tour. The tour and interviews were conducted over the three days on site. During the tour, the auditor made visual observations of the program areas and housing units including bathrooms, officers post site lines, and camera locations. The auditors spoke to random staff and offenders regarding PREA education and facility practices. Review of the housing unit log books was conducted to verify immediate/ higher level staff rounds and the documentation of the education video showings within the unit. A complete tour of the facility was conducted over the three day period.

All required facility staff and inmate interviews were conducted on-site during the three day audit. Forty-nine (49) formal inmate interviews were conducted and eighteen (18) inmates were informally interviewed during the facility tours, (3% of the 2,063 inmate population). The random interviewees were selected by the auditor from the housing rosters and designated lists of inmates provided by the facility. Random offender interviews from different housing units (37), Disabled and limited English speaking ability (3), LGBTI (3), who reported a sexual abuse (4) and who disclosed sexual victimization (2) were interviewed. Offenders were selected randomly from each housing unit and from the lists provided for the specialized interviews. Three (3) offenders refused interviews.

A total of forty-nine (49) staff was formally interviewed and additional twenty-three (23) informal staff interviews were also conducted during the facility tours (29% of 248 staff who may have contact with offenders). Staff was randomly selected from each of the two shift rosters and different departments within the facility (15). Additionally, specialized staff were interviewed including the Agency Head Designee/Division Commander (1), Warden/Facility Commander (1), PREA Coordinator (1), PREA Manager (1), Contract Administrator (1), Intermediate-Higher Level Staff (5), Medical and Mental Health (4), Human Resources (1), SAFE/SANE (1), Volunteers/Contractors (5), Investigator (3), Staff Who Perform Screening (2), Staff Who Supervise Segregated Housing (1), Incident Review Team (3), Staff Who Monitor Retaliation (2), First Responders (1), and Intake staff (1).

There were thirty-seven (37) allegations during the audit period: thirty-four (34) allegations occurred at the facility and three (3) allegations were reported that the allegation occurred at another facility. Of the twenty-three (23) staff on offender allegations; seventeen (17) were alleged staff on offender sexual abuse and six (6) were alleged staff on offender sexual harassment. The administrative findings on thirty-six (36) allegations were unfounded. One investigation could not be completed due to the victim being released from custody and the investigators were unable to make contact with the victim using the contact information he provided during intake. Two (2) allegations were referred for criminal investigation and were determined unfounded. Of the fourteen (14) offender on offender allegations; four (4) were alleged offender on offender sexual abuse and ten (10) were alleged offender on offender sexual harassment. The administrative findings of eleven (11) allegations were unfounded, two (2) were determined consensual between the offenders, and one (1) remains open. One (1) allegation was referred for criminal investigation; this case is the open case and is waiting on lab results. A review of all three criminal investigations and four (4) administrative investigations were reviewed.

An exit meeting was conducted by auditor Ms. King at the completion of the on-site audit. While the auditor could not give the facility a final finding, the auditor did provide a preliminary status of their findings. There were five outstanding issues at the end of the site visit. The auditor requested that further documentation be provided when these five issues were resolved. The

auditor thanked the Alameda County Sheriff's Office, Facility Commander Captain Schmidt, PREA Coordinator/Compliance Lieutenant Arbuckle, PREA Manager/Compliance Sergeant Tyrrell, and the Santa Rita Jail staff for their hard work and commitment to the Prison Rape Elimination Act.

The facility was contacted during the writing of the report to clarify certain information for the report. The facility was responsive in providing the update policies and further documentation to provide compliance with the five issues that remained at the end of the site visit within the thirty days. With this provided documentation and updated policies, the facility has met compliance with the Prison Rape Elimination Act Standards.

DESCRIPTION OF FACILITY CHARACTERISTICS

The mission of the Santa Rita Jail is "Since 1853, the Alameda County Sheriff's Office has protected life and property while providing humane treatment to those in our custody. Each day our mission is to demonstrate our ability to enforce the law fairly; commitment to professionalism; service to the community with integrity and trust; and obligation to duty with honor and pride."

The Santa Rita Jail is a facility under the management of the Alameda County Sheriff's Department. It is the fifth largest jail in the nation. The facility has a designed facility capacity of 3,601 offenders. The custody levels of the general population offenders housed includes maximum, medium, minimum, administrative isolation. The offender population was 2,063 on the first day of the audit. The average daily population for the audit period was 2,269. The Santa Rita Jail is located in is located on 113 acres in Dublin, California. The facility opened in 1989. The facility is 928,795 square feet spanning half a mile in length and one fourth mile wide. The unit has twenty (20) buildings within the secure compound that consist of an administration building and eighteen housing units that can be designated for male or female offenders based on the need. The administration building is in the center of the compound with eight (8) maximum housing units to the left and ten (10) medium/minimum housing units to the right. The administration building (core building) is divided into five sectors. Sector one includes the chapel, muster room, inmate classroom, and administration offices. Sector two includes the offender gym, staff dining, and the health services. Sector three includes the inmate services offices, muster room, staff locker room, and central control. Sector four includes a line-up room, classification offices, administrative offices, and the California Department of Corrections offices. Sector five includes the intake, transfer and release, records, property and accounting, medical pre-screening, and classifications. At the north side of the facility compound, is the other building that contains laundry, maintenance, warehouse, central plant, and the kitchen and bakery.

The general population housing comprises of eighteen (18) general population buildings. There are eight (8) maximum security, five (5) medium, and five (5) minimum housing units which have similar floor plans. Each housing unit has two sides each with a large dayroom and a housing control center located in the middle. The housing control center is an elevated area in the center of the housing unit with a complete 360 degree viewing capability. This post has full control over all doors, water, lights, and telephones. A two-way intercom system with each cell is monitored by this post also. The two-way intercom includes an audible alarm, when the offender pushes the button to speak from the cell. The housing control center is staffed by a Sheriff's Technician, which is a civilian position and has no direct contact with the offenders. The housing unit is staffed with one to three sworn deputies based on the classification of the housing unit. There are two and a half female housing units and the rest are male housing units. Each housing unit contains outdoor recreation yard, visitation area, observation cell, large dayroom used for dining, and control center. What inmate movement is required through the compound, it is accommodated through open-air corridors and escorted by deputy officers. During the audit, three housing units were closed.

Each maximum security housing unit contains 96 cells which are divided into six pods, three on each side of the unit. Each pod contains 14-18 cells with an individual dayroom. The Administrative Isolation/Segregation is located within a maximum housing unit. The offenders housed in this classification are housed one to a cell and are only allowed out of the cell for recreation and personal hygiene needs. The showers in the pods are set back into the wall within the dayroom with appropriate privacy partitions. The showers in pods A and F have are located in blind spots and can only be seen if a staff member is within the dayroom. The procedures only allow one offender in the dayroom at a time for showering and recreation.

The medium housing units each contain 96 cells which are divided into six pods each with a separate dayroom with 14-16 cells in each section. These cells are double bunked. The minimum housing units are dormitory style housing split into living areas each housing 14-26 beds each. The showers in the housing unit pods are set back into the wall within the dayroom with appropriate privacy partitions.

The facility offers programs for the offender population. The offenders are offered the privilege of attending the programs

based on behavior and may attend via classroom instruction or individual learning. The following educational and vocational programs are available: Employability, Computer Technology, Independent Studies, General Education Development (GED), Literacy, Adult Basic Education (ABE), English as a Second Language (ESL), Food Service, Maximizing Opportunities for Mothers to Succeed, and Dads Acquiring and Developing Skills.

There are three control centers on the interior of the facility that monitor cameras both inside and outside the perimeter. There are a total of 78 cameras monitored. The facility is in the planning phase for facility renovations that will include security and video monitoring upgrades which will include an additional 430 cameras.

The facility is managed by a Facility Commander (Captain) who reports to Detention and Corrections Division Commander.

SUMMARY OF AUDIT FINDINGS

On August 10-12, 2016 a site visit was completed at the Santa Rita Jail. The final report was provided on September 12, 2016. The results of the Santa Rita Jail PREA audit are listed below:

Number of standards exceeded: 3

Number of standards met: 37

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)

The Alameda County Sheriff’s Office has a written policy 1.23 Prison Rape Elimination Act (PREA) General Order mandating zero tolerance towards all forms of sexual abuse and sexual harassment. It states: “there is a zero tolerance policy in effect at all times toward sexual assault, sexual abuse, and sexual harassment of those in our custody.” The policy outlines the agency’s approach to preventing, detecting, and responding to sexual abuse and harassment and includes definitions regarding sexual abuse and sexual harassment. The agency also developed a plan, Santa Rita Institutional Response Plan, which outlines the responsibilities of agency’s staff including deputies, investigators, non-sworn employees, civilian employees, volunteers, medical staff, advocacy groups, and mental health in reporting, investigating, and responding to sexual abuse and sexual harassment. The policy and the Institutional Response Plan is also supplemented by other agency policies, Training Bulletins, and post orders. Through observation of the educational handouts and materials, review of offender and staff handbooks, and interviews with staff and offenders it was apparent that the Santa Rita Jail is committed to zero tolerance of sexual abuse and sexual harassment.

The Compliance Lieutenant is the agency’s Agency-Wide PREA Coordinator. A review of the agency’s table of organization showed the Agency-Wide PREA Coordinator reporting to the agency head, the Sheriff. This position as the Compliance Lieutenant also has direct report to the Facility Commander. Policy 1.23 states the PREA Coordinator has the authority to coordinate, develop, implement, and oversee the agency efforts to comply with the PREA standards. His office supervises the two (2) PREA Managers; one at each of the agency’s facilities. The position also provides training and guidance as needed to the compliance staff. Agency updates and changes are forwarded from this office to the facilities. The PREA Coordinator was knowledgeable of the PREA standards and the agency’s compliance measures. The PREA Coordinator indicated during the interview that he had sufficient time and authority to develop, implement, and oversee the agency’s efforts to comply with the PREA standards.

Each facility within the agency has an identified compliance manager that will ensure that effective practices and procedures are in place at the facility to ensure compliant with standards. The facility has designated the Compliance Sergeant as the PREA Compliance Manager. The position reports directly to the PREA Coordinator/ Compliance Lieutenant. The Compliance Sergeant responsibilities include PREA policy compliance, investigations, and the audit process. The offenders interviewed that reported sexual abuse and the LGBTI offenders were familiar with the PREA Compliance staff. The PREA Compliance staff makes rounds in the housing areas to ensure the office services are available to the offender population; this was documented through unit log reviews. Offenders were able to identify the PREA Compliance Manager by name during the interview process which demonstrates the active role and accessibility the compliance staff has created at the Santa Rita Jail. During the tour, the PREA Manager was accessible to the offenders and responsive to the offenders’ questions and concerns. The Compliance Sergeant also stated during the interview process that he had sufficient time to perform the PREA duties for the facility.

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)
- Non-Applicable

The Alameda County Sheriff's Office currently does not have any contracts for the confinement of its offenders. The agency did have a contract with County of Santa Clara and the Behavior Health Care Services for the housing of offenders requiring acute inpatient mental health services. The contract was for the period of July 1, 2015 through June 30, 2017. This contract was for one housing bed for mental ill offender including treatment/medication for stabilization. This contract was terminated on January 15, 2016. The contract did have language requiring the Santa Clara County to adopt and comply with the Prison Rape Elimination Act standards and make information available to Alameda County, as required, to demonstrate its PREA compliance. It required Santa Clara County to receive a PREA audit at least once during each three-year audit cycle. The contract also had language that Santa Clara County will make available to Alameda County Sheriff's Office Contract Monitor the auditor's final report after completion of an audit. Prior to the PREA audit, Santa Clara was to furnish copies of their PREA policies to demonstrate their practice for compliance with the PREA standards. This population is now transferred and housed at the John George Mental Health Psychiatric Pavilion as needed.

The Agency Contract Administrator indicated during the interview that if a new contract was activated for housing of offenders the PREA compliance language would be part of the contract language.

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)

The Santa Rita Jail has developed a staffing plan that is based on the eleven criteria of the standard to include generally accepted detention and correctional practices; any judicial finding of inadequacy; and findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal and external oversight bodies; all components of the facilities physical plant (including "blind spots" or areas where staff or offenders may be isolated); the composition of offender population; the number and placement of supervisory staff; institutional programs occurring on a particular shift; any applicable State, or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors. This process is outlined in policy 1.23 PREA General Order, section IV.A. Based on the review of the staffing plan and interview with the Division Commander, Facility Commander (Captain), and the PREA Coordinator; the staffing plan was developed by the management of the Santa Rita Jail with input from facility and agency staff and in coordination with the PREA Coordinator. The Facility Commander, PREA Coordinator, and PREA Manager all indicated in their interviews that the staffing plan is reviewed at least once a year. The policy 1.23 PREA General Order outlines the PREA Coordinator and the Facility Commander will annually re-evaluate staffing levels and the use of video monitoring to determine and document adequacy of the staffing plan and use of the video monitoring technologies to protect inmates from sexual abuse. The first staffing plan was created January 28, 2015 and updated in October 2015. The annual review was conducted on January 12, 2016 documented by an updated staffing plan. Copies of the staffing plans are maintained in written format by the PREA Coordinator and human resources.

Through the staffing plan review, the agency assessed the facility's video capabilities and determined the video system is in need of improvement. Other recommendations are to fill vacant positions, slow the transfer of staff out of the facility unless it is under normal rotation, and consider innovative ideas to get extended leave staff back to work.

The facility makes its best efforts to comply with the plan. When deviations occur, the position deviated is documented on a memorandum format with the employee's name, post reassignment, and the justification for the deviation. This is forwarded to the PREA Manager and PREA Coordinator. The Facility Commander during his interview stated the PREA Coordinator is responsible for checking the compliance with the staffing plan. This review is completed at the end of each shift by reviewing the shift log and any deviation memorandums. Any deviations found during the review is documented in a written format and provided to the Facility Commander for review. The most common reasons for deviations listed in the pre-audit questionnaire were scheduled time off, sick leave, lack of staff, and training.

Intermediate and higher level staff conduct unannounced rounds. The rounds are documented in the Redbooks (logbooks) in the housing control center. Through reviews of housing area logs and interviews with staff and offenders, it was confirmed

that unannounced rounds are done randomly throughout the facility. The staff indicated during the interviews that unannounced rounds are accomplished by staggering the round times on a daily basis, conducting rounds in different areas on different days, and using different routes and not a routine pattern. The 10.01 General Security Post Orders and Master Event Schedule, 10.02 Lieutenant/Watch Commander Post Order, and 10.03 Sergeant/Shift Supervisor Post Order all direct the supervising staff to complete unannounced rounds once per shift. The rounds are to be performed at irregular, unspecified times, and will be recorded in the area/housing unit log book. The 10.01 General Security Post Orders and Master Event Schedule direct that staff shall not alert or otherwise other staff that the supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. This is also addressed during muster and training as a refresher. Supervisors also indicated in the interviews that if a staff member was alerting other staff, discipline action would be initiated on the employee.

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)
- Non-Applicable Standard

The Santa Rita Jail does not house youthful/juvenile offenders. This facility is an adult facility only. The review of policy 9.05 Juvenile in Custody states that no-one under the age of 18 will be housed in the jail. If during the booking process, it is determined the offender is under the age of 18, a supervisor will be notified immediately. The juvenile will be transported to Juvenile Hall by the arresting agency or facility staff.

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)

Through the review of 11.03 Inmate Searches-Strip, Visual, and Pat Searches and 1.23 PREA General Order policies, governing offender searches and cross gender searches, it confirms the policies and procedures address the standard. Interviews with staff and offenders plus observation of actual searches conducted during the audit, the Santa Rita Jail does not conduct cross gender strip searches. The policy does allow cross gender strip searches only in exigent circumstances and when approved by a supervisor. When a cross gender strip search occurs, it will be documented through an incident report or a Strip Search Authorization Form and forwarded to the PREA Manager. All physical body cavity searches are completed only by medical trained professionals under authority of a search warrant which will be witnessed by a deputy of the same sex.

Per policy 10.23 Housing Unit Deputy Supervising Inmates of the Opposite Gender state that Pursuant to Penal Code Section 4021(a), all female housing units shall be staffed with at least one female deputy at all times. Policies 10.23 Housing Unit Deputy Supervising Inmates of the Opposite Gender and 11.03 Inmate Searches states deputies shall not perform clothed searches of opposite gender inmates, except in the most exigent circumstances. These searches shall be documented in a memorandum to the Facility Commander, via the Chain of Command, outlining the exigency. Deputies shall notify their supervisor prior to conducting a clothed search of the opposite sex. Per policy 11.03 Inmate Searches state the absence of a female deputy to conduct a search shall not restrict the female inmates' access to regularly available programming or other out of cell opportunities. Interviews with staff confirmed these practices, as well as the review of the training lesson plans reinforcing these policies in the annual training. The facility has not conducted any cross gender strip searches or cross gender visual body cavity searches of offenders. Female offenders interviewed indicated they have not been restricted access to programming due to a female deputy not available to conduct pat down searches.

The policies 1.23 PREA General Order and 8.12 Inmate Observation and Direct Visual Supervision states all staff of the opposite sex performing observation checks shall announce their presence within a reasonable time prior to making the observation, to allow the inmate or detainee ample time to cover themselves should they be in the process of using the toilet, shower, or are at some level of undress. Policy 8.12 also outlines deputies shall not enter the shower and toilet areas, living spaces or cells of opposite gender inmates, except in exigent circumstances and/or when accompanied by a staff member who is the same gender as the inmate. This was confirmed by interviews with offenders and staff. When staff were randomly asked how a cross gender and/or transgender pat down search would be completed, they indicated by using the back or blade of their hand. During the offender interviews, inmates felt they received a sense of privacy for showering, changing clothes, and bathroom functions. This was reviewed during the facility tour and housing unit visits and it was determined the shower privacy partitions provide privacy for the offender.

Policy 10.23 Housing Unit Deputy Supervising Inmates of the Opposite Gender and post order 10.12 Housing Unit Post Orders require that staff of the opposite gender announce their presence when entering offender housing areas. At the beginning of each shift, the Sheriff's Technician who is working in a housing unit comprised of inmates of the opposite sex makes an announcement at the beginning of the shift, advising offenders as such. The opposite gender staff or visitors entering a housing unit are announced to the offenders, prior to their entry. Those announcements are logged in the Housing Unit Red Book. Offenders indicated during the interviews that staff are announced through the intercom system. This practice was observed during the audit and announcements documented in the logbooks were reviewed.

The policy 1.23 PREA General Order and 11.03 Inmate Searches also prohibits staff from searching or physically examining a transgender or intersex offender for the purpose of determining genitalia status. If an offender genital status is unknown, it may be determined during conversations with the offender, by reviewing medical records, and/or reviewing arrest history or available databases. The policy allows the transgender offenders the opportunity to choose the gender of the deputy that will perform the search. The supervising sergeant will make the final decision on who will perform the search. All body cavity searches are completed only by medically trained professionals. During interviews with staff, they were aware of the policy and indicated only medical could conduct such search. The transgender offenders during their interviews indicated they have not been searched or frisked to determine their genitalia status.

All staff have received training in conducting pat down searches, cross gender pat down searches, searches of transgender and intersex offenders in a professional and respectful manner. Other than annual training, this training is also part of the initial pre-service orientation training, quarterly range, and during muster briefing. This is supported by 11.03 Inmate Searches and 1.23 PREA General Order policies. Interviews with staff confirmed these practices, as well as the review of the training bulletins and lesson plans reinforcing these policies.

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)

The agency's policies 1.14 Americans with Disabilities Act, 10.05 Housing Floor/Unit Deputy Post Order, 17.07 Lionbridge Interpretation, ACSO Point Book, and Hearing Impaired Hand Sign Alphabet has established procedures to provide disabled offenders equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. During the intake process, offenders are identified when a disability exists. This is accomplished through the medical and general intake processing. The policies and directives address interpreter service, American Sign Language services, and offenders with special needs. The PREA information is provided through English and Spanish offender handbooks and brochures, education video which is open captioned, and through interpreter services if necessary. The handbook is also available in Braille. The video is played in the intake area continuously and in the housing units weekly. Offenders who are deaf and blind are afforded the use of a tactile interpreter. The interpreter services are available to the offender with no cost to the offender. The PREA posters are also posted in English and Spanish throughout the facility. The agency has two active contracts for interpretation services: Helping Hands LLC and Liongate. Helping Hands provide interpreter services for the hearing impaired. They provide the agency with a list of American Sign Language interpreters. The Liongate contract provides an interpreter hotline. They provide advocates that speak English, Spanish, Russian, Tagalog, and French. They can also provide other third party services for other languages. The agency

also provides TDD (telecommunications Devices for the Deaf) and each housing unit has a tablet with VRS (Video Relay Services) available which will act as a video phone for the offender. The facility also has a Point Book. The Point Book allows inmates who are unable to communicate verbally, in writing, or via an interpreter, to identify daily hygiene and service related needs through browsing pictures in the book and pointing any service related needs, (medical, dental, religious, etc) they need. When an inmate points out a service-related need, a deputy completes the appropriate request slip and routes it to the service provider. The staff are also able to use the impaired sign language alphabet with numbering hand signs handout that is available in each housing unit for communicating with hearing impaired offenders.

The Santa Rita Jail has designated staff who provide interpreter services as needed. There is a list available of the staff and the languages spoken. The utilization of a staff interpreter is documented through the ADA Coordinator. During the audit, three (3) interviews were conducted with limited English offenders/disabled offenders. Two (2) of the offenders were limited English and the interviews were conducted utilizing a staff Spanish interpreter. The other offender was deaf and the interview was conducted through an interpreter from the Helping Hands contract agency. Those offenders, as well as other offenders with hearing disabilities and limited English proficiently interviewed during the facility tour, all indicated they have received the PREA information and knew how to report if needed.

Policy 1.14 Americans with Disabilities state that except in instances where the inmates safety is at risk, staff shall not use other inmates as interpreters. However, during the site visit, it was identified the agency policy did not address the requirement to document offender interpreters when utilized. The facility took immediate action to update the policy to include the appropriate language the outlines the current practice. The approved policy was provided after the site visit to the auditor; which now states "in the event it is necessary to use another inmate as an interpreter, staff are required to document the occurrence in a memorandum to the facility Commanding Officer." The facility indicated there were no instances where an offender interpreter was utilized. During the staff interviews, staff were aware of the policy and indicated that an offender interpreter would not be used, only qualified staff interpreters from the list would be used.

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)

Through a review of policies, 1.23 PREA General Order, 4.07 Background Investigation Guidelines and 4.11 Agency Promotional Process; it was determined that the agency has established a system of conducting criminal background checks for new employees and contractors who have contact with offenders to ensure they do not hire or promote anyone who engaged in sexual abuse in a prison or other confinement setting; been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, coercion, or if the victim did not consent or was unable to consent to refuse; or had civilly or administratively adjudicated to have engaged in sexual activity in the community facilitated by force, coercion, or if the victim did not consent. The general County Application form does not address the specific questions, however the Application Supplement which is required to be completed by individuals applying to work for the Sheriff's Office, require the employee to answer questions of: have not engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution and have not been civilly or administratively adjudicated or convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to refuse. These forms are utilized for new hires and promotions. Each employee upon hiring must sign an acknowledgment that they have read and understood and agree to act in accordance with the Sexual Harassment Prevention and Prohibition Policy.

Policy 1.23 PREA General Order requires consideration of any incidents of sexual harassment in determining to hire or promote anyone or enlist the services of any contractor who may have contact with offenders. The agency considers prior incidents of sexual harassment when determining whether to promote or hire. This is accomplished through a round table discussion on any border line issues regarding all new hires and promotions consisting of the Sheriff, Human Resource staff, and management staff. Through the interview with the Human Resource staff, it was indicated that the agency has not hired or promoted any staff with prior incidents of sexual harassment. The agency indicated they make their best effort to contact previous employers regarding information on substantiated investigations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse for employees and contractors.

The background check process, Security Site Clearance Form, is conducted by the Background/Recruiting Unit. Background checks are completed on all employees hired, The background checks include system checks which include local computer record search, Department of Motor Vehicles (DMV), California Department of Justice (CDOJ) CORPUS, and warrants. Fingerprints are checked through the Central Identification Bureau (CIB), State of California DOJ, and the FBI per Civil Service Rules. Sworn employees have a further detailed background investigation completed that includes psychological screening, medical, neighborhood check, and computer voice stress analysis. Additional policies 4.01 Hiring of Temporary Personnel and 8.04 Security Checks for Contract Employees, Volunteers, and Tour Groups outline the background process for contractors. Contractors and volunteers have backgrounds checks that include fingerprints, electronic record search, driving records, and CDOJ CORPUS. There were thirty (30) criminal background checks completed during this audit timeframe for new hires who have contact with offenders and six (6) for contractors.

The system utilized by the agency for capturing employee and contractor criminal charges is through an automatic electronic notification to the agency when any employee is fingerprinted as a result of an arrest. The California Department of Justice makes the event notification to the agency. Contractors have a criminal record check completed annually as part of their site clearance. Human resources staff will provide the information from the electronic notification to the internal affairs unit which will complete an internal investigation depending on the arrest charges. The Human Resource Administrator indicated employees are informed of the continuing affirmative duty to disclose any previous misconduct through the general orders and if off duty they must report the incident to the supervisor or Watch Commander. The Human Resource Administrator stated there were no terminations for sexual abuse or sexual harassment.

The county application form does not address the language of the standard, for compliance the Alameda County Sheriff's Office created a Supplemental Application that asks applicants about previous misconduct. As part of the Supplemental Application for the Alameda County Sheriff's Office, applicants must confirm the statements of: have not engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution and have not been civilly or administratively adjudicated or convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to refuse. This form is also used for promotion process. These questions are also part of the background process to ensure the employees hired through the county-wide application process are asked about previous misconduct. Per policies 1.23 PREA General Order and 4.11 Agency Promotional Process and confirmed through the human resource interview, the agency imposes upon employees a continuing affirmative duty to disclose any criminal misconduct.

During the review of the supporting documentation and interviews, it was determined the agency was not conducting annual interviews or written self-evaluations as part of the current employee reviews to ask about previous misconduct. The agency has reviewed how to achieve compliance with the standard. The plan for the long term compliance is to add the language to the employee annual evaluations. This will involve the county network technology department. This process will take time for the facility administration to work through to add the language to the employee evaluation form. Until this process is completed, the agency has addressed the standard by creating a Human Resources Services Department Supplement Questionnaire. Staff were informed of the annual process through a Training Bulletin, dated August 26, 2016, requiring the employee to complete and return the Human Resources Services Department Supplement Questionnaire to the Accreditation Office within 30 days. Staff was informed in the Training Bulletin that the questions will be added to the annual evaluation of employees. The agency has submitted documentation of the process, Training Bulletin, and an example of a form completed. The agency has achieved compliance with the new process initiated.

The policy 1.23 PREA General Order states an applicant, who provides material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Policy 4.07 Background Investigation states during the peace officer personal history verification process, the background investigator will determine whether the candidate satisfactorily meets the 10 job dimensions outlined by POST in the Peace Officer Background Investigation Manual. Untruthfulness, deception, or fraud by candidate in representation of facts related to personal history could disqualify a candidate from being hired as a peace officer.

The agency upon request from another county department can provide information from within the personnel file without a release of information form. Any outside agency requests must contain a signed and dated release of information form from the active or former employee in order to for the agency to provide copies of confidential documents contained in an the employee's file.

Personnel files for new hires and promotions were reviewed with the Human Resource Administrator. The personnel files include the background checks, annual evaluations, and training records. The background process is conducted and PREA Audit Report

maintained by the Human Resources Division in the Sheriff's Office located in Oakland. Also through interviews with the Human Resource Manager and Facility Commander, it was determined that the agency's policy and PREA requirements were being followed in regards to hiring, promotional decisions, and background checks.

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)
- Non-Applicable

There have been no expansions or modifications to the facility, nor has any installation or updating of video monitoring technology occurred since August 20, 2012.

The facility is current planning for a thirty-seven million dollar upgrade to the facility which will include an additional building which will house mental ill offenders and treatment services; camera video monitoring and security upgrades to the current facility; and further provide American Disability Act improvements for the facility. The PREA Coordinator and PREA Manager are involved in the planning process and participate in the meetings to review possible PREA concerns. As part of the planning process, the blind spots identified in the annual staffing plan will be addressed with the security system upgrade. The camera video monitoring upgrade will add an additional 430 new cameras with recordable capability.

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)

The Alameda Sheriff's Office is responsible for the administrative and criminal sexual abuse investigations that occur or are reported within the facility. The policies and procedures, 13.07 Sexual Assaults in Custody; 5.24 Collection, Preservation of Evidence/Property, Processing, Storage, and Inspection; and 1.23 PREA General Order outline evidence protocols for administrative proceeding and criminal prosecutions and requirements for forensic exams. The housing unit deputies are sworn officers and have been trained in sexual abuse investigations and evidence protocol through the NIC course PREA: Investigating Sexual Abuse in a Confinement Setting. Both investigations start immediately following an allegation. The facility staff or court security staff who have completed the training begin the preliminary investigations. The Special Victims Unit (SVU) will conduct the criminal investigation. Facility staff interviewed were knowledgeable in the agency's protocol for obtaining usable physical evidence and their responsibilities. The agency has provided informational pocket cards to all employees that outlines the staff responsibilities during an allegation and the preservation of usable physical evidence. Interviews were conducted with two investigators within the facility and one SVU investigator. The interviews confirmed the practices for PREA investigations and all investigators were very knowledgeable of the investigation process, and the uniformed evidence protocol to be used during a sexual abuse investigation. The evidence protocol does not address youth; the agency does not house youthful offenders.

The agency has a MOU with Alameda Health System – Highland Sexual Assault Center for forensic medical examinations. The Highland Hospital has a Sexual Abuse Response Team (SART) that operates out of the emergency room department. During the interview with the Highland Hospital SART Director, it was stated that a member of SART is available at all times; on site from 7:00am to 1:00am and on call 1:00am to 7:00am. Policy 13.07 Sexual Assaults in Custody direct the staff to bring the inmate to the housing unit clinic for a medical evaluation immediately. The medical staff will perform first aid treatment and refer the inmate to the Highland Hospital Emergency for a forensic sexual assault examination if appropriate. The inmate is

advised that there is no cost to them for any medical treatment pertaining to the assault, including the forensic medical exam. The agency's policy 14.03 PREA-Response to Sexual Assault outlines in sexual abuse cases a medical exam should occur if the abuse involves any skin-to-skin contact, penetration or exchange of bodily fluids or acts suggestive of such, regardless of how much time has elapsed since the incident(s). Law enforcement is responsible for initiating the forensic medical exam process of the victim(s) by referring to Highlands SART Team. The referrals for acute cases (the last suspected incident of abuse happened within 72 hours) are made by staff contacting the Highland SART Team to consult on the case prior to transferring the victim to the hospital where the medical exam will be conducted. For non-acute cases (the last suspected incident of abuse was greater than 72 hours ago), the staff will contact SART to consult on the case with any questions prior to sending a victim for an exam. If an appointment is required, the report should be forwarded to the SVU to make the arrangements and conduct any additional follow up. The transporting deputy notifies the Highland Hospital Sexual Assault Center the inmate's estimated arrival time. There were no victims of sexual assault who required a forensic exam during the last twelve months.

The agency has two MOUs for victim advocacy services; Tri-Valley Haven (6/1/15 - 5/31/17) and Bay Area Women Against Rape (BAWAR) (7/31/15 – 6/30/17). The MOU with Tri-Valley Haven is the main provider for the Santa Rita Jail. Tri-Valley Haven provides 24 hour crisis line; SART/hospital accompaniment for victims; follow-up appointments for counseling; on-site crisis counseling; a minimum of two classes or group counseling in topics of Domestic Violence and/or Sexual Abuse; and resources and referrals to incarcerated survivors of sexual abuse. Policy 13.07 Sexual Assaults in Custody outline the inmate shall be offered the services of a victim advocate and if the inmate does request a victim's advocate, the advocate is to be permitted to be with the inmate throughout the investigatory process and access to the inmate shall be made available upon return to the facility as well. The advocate's role during this process is to provide emotional support, crisis intervention, information, and referrals.

The offenders interviewed who reported sexual abuse indicated they did not utilize a victim advocate. Of these interviews, the offenders reported their sexual abuse anywhere from two days to a year after the incident. They indicated staff responded, were taken to medical and referred to mental health. They were aware they could contact victim advocate services by calling *89 from the unit phone.

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)

The agency policies, 1.23 PREA General Order and 14.03 Response to Sexual Assaults states all complaints of sexual harassment or abuse, upon inmates or detainees shall be thoroughly investigated and documented by the Sheriff's Office by staff trained in conducting these types of investigations. The facility completes the administrative investigation and the agency's Sexual Victim Unit completes the criminal investigations. Policy 14.03 PREA-Response to Sexual Assaults outlines that investigators assigned to the Special Victims Unit will be the only investigators assigned to investigate sexual assaults in any of the Sheriff's Office confinement facilities, as they have received specific training on investigating these types of assaults. Trained staff at the facility will start the investigation process as first responders and then SUV investigators will take over the investigation. If other investigators are on call and receive a report of a sexual assault at a Sheriff's Office confinement facility, the Investigation Lieutenant shall assign the appropriate investigators to the case. The SVU investigators handle all the allegations of sexual abuse until it is deemed an administrative investigation only. The SVU investigators share the case progress and the investigation outcome with the facility administration and the PREA Coordinator. Documentation of the criminal investigations is maintained in SVU located at the Eden Township Substation. Documentation of the administrative investigations is maintained in PREA Manager's and PREA Coordinator's offices. Interviews were conducted with two of the administrative investigators and one SVU investigator. All investigators demonstrated the knowledge of facility's investigation responsibilities and the responsibilities of each investigator during the administrative and criminal investigations. The agency's policy is available on the agency's website. All allegations are investigated and reported with findings.

There were thirty-seven (37) allegations during the audit period: thirty-four (34) allegations occurred at the facility and three (3) allegations were reported that the allegation occurred at another facility. Of the twenty-three (23) staff on offender PREA Audit Report

allegations; seventeen (17) were alleged staff on offender sexual abuse and six (6) were alleged staff on offender sexual harassment. The administrative findings of thirty-six (36) allegations were unfounded. One investigation could not be completed due to the victim being released from custody and the investigators were unable to make contact with the victim using the contact information he provided during intake. Two (2) allegations were referred for criminal investigation and were determined unfounded. Of the fourteen (14) offender on offender allegations; four (4) were alleged offender on offender sexual abuse and ten (10) were alleged offender on offender sexual harassment. The administrative findings of eleven (11) allegations were unfounded, two (2) were determined consensual between the offenders, and one (1) remains open. One (1) allegation was referred for criminal investigation; this case is the open case and is waiting on lab results. A review of all the criminal investigations and four (4) administrative investigations were reviewed.

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)

The Alameda Sheriff's Office has been training staff on sexual abuse and sexual harassment prior to the PREA requirement as part of the sworn officer's training. The agency's policy 1.23 PREA General Order, Training Bulletins 15.09 and 16.20, and the PREA Training Lesson Plan address all the PREA requirements and outline the training requirements. Training records, staff interviews, and training curriculum review indicated the training included the zero tolerance policy; the agency policy and procedures for prevention; reporting and response to a sexual assault or sexual harassment incident, and the dynamics of sexual abuse and harassment in a confinement setting; common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with offenders; how to communicate effectively and professionally with offenders; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The initial training for staff occurs at pre-service (orientation) through the training curriculum PREA General Order 1.23 prior to being assigned to the unit. The training is also provided annually through the annual in-service training for all staff. Additional training occurs during staff muster briefing with different topics daily/weekly based on PREA updates and general information refreshers. The PREA Manager and PREA Coordinator offices also provide training updates through Training Bulletins sent to staff electronically through the DMS system and emails. Staff acknowledge the training electronically. Staff during interviews acknowledged the numerous methods they received training including annual in-service, muster, pre-service, through emails and DMS system, during quarterly range, and by security supervisors providing educational information while conducting rounds. The agency also requires all sworn deputies to complete the NIC PREA: Investigating Sexual Abuse in a Confinement Setting.

Policy 1.23 PREA General Order outlines in addition to receiving training in cross gender pat down searches, all staff, including contractors and volunteers who may have inmate contact, shall receive training in the following topics within one year of the date of this order. This training shall occur during new employee orientation, annual training and be included in the 80 hour Core Corrections Course. Refresher training shall occur at least every two years and documented via DMS or manual sign off sheets. The sign off sheets, hard copy and electronic, document that staff signing for the training understands the training they have received. Although, the policy indicates that refresher training shall occur at least every two years, the agency is completing the refresher training annually during in-service; this exceeds the requirement. Training is documented through the signature of staff or electronically in the DMS system. Gender specific information, for both genders, as the agency has both male and female offenders, is included in the lesson plan and all staff that transfer facilities must receive additional training tailored to the gender of the offenders at the new facility.

Interviews of random staff and general questions asked during the tour clearly indicate each staff member is very knowledgeable on how to perform their responsibilities in detention, reporting, and responding to sexual abuse and sexual harassment. The wide knowledge of the policies and procedures by staff confirm the continuous training that occurs through muster, staff briefings, annual in-service, and quarterly range training. An informational pocket card is provided to all employees that outline the staff responsibilities during an allegation, steps to take if a sexual assault occurs, and the preservation of usable physical evidence.

All training is maintained in the personnel file of the employee. Training records were checked during the review of the personnel files and electronically; all had completed the pre-service training and annual in-service.

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)

All contractors and volunteers who have contact with offenders in Santa Rita Jail receive PREA training prior to assuming their responsibilities. The facility has 504 volunteers and contractors currently authorized to enter the facility. The facility's medical (Corizon) and food service (Aramark) staff are contract employees. Policy 1.23 PREA General Order outlines that all staff, contractors and volunteers who may have inmate contact, shall receive training in their responsibilities under Alameda County Sheriff's Office sexual abuse and harassment prevention, detection, reporting and response policies. The PREA Coordinator during the interviews stated since the agency has so many contractors and volunteers with varied offender contact (some none at all, others limited with sworn staff present, and others with one on one contact with offenders) the agency trains all volunteers and contractors to the highest level. This training is conducted with a PowerPoint presentation during the orientation training by the PREA Manager or the PREA Coordinator. The contractors receive a 40 hour orientation prior to assignments. The volunteers receive an 8 hour orientation. This training includes the agency's policy and procedures regarding sexual abuse and sexual harassment prevention, detention, and response. Contractors and volunteers must sign a Consultant/Contract Personnel/Volunteer Agreement form that acknowledges they will abide by the Detention and Corrections policies, rules, and regulations which includes refraining from personal and social involvement with offenders and reporting all allegations of knowledge of sexual abuse, harassment, or any sexual misconduct involving inmates that take place within any Sheriff's Office facilities. The orientation training for new volunteers and contractors is conducted quarterly. Contractors attend the annual employee in-service training. Corizon (medical contractor) and Aramark (food service contractor), also provides PREA training to their staff annually. The Corizon lesson plan was provided for review.

The volunteers and contractors are also provided a brochure, PREA Overview for Contractors/Volunteers, which covers the education, prevention, reporting, and responding to sexual abuse and sexual harassment. The brochure covers the zero tolerance policy, definition and examples of sexual misconduct and sexual harassment, how to avoid inappropriate relationships with offenders, how to report sexual misconduct, potential red flags for victims of abuse, LGBTI definitions, and how to effectively communicate with victims. The contractor/volunteers must sign acknowledgement of receiving and understanding the information contained in the brochure about PREA. The form is filed in the volunteer's central file maintained at the facility.

Training records were reviewed and demonstrated the contractors and volunteers received training and documented they understood the training through a signature on the training log, inmate services volunteer form, and the contractor acknowledgement form.

Interviews were conducted with four (4) volunteers and contractors. They all indicated they had received training. They were knowledgeable on PREA, their responsibilities for reporting, the reporting process, and the agency's zero tolerance policy.

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)

The Santa Rita Jail starts the offender PREA education to the offender population beginning at intake into the facility. Policy 18.03 Inmate Orientation outlines the inmate orientation video will be shown in the Intake, Transfer, and Release (ITR) holding cell before an inmate is placed on a housing floor, or housing unit. The video will be shown 24- hours a day on channel 27 in ITR in English, Spanish, and include closed captioning. After the video is viewed, the ITR deputy/sheriff's technician will make legible entries on the "Orientation Video Shown" line of the offenders custody cards. The entry will include the date and time viewed; employee signature, and badge number. During the intake process, the Orientation Video is playing continuously which covers sexual abuse and sexual harassment prevention, reporting, and the zero tolerance policy. The offenders also receive the Inmate Rules and Information Handbook in which PREA information is the very first page of the handbook. This information also covers the zero tolerance policy, how to report, victim advocacy availability, suggestions on how to avoid abuse/harassment, and contact information for outside agencies that offer free services. Also at intake into the facility, offenders are provided information through two brochures, Sexual Assault Awareness and The Prison Rape Elimination Act (PREA) and What You Need To Know About Your Sexual Safety. The brochures explain the agency's zero tolerance policy regarding sexual abuse and sexual harassment, what is sexual abuse/harassment, how to report incidents, confidentiality, counseling services availability at no cost, medical services provided at no cost, and how to avoid sexual abuse/harassment/assault. The brochures and handbooks are both available in English and Spanish. The handbook is also available in Braille. In each of the holding cells in the intake area, an information block is painted that informs the offender how to report sexual abuse, the zero tolerance policy, medical and counseling services are available, and the crisis hotline number. All offenders are provided the same orientation information upon entering the facility; whether they are a new intake or a transfer.

The facility on the PRE-Audit Questionnaire indicated only 45.9% (15,283 out of 33,234) of the offenders received education within 30 days of intake. The difference is a result of the offenders that are released or bonded prior to the thirty days. There were only 15,283 offenders that had a length of stay longer than thirty days. Those offenders received further education in the housing unit through an education video that is played weekly. The random offenders interviewed acknowledged receiving education on the same day as intake into the facility, they acknowledged the information is posted on the walls throughout the facility and a video is played during intake and in the housing unit.

The facility provides inmate education in formats accessible to all inmates. This is accomplished through written handbooks, pamphlets, and posters; verbally through video and closed caption; and staff interaction. Information is provided in English and Spanish, American Sign Language, Braille, and other languages are available through the Liongate Interpreter Services Contract. Policy 10.05 Housing Unit/Unit Post Order outlines that staff will assist inmates with disabilities and who may have difficulty reading or understanding their rights and protections under PREA as it relates to sexual abuse/harassment and retaliation. Policy 17.07 Lionbridge Interpretation states during emergencies or crisis, and/or when all other means of communication, writing, verbal, in-house translator, have been exhausted, the inmate will be communicated with in their native language using the Lionbridge Language Line. The auditor observed the use of the interpreter services during the site visit.

The facility documents the offender education on the offender's custody card after the initial orientation is completed at intake. The offender signs the Classification sheet acknowledging they have received the PREA Brochure and the Inmate Rules and Information Handbook. The housing unit control center documents in the Redbook when the education video was played in the housing unit. Copies of the different documentations were reviewed by the auditor.

Through random offender interviews and discussions with offenders on the facility tour, offenders acknowledged they have received PREA information upon arrival at the facility and reinforced daily through staff interaction and information posted in the housing areas. They were able to explain how to report an incident and were aware of the zero tolerance policy. The intake staff during the interview indicated that the PREA information is provided to the offender within eight hours of intake, usually immediate since the orientation video is continuous playing in the area and information is posted on the walls of the holding cells. He also indicated that intake staff explain the PREA Brochure and encourage the offender to read it for their own protection. If needed, staff interpreters or the language contract services are used for offenders with language barriers. The intake process was observed demonstrating the sharing of the PREA information with incoming offenders.

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 policy, 14.03 PREA-Response to Sexual Assaults reflects all sworn staff receives training regarding the preliminary investigation of sexual assaults during the Basic Academy and investigators shall minimally receive training in Basic Investigations through a California P.O.S.T. accredited facility as well as training from a Department of Justice approved course on Investigating Sexual Assaults in Confinement Facilities; other desirable training includes, but is not limited to Child Abuse/Sexual Assault Investigations, Sexual Assault Investigation, and Interview and Interrogation Techniques. All sworn staff are also required to complete the NIC course PREA Investigating Sexual Abuse in a Confinement Setting. The specialized training curriculums includes techniques for interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement setting, and the criteria and evidence to substantiate a case for administrative action or prosecution referral. Although all sworn employees complete the NIC course PREA Investigating Sexual Abuse in a Confinement Setting, the agency identifies twenty-nine (29) specialized investigators that have completed further specialized training for sexual abuse investigators. The specialty training was verified through the investigator interviews and review of the training records.

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)

The medical staff are contractors through Corizon and mental health staff are employees of the Alameda County Behavior Health Care Services. Policies 13.24 PREA Mandated Medical and Mental Health Services, B21d PREA- Alameda County Behavior Health Care Services Criminal Justice Mental Health, and Corizon's policy J-B-04.00 Federal Sexual Abuse Regulations direct specialized PREA training and continuing education for all medical and mental health staff. The training curriculums include 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 who to report allegations or suspicions of sexual abuse and sexual harassment. The medical and mental health staff received training through the annual civilian orientation training which includes the lesson plan PREA General Order 1.23 and specialized training through the Corizon lesson plan PREA and Corrections. Interviews with the healthcare staff demonstrated they understood 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 who to report allegations or suspicions of sexual abuse and sexual harassment.

The health care staff do not conduct forensic exams. All victims of sexual assault who require a forensic exam will be taken to the local hospital emergency department for completion of the exam and emergency medical healthcare with no cost to the offender. The Highland Hospital's Sexual Abuse Response Team always has a team member available 24 hours a day, 7 days a week. There were no offenders that required a forensic exam.

The facility and the health care department maintains training records for the medical and mental health staff demonstrating that specialized and general PREA training was conducted. The training is documented on training attendance log sheets. This practice is verified through the training records maintained by PREA Manager.

Standard 115.41 Screening for risk of victimization and abusiveness

- 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)

The screening process for the risk of victimization and abusiveness are outlined in policies 12.01 Intake Classification and 12.03 Classification PREA Requirements. The policies and the intake screening form were reviewed. An intake assessment is conducted on all inmates during intake/receiving at the facility; whether they are new intakes or transfers from other facilities. This assessment assists with determining an inmate's vulnerability or tendencies of acting out with sexually aggressive behavior. Inmates identified as high risk with a history of sexually assaultive behavior or vulnerability will be identified, classified appropriately, and monitored.

The auditor had the intake staff that complete the intake and screening to explain the assessment process from the receiving of the offender at the facility to the completion of the risk screening process. At the arrival to the facility, the intake staff completes the Intake/Receiving Screening Form and the Classification Report Supplemental PREA Worksheet. This process conforms to the PREA standards. The screening forms include questions regarding mental, physical, and developmental disabilities; age of the offender; physical build of the offender; whether the offender has been previously incarcerated; whether the offender's criminal history is exclusively nonviolent; whether the offender has prior convictions against an adult or child; whether or not the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; whether or not the offender has previously experienced sexual victimization; and the offender's own perception of vulnerability. The forms are usually completed within hours of arrival at the facility. The classification staff makes a determination whether the offenders sexual abusiveness and/or sexual victimization risk is high/moderate/low based on the intake and classification form information. Offenders that are identified are referred to mental health. The classification staff make the housing placement. The policy, 12.01 Intake Classification, requires the screening to occur within 24 hours but no longer than 72 hours of arrival. The facility on the PRE-Audit Questionnaire indicated only 61.9% (20,598 of the 33,234 offenders entering the facility) of the offenders were screened within 72 hours. The difference is a result of the offenders that are cited and released within the twenty-four hour period. The health care screening that also occurs during the intake process cover whether the offender has previously experienced sexual victimization and the offender's own perception of vulnerability. The intake and classification staff are trained on how to perform the intake and classification forms for the risk assessments. This is conducted through a 117 slide powerpoint training, Classification Orientation. Upon review of the training lesson plan, all areas of the standard are covered on how to objectively identify and determine the risk for sexual victimization and abusiveness. During the offender interviews, most offenders indicated they remember being asked these questions on the day of their arrival and others indicated by the next day.

The classification staff reassesses the offender's risks for victimization and abusiveness. Policy 12.02 Reclassification outlines the offender will be reassessed any time a referral, request, incident of sexual abuse, or additional information which affects the inmate's risk of sexual victimization or abusiveness is received and any time an inmate is the victim of retaliation for reporting or cooperating in an investigation involving sexual abuse or harassment. Policy 12.03 Classification PREA Requirements addresses the reassessment of offenders risk level when warranted by a referral, request, incident of sexual abuse, or receipt of additional information that bears on the offender's risk of sexual victimization. In the audit period, all offenders whose stay was longer than thirty days were reassessed for risk of victimization or abusiveness by the classification staff. The classification staff during their interview explained the reclassification process and provided offender files for review.

The policy 12.01 Intake Classification states if, during the interview process, an inmate refuses to answer questions pertaining to any disability, their sexuality, past victimization or their own perception of vulnerability for abuse, they shall not be subject to the disciplinary process for failing or refusing to answer. Through the policy review and confirmed through staff interviews, offenders will not be disciplined for refusing to answer or disclosing information during the risk assessment process. The staff interviews with the PREA Manager, PREA Coordinator and classification staff confirmed appropriate controls have been implemented to ensure that sensitive information is not exploited by staff or other offenders. The offender's file are maintained in the Classification Department which is to remain locked at all times. Other than the classification staff, any other staff must have approval by the Classification Sergeant for information. The information requested must be critical to the operation of the facility in order to be shared. A log is maintained by the Classification Department of any file or information that is shared from an offender's file with the date, staff name and the offender name. The Classification Deputy

is to advise the Classification Sergeant and/or Watch Commander if information is requested by a staff member. This process is outline in policy 12.05 Classification Records. The agency's philosophy regarding offender information shared during interviews is "need to know, right to know."

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)

The agency's policies 12.01 Intake Classification and 12.05 Classification Records address the assessment process and the use of the screening information to determine housing, bed, work, education, and program assignments with the goal of keeping offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. Policy 12.01 Intake Classification outlines as part of the Classification process, each new inmate will be screened within 24-hours for potential vulnerabilities or tendencies of acting out with sexually aggressive behavior and after review of all pertinent information gathered, the Classification deputy will select the appropriate housing location and this information will be transmitted to Records with any other pertinent information to be included on the custody card. Once the housing assignment has been determined, and medical screening completed, the inmate will be moved to that unit. Inmates identified as at risk for sexual victimization or with tendencies to act out with sexually aggressive behavior will be assessed by mental health personnel or other qualified individual. If an inmate screens for high risk of sexual victimization or high risk of being sexually abusive an immediate referral will be made to the classification staff and a shift commander to determine housing assignment. All special handling of the offender will be noted on the custody card and the reason. During the site visit, the auditor observed the intake and classification staff completing the risk assessment process with an offender during receiving. The housing and program assignments are made on a case by case basis. Through offender and staff interviews, it was determined that the facility addresses the needs of the offender consistent with the security and safety of the individual offender.

The agency's policy 12.03 Classification PREA Requirements states that the housing and program assignments for transgender or intersex inmates in the facility will be made on a case-by-case basis. There were three (3) identified transgender offenders. During interviews with two (2) transgender offenders, they indicated they had the opportunity to shower separately, were treated with respect, and were not housed in dedicated housing areas. The offenders indicated during interviews that the staff monitor them for safety considerations and general concerns.

The policy 12.02 Reclassification states inmates designated as intersex or transgender shall be reviewed twice yearly, regardless of requests for review for the purpose to ensure the inmate's health and safety, ensure facility security, and avoid inmate management issues. The offenders interviewed had not been housed at the facility long enough to receive a reassessment. The PREA Manager and the Classification staff confirmed during the interviews that a special population review would be conducted with each transgender offender if housed for any length of time that allows a reassessment.

The agency does not place lesbian, gay, bisexual, transgender, or intersex offenders in dedicated facilities, units, or wings solely on the basis of such identification or status. Through the interviews with the transgender offenders, it was verified they were housed in various housing areas within the facility. One of the offenders interviewed stated his preference was to be housed in protective custody, after request to the classification staff he was moved to the protective custody housing unit. The facility has single shower stalls with partial partitions which allow transgender and intersex offenders the opportunity to shower separately from other offenders and offer privacy.

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)

The agency's policy 12.03 Classification PREA Requirements, 9.02 Administrative Isolation, and 9.03 Protective Custody prohibit the placement of offenders at high risk for sexual victimization in the involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Policies 9.03 Protective Custody and 9.02 Administrative Isolation also outline if the involuntary placement in Administrative Isolation Housing is related to the inmate's risk for sexual victimization, a Classification Unit Deputy will perform a review within 24 hours of the placement to determine if an assessment of all available alternatives has been made and if there are no available alternative means of separation from likely abusers. The Facility Commander indicated during the interview that the facility would exhaust all other options prior to placing an offender in involuntary segregation and would house that offender for the minimum amount of time needed before another housing plan could be established. He also indicated the facility had not placed any offender in involuntary segregation.

Policy 9.03 Protective Custody state inmates requesting/requiring protection from other inmates may be placed in Protective Custody and will be allowed to participate in as many programs afforded the general population as possible, providing it does not impose a threat to the security of the facility. Policy 9.02 Administrative Isolation states inmates will continue to have access to programs and services including, but not limited to; educational services, commissary, library services, social services, counseling services, religious guidance, and recreational programs, as long as access to these programs does not pose a threat to the health, safety, security of staff or to the facility. Any deprivation of any right, privilege, and/or activity is to be documented and forwarded to the Facility Commanding Officer, via appropriate channels.

If an offender would be placed in involuntary segregation in the administrative housing unit, the offender would have a review conducted every seven days for the first two months then at least every thirty days thereafter per policy 9.02 Administrative Isolation. If the offender is placed in the protective custody unit, the offender would have a review conducted twice for the first month then at least every thirty days thereafter per policy 9.03 Protective Custody Inmates.

The Pre-Questionnaire and during interviews, the facility indicated there were no placements of offenders in involuntary segregated housing. However, during the review of the intake process and interviews with intake and classification staff, it appeared that offenders are being placed in involuntary segregation housing pending a detailed classification review. The facility was not classifying it as involuntary segregation; since the segregation unit is the only housing unit with single bunked cells, this is where they would house an offender that may need a more detailed classification review prior to housing in the general population. From the interviews with staff and offenders, the auditor determined that the facility was addressing individual housing and program needs consistent with the security and safety of the offender; however it appears as involuntary segregation. When these placements occurred, documentation was not maintained since the facility was not considering this involuntary segregation. The agency has updated the policy 12.03 Classification PREA Requirements to better outline and address this concern. The updated policy states "If the involuntary placement is deemed to be necessary, the Classification Sergeant or on duty Watch Commander will review the placement. The Classification Sergeant or on duty Watch Commander will have the sole authority to overturn the decision of the Intake Classification Deputy to house the inmate in Administrative Isolation and order the inmate be placed into more appropriate housing. If approved, the Classification Sergeant or the on duty Watch Commander shall initial the intake sheet, approving the placement and confirming the following have occurred an assessment of all available alternatives has been made and there are no available alternative means of separation from likely abusers." The PREA Coordinator will also be notified to ensure the appropriate procedures and timeframes are maintained for compliance with the standards. The auditor has determined the facility acted in good faith when using the segregation housing due to the limited single cell housing options available to them. The changes made in the policy and procedures and the education of the intake/classification staff will resolve this issue and ensure compliance.

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)

The Santa Rita Jail has established procedures allowing for multiple internal and external ways for offenders to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are shared with offenders at intake, during orientation, in the PREA brochure, in the handbook, and on posters throughout the facility. Offenders can report verbally and in writing to staff, write the staff through a message request, report through the grievance system, utilize third party reporting, send an anonymous note, and call the hotline. The agency does an excellent job of informing the offender the number of ways to report sexual abuse and sexual harassment beginning at intake. In the intake area, painted on all the walls of the holding cells, it states the offender is to notify any staff member if they become a victim or suspect sexual abuse is taking place or the offender can call *89 an outside agency to report. This information is also provided in the handbook and PREA brochure they receive during the intake process. And the information is shared in the educational PREA orientation video that is played continuously in the intake area. Offenders are able to maintain the handbook and brochure when placed in their housing unit. The housing unit also plays the educational PREA video weekly containing reporting information and it is painted on the ways above the phones. Policies 1.23 PREA General Order and 13.07 Sexual Assaults in Custody support these procedures. These reporting systems were demonstrated through review of policies and procedures, offender handbook, posters throughout the facility, and interviews with offenders and staff. The offenders were knowledgeable on how to report and pointed out that the information is painted on the walls everywhere in the facility.

The facility has a hotline available to the offenders to report sexual abuse by dialing *89. The hotline information is painted on the walls above all the phone stations including that the calls are confidential and not subject to monitoring. The calls go directly to an outside rape crisis center, Tri-Valley Haven. These reports may be made confidentially and remain anonymous upon request. The agency immediately forwards any reports of sexual abuse and sexual harassment to facility officials for investigation. The agency will forward to the facility information regarding the allegation and the victim's name unless the victim has requested to stay anonymous. One (1) of the allegations were reported through the hotline and requested to stay anonymous. During the interview with the Tri-Valley Haven, they indicated the hotline is contacted regularly; however most of it is about facility operations. The staff explains to the offenders the purpose of the hotline. The auditor tested the hotline within one of the housing units following the directions on the wall, connection was made with the rape crisis center. Offenders can also call the Highland Hospital Sexual Assault Hotline by calling collect. The hospital accepts the collect calls from offenders. The offenders can also contact Inmate Social Services by calling #211. Offenders indicated they were aware of the hotline, however they did not believe the calls would be confidential or go to an outside agency. The facility provides all possible education to the offenders on the hotline being confidential and that it is an outside agency.

During the formal offender interviews and informal offender interviews during the tour, most offenders indicated they felt comfortable reporting sexual abuse or sexual harassment to staff. They also were able to identify other options available to them for reporting including the hotline, telling a staff member, writing a grievance, writing the supervisor/Watch Commander, and/or contacting their family, friend, or lawyer. Also during the informal interviews with offenders while touring the facility, they indicated they knew the reporting process and felt comfortable reporting to the housing unit deputy, medical, or a shift supervisor. Upon reviewing the reporting methods, thirty-five (35) of the thirty-seven (37) allegations were reported within the facility; one (1) through the hotline and one (1) by an outside agency.

Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of offenders. Staff were also knowledgeable on the ways offenders could report to staff and their responsibility in the process. Staff acknowledged through interviews that they would report immediately any allegations and document through an inter-office communication form. Most staff was unaware where they could report privately other than to their supervisor. During the audit, a training slide was provided to all staff electronically that identifies the methods to report privately any sexual abuse or harassment. Staff were informed they are encouraged to follow the chain of command; however other options are directly to Internal Affairs, the Special Victims Unit, the PREA Manager, and/or Agency PREA Coordinator. Reporting information is also provided to staff through training, policies, and located on the informational pocket card provided to the employee.

The reporting requirements and process is supported by policies 1.23 PREA General Order and 13.07 Sexual Assaults in Custody. The process is also available in the PREA Brochure Sexual Assault Awareness and on the agency's website www.alamedacountysheriffs.org. The agency does not house offenders solely for immigration purposes.

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)

The agency's policy 16.03 Inmate Grievance Procedure addresses administrative procedure for offender grievances regarding sexual abuse and the agency's policies and procedures for filing emergency grievances when an offender is subject to a substantial risk of imminent sexual abuse. Grievances alleging sexual abuse are handled as emergency grievances. The agency does not impose a time limit for the submission of a grievance regarding an allegation of sexual abuse or requires an inmate to use an informal grievance process or otherwise to attempt to resolve with staff; supported by policies 1.23 PREA General Order and 16.03 Inmate Grievance Procedure. Policy also indicates that a grievance alleging sexual abuse of harassment under no circumstances shall be resolved informally. The offender handbook also outlines this process under the PREA section.

Policy 16.03 Inmate Grievances outlines if the grievance pertains to a complaint of sexual harassment against a deputy, the Sergeant shall initiate the investigation and minimally interview the victim and any witnesses; determine if the complaint is unfounded or if it has any merit. If the grievance is determined unfounded, a memorandum of all findings as well as any other information is attached to the grievance packet and forwarded to the grievance unit. If unable to prove the complaint is unfounded, the sergeant will document all findings in a memorandum, via the chain of command, to the Commander of D&C, who will forward to the Captain of Internal Affairs for investigation. If the grievance pertains to any claim of sexual abuse, the Watch Sergeant will notify the Watch Commander, who shall notify the Special Victims Unit Watch Commander; assign a deputy to conduct the initial investigation as outlined in policy 13.07; and reassign the deputy who is the subject of the investigation to a different housing unit until the investigation is completed. All grievances pertaining to sexual assault or harassment are to be resolved as soon as reasonably possible within 90 days. Extensions to grievances pertaining to sexual assault/harassment may be granted for up to 70 days after the initial 90 days. In the unlikely event an inmate does not receive a response within the set time period; the inmate may consider the grievance has been denied. The facility had one (1) grievance alleging sexual harassment by staff. The grievance was investigated by the sergeant was determined unfounded and the grievance was denied. During the investigation the offender admitted he made the claims against the deputy that filed a disciplinary conduct report on the offender. The investigation was completed and the offender notified within thirty days.

When the emergency grievance alleges the substantial risk of imminent sexual abuse, it is forwarded to a sergeant for review for immediate corrective action. An investigation begins immediately and the classification unit is contacted for reclassification of the offender. The Grievance unit will provide an initial response within 48 hours and a final decision within five (5) days. The final grievance packet is forward to the PREA Coordinator. An initial response is provided within 48 hours of receipt. The agency's policy requires that within 5 calendar days of notification of a grievance, a staff member must respond with the action taken. There were no grievances alleging the substantial risk of imminent sexual abuse.

The policy 16.03 Inmate Grievance Procedure address the third party assistance in filing requests for administrative remedies of sexual abuse and permit to file such requests on behalf of inmates. A third party grievance for sexual abuse received will be processed as an emergency grievance. The alleged offender will be given an opportunity to agree or disagree with the allegation and to have the request processed on the offender's behalf. If the offender refuses to have the grievance filed on their behalf, it must be documented in a memorandum and forwarded to the PREA Coordinator. There were no third party grievances filed.

The policy 16.03 Inmate Grievance Procedure states offenders who falsely file grievances or make false reports of sexual abuse of any kind shall be subject to disciplinary action. Evidence that the offender acted in bad faith must be fully documented in a disciplinary or criminal report. The facility had no disciplinary actions against an offender for having filed a grievance in bad faith.

During the random interview process, offenders indicated they felt comfortable reporting sexual abuse or sexual harassment to the staff. They indicated they could report through the grievance process also. Also during the informal interviews with offenders while touring the facility, they indicated they knew the reporting methods: telling a staff member, writing a grievance, writing staff and the Watch Commander, calling the hotline, and/or contacting their family, lawyer, or friend. The offenders interviewed stated they felt comfortable reporting to the housing unit officer or a shift supervisor.

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)

The agency’s policy 1.23 PREA General Order, PREA Brochure, and Inmate Rules and Information Handbook outlines the offenders will be provided access to victim advocates for emotional support services related to sexual abuse by access to victim offender advocates, giving offenders mailing addresses and telephone numbers, including toll-free hotline numbers, where available, and the extent to which communications will be monitored. Within the Inmate Rules and Information Handbook contact information including addresses and phone numbers are provided for five (5) agencies. It also provided direction for the hotline; to call *89 which go directly into a local rape crisis center staffed by trained counselors. The handbook, PREA Brochure, and the information posted in the units inform the offenders the calls to *89 are not monitored or recorded and are completely confidential.

Policy 13.07 Sexual Assaults in Custody outline the inmate shall be offered the services of a victim advocate and if the inmate does request a victim’s advocate, the advocate is to be permitted to be with the inmate throughout the investigatory process and access to the inmate shall be made available upon return to the facility as well. The advocate’s role during this process is to provide emotional support, crisis intervention, information, and referrals. The agency has two MOUs for victim advocacy services; Tri-Valley Haven (6/1/15 - 5/31/17) and Bay Area Women Against Rape (BAWAR) (7/31/15 – 6/30/17). The MOU with Tri-Valley Haven is the main service provider for the Santa Rita Jail. Tri-Valley Haven provides 24 hour crisis line; SART/hospital accompaniment for victims; follow-up appointments for counseling; on-site crisis counseling; a minimum of two classes or group counseling in topics of Domestic Violence and/or Sexual Abuse; and resources and referrals to incarcerated survivors of sexual abuse.

During the interview with the Tri-Valley Haven, they indicated the hotline is contacted regularly; however most of it is about facility operations. The staff explains to the offenders the purpose of the hotline is to report or provide counseling in regards to sexual abuse. In this audit period, Tri-Valley answered 186 crisis calls to the hotline for counseling with 60 crisis calls directly related to sexual assault and conducted 52 in-person crisis counseling visits. The auditor tested the hotline within one of the housing units following the directions on the wall, connection was made with the rape crisis center. The agency schedules a visit with the offender within a week of call to meet individually for a crisis counseling session which is a non-contact visit the first time. Further visits are scheduled as needed. The offender may be referred to on of counseling groups held within the facility.

The majority of offenders interviewed indicated they were not aware of the outside support services. However, the facility provides this information in multiple ways to the offenders: during the educations process, in the handbook, in the PREA brochure, and on posters within the facility. The facility is providing this information to the offenders in all possible ways.

The facility exceeds the standard with the two MOUs in place, the hotline, and the working partnership the facility shares with both outside agencies. The advocacy agency also provides weekly support groups within the facility. During the site visit, there were 124 offenders actively involved in these support groups. During an offender interview, the offender indicated how the support group assisted her in coping with previous sexual victimization.

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)

The agency's policy 1.23 establishes guidelines and procedures for responding to third-party complaints or inquiries reported directly to a staff member or through the agency's website. Third-party reporting will be accepted and documented by any staff member. The information will be provided to the shift command, and the investigation will begin immediately. The Alameda County Sheriff's Office website provides a link as a method for third party reporting of sexual abuse and sexual harassment. The link encourages family members and the general public to report allegations of sexual assault to the Office. Reporting through the link may be made anonymously. The PREA Manager and PREA Coordinator are the staff that receive the responses from the link. They forward to the appropriate area for investigation if warranted. Third party reporting information is shared through the agency's website, posters, offender handbook, and brochures. There were no allegations made through third-party reporting.

During the formal offender interviews and informal offender interviews during the tour, offenders were able to identify the hotline, lawyer, family, and friends as methods for third party reporting. Staff were also able to identify these reporting methods during their interviews also. These reporting systems were outlined through review of policies and procedures, offender handbook, and posters throughout the facility.

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)

The agency's policies 1.23 PREA General Order, 13.07 Sexual Assaults in Custody, and Training Bulletin 16-20 requires that all staff must report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against offenders or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Policy 13.07 Sexual Assaults in Custody states staff who becomes aware of sexual abuse or harassment by another staff member are expected to report the abuse or harassment immediately. Furthermore, all staff shall report immediately any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Failure to do so is akin to committing the act and subjects the staff member with knowledge of the act to discipline. Staff may report these acts in the following ways: verbally to a supervisor or Watch Commander, in writing via memorandum to the Captain of Internal Affairs, and/or verbally via telephone, to Internal Affairs.

Also policy 13.07 Sexual Assaults in Custody states as with any other criminal investigation, information related to cases of sexual assault or harassment are of a confidential nature and shall only be discussed with those involved in the case. This is covered in the annual in-service training, pre-service orientation training, and muster briefings for all staff. Specialized and random staff interviews confirm that staff are knowledgeable in their reporting duties, the process of reporting, and to whom to report. Staff acknowledged through interviews that they would report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment and document through an inter-office communication form.

The policies 13.07 Sexual Assaults in Custody, B-21d PREA, and Corizon J-B-05.00 Response to Sexual addresses the medical and mental health staff reporting requirements for sexual abuse. Medical and mental health staff must report incidents that occurred in a correctional setting without consent only in the interest of treatment, security, and management issues. If the sexual assault/abuse occurred in the community setting previously, the staff may only report to security if the offender provides consent.

The PREA Coordinator indicated if the offender is mentally ill, vulnerable adult, or elderly, the facility will notify Adult Protective Services. The investigation will continue as any investigation. And if the offender is released, the Adult Protective Services provides services to the offender in the community. This practice is outlined in policy 1.23 PREA General Order; all incidents involving sexual contact between inmates, which involve inmates who are elderly or suffer from any disability (physical, emotional, or developmental) shall also be forwarded to Alameda County Adult Protective Services.

All allegations are reported to designated SVU investigators to complete the investigation as required by policies 1.23 PREA General Order and 13.07 Sexual Assaults in Custody. Staff indicated through interviews they were aware of the methods available to them to report sexual abuse and sexual harassment of offenders including third-party and anonymous reports. Staff acknowledged through interviews that they would report immediately any allegations and document them through a memorandum. They identified the SVU investigators and internal affairs as the offices they could contact by phone or in writing anonymously. This information is also provided to staff through training, employee policies, and located on the informational pocket card provided to the employee.

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)

The agency's policies 1.23 PREA General Order, 13.07 Sexual Assaults in Custody, and 16.05 Protection from Harm requires staff to take immediate action to protect any offender subject to substantial risk of sexual abuse. Policy 16.05 Protection from Harm states if any staff member observes or becomes aware of any factor which threatens the safety, health, or well being of any inmate, the staff member shall immediately report this observation to his/her immediate supervisor and initiate action to prevent injury, exposure to disease, abuse, harassment, or damage of property. All staff interviewed knew the steps to take to protect an offender at risk for sexual abuse; to immediately separate the offender from the area to keep the offender safe and contact the supervisor. Housing unit and supervisory staff work simultaneously to take protective measures as information is reported. The first responder interviewed outlined the process taken to ensure the safety of the offender. This information is also provided to staff through training, employee policies, and located on the informational pocket card provided to the employee.

In the audit period, staff reported that that one (1) offender was subject to substantial risk of imminent sexual abuse. The offender was separated and placed in housing to ensure safety of the offender while the investigation was started. The Division Commander and Facility Commander indicated in their interviews that the offender would be removed from the environment and classification unit would determine the safe housing options for the offender while the investigation was occurring. The offender would be monitored through the classification unit and PREA Coordinator.

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)

The agency's policy 12.01 Intake Classification outlines if during the intake interview, an inmate reveals he/she was a victim of a sexual assault at another facility, the Classification Deputy shall immediately contact that agency to ascertain if the claim has been investigated; in the event the claim has not been investigated and is a new complaint, the Classification Deputy shall write an incident report, outlining the general circumstances of the inmates report to him/her. The report will be forwarded to the appropriate investigating agency and notification made to the Facility Commanding Officer via memorandum of the findings. The Facility Commanding Officer shall notify the outside agency's Facility Commanding Officer, in writing, of

the report within 72 hours of receiving the report. A copy of the memorandum, report, and letter to outside agency shall be forwarded to the PREA Manager at the facility, as well as, the PREA Coordinator. Policy 12.05 Classification Records directs the classification staff that if an inmate is being transferred into Santa Rita from another agency, and reports he/she was the victim of a sexual assault or harassment while in the custody of another agency, the deputy receiving the inmate file shall write an incident report and prepare the notification letter for the Captain's signature.

This process was confirmed through the interviews with the Facility Commander, PREA Manager, PREA Coordinator, Investigator, and the Division Commander. Also during the review of the intake process, the intake deputy identified question #5 on the classification report that would trigger the process to begin. The intake deputy would contact the identified agency to find if an investigation had been completed on the allegation. This information would be forwarded to the facility commander and recorded in the notes section of the Classification Report.

In the audit period, there was three (3) allegations received that an offender was abused while confined at another facility. The allegations were investigated. Two (2) were determined unfounded and one (1) investigation remains open. Notifications were reviewed and the notifications were made within the acceptable time frame as documented in files.

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)

The agency's policy 13.07 Sexual Assaults in Custody and 1.23 PREA General Order requires that staff must separate the offender from the risk and report immediately to a supervisor. The staff member responding to the report is required to separate the alleged victim and abuser; preserve and protect the crime scene; request the alleged victim and alleged abuser to take no action to destroy evidence. Policy also outlines that staff are to notify the immediate supervisor or shift commander. The Shift Commander will make further notifications. If the first responder is not a security staff member, the staff is to contact a Deputy or Sergeant, ascertain the physical well being of the offender and protect the physical evidence until a security staff member is on site. The first responder responsibilities to separate the alleged victim and abuser, instruct not to take any actions that could destroy physical evidence, and ensure the crime scene is secure is covered in the pre-service orientation training, annual in-service training, and during muster briefings. Each staff member is provided an informational pocket card identifying the steps to take as a first responder and the reporting requirements.

Through interviews with investigative staff, higher and intermediate level supervisors, first responders, and random staff it was demonstrated that staff was knowledgeable in the steps as a first responder: to separate the alleged victim and abuser; preserve and protect the crime scene; request the alleged victim and alleged abuser to take no action to destroy evidence and contact supervisor. The first responder interviewed outlined the process taken to ensure the safety of the offender; separated the offender from the area and notified the security supervisor.

In the audit period, there were twenty-one (21) allegations that an offender was sexually abused. A security staff member was the first responder in two (2) of the allegations; the rest of the allegations were not reported in a time frame for the staff to conduct the first responder activities. None of those allegations were within a time frame that still allowed for the collection of physical 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)

The agency's policy 13.07 Sexual Assaults in Custody and the Alameda County Sheriff's Office Santa Rita Jail Institutional Plan for Response to Sexual Abuse outlines the facility process of a reported allegation. The procedures provide a systemic notification and response following a reported sexual abuse incident. The written Santa Rita Jail Institutional Plan for Response to Sexual Abuse outlines the coordinating actions taken in response to an incident of sexual abuse among security staff, investigators, medical and mental health services, advocacy agencies, civilian staff, and management. Interviews with the Division Commander, Facility Commander, PREA Manager, and higher-level staff indicated a commitment by the facility leadership for handling a coordinated response. The coordinated response was apparent in the review of the investigation files.

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)
- Non Applicable

The Alameda's County Sheriff's Office has not entered in any collective bargaining unit contracts since August 2012. The Deputy Sheriff's Association of Alameda County contract effective date is June 24, 2012 through June 13, 2020. There is no language in the contract that limits the Sheriff's ability to remove or discipline staff charged with sexual abuse or harassment. The Division Commander indicated that questions were added to the application process regarding previous misconduct and if staff committed and was charged, discipline up to termination would be considered.

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)

The agency's policy 1.23 PREA General Order outlines protection of all inmates and staff who report sexual abuse or sexual harassment, cooperates with sexual abuse or sexual harassment investigations, and from retaliation by staff or inmates. The policy designates the PREA Manager as the staff member to monitor retaliation. The PREA Manger indicated in the interview that monitoring is initiated with the offender or staff member by discussing the monitoring process, make monitoring contacts within every thirty days, and also discuss the possible discipline. All monitoring contacts are documented on memoranda format. All reports will be forwarded to the PREA Coordinator, who will maintain all records of the events.

The PREA Manager monitors all reports of possible retaliation. If the incident reported is retaliation of an offender, the classification unit will conduct the investigation. The results of the investigation will be forwarded to the PREA Manger, who will monitor for further retaliation. If the incident is retaliation of staff on staff, the internal affairs unit will conduct the investigation. The PREA Manager will contact the affected staff member and monitor for further retaliation. The PREA Manager is also responsible to forward all copies to the PREA Coordinator.

Policy 12.03 Classification PREA Requirements outline offenders who report or cooperate with investigations pertaining to sexual abuse or harassment shall have their conduct and treatment monitored for 90 days, unless the report is determined to be unfounded. This will include periodic face to face discussions with the inmate. Any indications of retaliation shall be acted upon immediately, with the offender's safety as a priority. Protective measures shall include, but are not limited to: housing unit change for victim or suspect, assignment of Keep Separate (KSF) in classification detail, and emotional support services for the victim. The PREA Manager will review indicators for possible problems which include disciplinary reports, housing or cell changes, and program changes. If during the 90 day monitoring period, there appears to be a continuing need for

monitoring (signs of retaliation, complaints of retaliation, etc.), the monitoring period shall be extended for an additional 90 days and a re-evaluation for additional monitoring will be conducted by the PREA Manager. The monitoring will be documented in a memoranda format and included in the offenders file and maintained by the PREA Coordinator. Different measures to protect the staff may include different job position, shift, and/or work hours while the investigation of retaliation is in progress. Once the monitoring is completed, the final monitoring documentation is placed in the investigation packet maintained in PREA Coordinators Office.

The retaliation monitoring process was confirmed through interviews with the Facility Commander, PREA Manager and PREA Coordinator. There were no reported incidents of retaliation or monitoring at the facility during this audit time frame. The monitoring documentation that occurred in the previous time period was provided for review to document the process.

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)

The agency's policy 9.03 Protective Custody prohibit the placement of offenders who alleged to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination has been made that there is no available alternative means of separation from likely abusers. The Santa Rita Jail utilizes the protective housing cells as needed during the investigation process. An inmate may, at any time, request re-assignment to the general inmate population. This decision is made by the classification unit based on the safety concerns for the offender.. From the interviews with staff and offenders, the auditor felt that the facility was addressing individual housing and program needs consistent with the security and safety of the offender.

There were no offenders who suffered sexual abuse held in involuntary segregation housing in the audit period.

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)

The standard is met through the agency's policies 1.23 PREA General Order; 8.15 Crime Investigations; 14.03 PREA-Response to Sexual Assaults; and 3.07 Commendations, Discipline, and Personnel Complaints. These policies address conducting the sexual abuse and sexual harassment investigations including third-party and anonymous reports.

The agency policies 1.23 PREA General Order and 14.03 Response to Sexual Assaults states all complaints of sexual harassment or abuse, upon inmates or detainees shall be thoroughly investigated and documented by the Sheriff's Office by staff trained in conducting these types of investigations. Policy 14.03 PREA-Response to Sexual Assaults outlines that investigators assigned to the Special Victims Unit will be the only investigators assigned to investigate sexual assaults in any of the Sheriff's Office confinement facilities, as they have received specific training on investigating these types of assaults. The facility identifies twenty-nine (29) investigators that have the specialized training. The investigators have completed the NIC PREA – Investigating Sexual Abuse in a Confinement Setting and PREA: Behavioral Health Care Sexual Assault in the Confinement Setting, as well as, preliminary investigation training of sexual assaults during basic academy and Basic Investigations through the California P.O.S.T. All sworn staff are required to complete the NIC PREA – Investigating Sexual Abuse in a Confinement Setting and received preliminary investigation training of sexual assaults during basic academy. The lesson plans reviewed included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate for

administrative and/or prosecution referral. In the review of the training records and certificates, all investigators have received special training in sexual abuse investigations. Interviews were conducted with two of the administrative investigators and one SVU investigator; all acknowledged the training received and outlined the training topics.

Through the review of investigation reports, the investigations were initiated immediately by trained facility staff and notification to SVU was made immediately. Once on site, SVU will take over the responsibility of the investigation and evidence collection. The evidence protocol is outlined in policy 5.24 Collection, Preservation of Evidence/Property, Processing, Storage and Inspection. The investigator noted that direct evidence may include DNA from offenders and area; video footage; and eye witness statements. Circumstantial evidence gathered may include bedding in the housing unit, key cards from staff members involved, victim and witness statements, and prior incident reports. The SVU investigators handle all the allegations of sexual abuse until it is deemed an administrative investigation only. The SVU investigators share the case progress and the investigation outcome with the facility administration and the PREA Coordinator. Documentation of the criminal investigations is maintained at SVU located at the Eden Township Substation. Documentation of the administrative investigations is maintained in PREA Manager's and PREA Coordinator's offices. Interviews were conducted with two of the administrative investigators and one SVU investigator. All investigators demonstrated the knowledge of facility's investigation responsibilities and the responsibilities of each investigator during the administrative and criminal investigations. Based on the review of the investigations, the agency's policies, and interviews with facility staff, investigators, and offenders it was determined investigations into allegations of sexual abuse and sexual harassment are done promptly, thoroughly and objectively for all allegations.

If SUV determines a crime has been committed, the case is referred for prosecution. Policy 1.23 PREA General Order supports this process; if, during the investigation, the quality of evidence appears to support criminal prosecution, a compelled interview may be conducted after consulting with the District Attorney's Office as to whether the interview may be an obstacle for subsequent prosecution. There is a Sexual Assault Team within the prosecutor's office that the case would be discussed with to determine if additional information or items are needed for support. The SVU investigator indicated the agency has a good working relationship with the prosecutor's office. One (1) cases was referred for prosecution this audit time frame. An offender was charged for false reporting of sexual assault by staff on two cases. The offender was charged. There is another case still open waiting for the lab results.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an offender or staff. Neither the facility nor SVU, require an offender who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. All administrative and criminal investigations will be completed on all allegations even if the alleged abuser or victim transfers or departs employment with the agency.

Policy 3.07 Commendations, Discipline, and Personnel Complaints states Investigators shall make every effort to determine whether staff actions or failure to act contributed to the policy violation and all reports shall include evidence pertaining to the allegations, the statements of witnesses and involved parties, and the conclusion and finding of the investigator. The investigators complete a written report with investigation findings for administrative and criminal cases. The report format contains the persons involved; a thorough summary of the incident including the initial interviews; witness statements; physical, testimonial, and documentary evidence; list of all evidence; any supplemental information; lab and exam findings; and outcome of the investigation. The criminal investigation report will also include charges, discussion with prosecutor's office, and any supplemental information that was collected as part of the criminal case. The criminal investigation is maintained in at the SVU office. A review of all the criminal investigations and four (4) administrative investigations were reviewed. All contained the required information. The investigation reports were very detailed, well written, and easy to follow the reasoning of the findings.

The criminal and administrative investigation reports and all documents pertaining to investigations involving any sexual abuse assault must be securely retained by the agency PREA Coordinator for no less than ten (10) years as indicated in policy 1.23 PREA General Order. Policy 3.07 Commendations, Discipline, and Personnel Complaints states the Sheriff's Office shall retain all written reports of administrative and criminal investigations for as long as the alleged abuser is incarcerated (if convicted criminally) or employed by the Sheriff's Office, plus five (5) years.

Policy 1.23 PREA General Order indicates that all investigations will continue until a final determination is reached. This practice was confirmed through the interviews with the investigators. Only one (1) case was not completed due to the victim being released from custody. The investigator tried to make contact using the information provided at intake but was unsuccessful. The investigation was continued to the point it could without the victim's participation, a final outcome could not be determined.

There were thirty-seven (37) allegations during the audit period: thirty-four (34) allegations occurred at the facility and three (3) allegations were reported that the allegation occurred at another facility. Of the twenty-three (23) staff on offender allegations; seventeen (17) were alleged staff on offender sexual abuse and six (6) were alleged staff on offender sexual harassment. The administrative findings of thirty-six (36) allegations were unfounded. One investigation could not be completed due to the victim being released from custody and the investigators were unable to make contact with the victim using the contact information he provided during intake. Two (2) allegations were referred for criminal investigation and were determined unfounded. Of the fourteen (14) offender on offender allegations; four (4) were alleged offender on offender sexual abuse and ten (10) were alleged offender on offender sexual harassment. The administrative findings of eleven (11) allegations were unfounded, two (2) were determined consensual between the offenders, and one (1) remains open. One (1) allegation was referred for criminal investigation; this case is the open case and is waiting on lab results.

The auditor determined the facility exceeds this standard through the partnership the SVU office and the facility demonstrated in the investigation process and communication. The Facility Commander, PREA Coordinator and the SVU investigator shared during their interviews the positive communication and information sharing regarding updates and outcomes of the case. The agency also excels in that all sworn staff are trained in sexual abuse investigations and are able to begin the investigation at first report. Also the investigation reports were very detailed, well written, and easy to follow the reasoning of the findings. The SVU investigators also provide training through muster for the facility staff. And the investigation reports and documentation are maintained for no less than ten (10) years which is beyond the five year requirement of the standard.

Standard 115.72 Evidentiary standard for administrative investigations

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

The agency's policy 1.23 states the standard of proof for determining if a violation of the Prison Rape Elimination Act has occurred shall be no higher than a preponderance of evidence. This is also documented through the PREA lesson plan. The interviews with the investigator and staff confirm compliance with the policy and standard.

Standard 115.73 Reporting to inmates

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

The agency's policy 1.23 PREA General Order states upon completion of an investigation involving an inmate's allegation that they were sexually abused in an agency facility, the inmate shall be informed as to the final determination of the investigation (Sustained, Not Sustained, Unfounded). The PREA Manager or PREA Coordinator is to notify the inmate of the outcome when it is determined to be substantiated, unsubstantiated, and unfounded. This process was confirmed during interviews with staff and offenders and reviews of the notifications in the case files.

If the allegation of sexual abuse was by a staff member, the policy requires the staff to inform the offender of the status of the staff member to include whether the staff member is no longer assigned to the offender's unit, the staff member is no longer employed/assigned at the facility, the staff member has been indicted/criminally charged related to sexual abuse within the facility, and/or the agency learns the staff member has been convicted on a charge related to sexual abuse within the facility. This notification will be made through a letter to the victim by the PREA Coordinator. If the allegation was sexual abuse by another offender, the policy requires the staff to inform the offender whether the alleged abuser has been indicated/criminally charged related to sexual abuse within the facility and if the alleged abuser has been convicted on a charge related to abuse within the facility. This notification will be made through a letter to the victim by the PREA

Coordinator. The files reviewed all contained the offender notifications documented on a memoranda format from the PREA Coordinator to the offender. The notifications made by the facility were made in a timely basis. Of the twenty-one sexual abuse investigations, notifications were made on eleven (11) cases. The PREA Coordinator indicated that the ten (10) offenders not notified were for the following reasons: inmate was not in custody at the completion of the investigation, recanted immediately filing the report, and the offender did not provide any pertinent information in their report on which to base an investigation.

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)

The agency's policy 1.23 PREA General Order states all staff are subject to disciplinary action for violations of the Prison Rape Elimination Act, up to and including termination. In cases involving sexual abuse or assault by staff upon inmates, termination shall be the presumptive disciplinary action. The 2.1.4 Standards of Performance (The Cardinal Sins) states all members shall be aware of the expectations of conduct and standards of performance established by the Alameda County Sheriff's Office. Severe discipline, up to and including termination, will be meted out to those employees culpable of the following misconduct including engaging in any form of sexual harassment; this includes any unwanted comments or contact as defined in the sexual harassment policy and becoming involved in an inappropriate or romantic relationship with an inmate. There was no staff that violated the agency's sexual abuse or sexual harassment policies.

The policy 1.23 PREA General Order also states cases involving violations of agency policies relating to sexual abuse or sexual harassment of inmates, other than actually engaging in sexual abuse, shall be 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. The Division Commander indicated if staff violated the agency's policies and was charged, discipline up to termination would be considered. There was no staff that has been disciplined for violation of the agency's sexual abuse or sexual harassment policies.

In the event an employee is terminated due to violation of this policy, or the employee resigns in lieu of termination, the information pertaining to the termination or resignation, shall be reported to appropriate law enforcement agencies and appropriate licensing bodies, unless the activity was not criminal per policy 1.23 PREA General Order. There was no staff reported to law enforcement or licensing boards for violating the agency's sexual abuse or sexual harassment policies.

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)

The agency's policies 1.23 PREA General Order states contractors or volunteers who have been found to have participated in any abuse or harassment of an inmate shall have their site clearance revoked and will not be allowed on the property in any capacity.

This was supported by the volunteer and contractor orientation training, the PREA Contractor Brochure, and the Consultant/Contact Personnel/Volunteer Agreement. Interviews with five (5) contractors and volunteers confirmed they were aware of the policies and the remedial measures that could occur for engaging in sexual abuse or sexual harassment of

offenders. The Facility Commander indicated during the interview that the volunteer/contractor alleged to violate the agency's policies would have their security clearance revoked; an investigation would be initiated and completed to determine the validity of the allegations. If the investigation is substantiated, the contractor/volunteer would be terminated and removed from security clearance in all facilities and may be turned over for prosecution if warranted.

In the audit period, there have been no contractors or volunteers who have violated the agency sexual abuse or sexual harassment policies.

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)

The agency's policy 16.01 Disciplinary Procedures and the Inmate Rules and Information Handbook outline disciplinary sanctions for offenders for sexual abuse and sexual harassment. Policy 16.01 states the policy of the Alameda County Sheriff's Office is to criminally charge acts which violate state or federal law and any inmate criminally charged in an incident on jail property may also be disciplined for violating facility rules. The Facility Commander indicated during the interview that the facility commander or designee may administratively move the offender from general population as an administrative rule violation. Punitive discipline will be directly related to the severity of the rule violation; which includes but are not limited to: extra work detail, removal from a work assignment without loss of work time credit, and loss of privileges. The sanctions are to be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories, and consider whether an offender's mental disabilities or mental illness contributed to his behavior.

The offender disciplinary policy outlines major and minor offenses, all with different levels, clearly indicating a formal disciplinary process resulting in administrative findings. Special considerations are required for offenders charged with or suspected of a disciplinary infraction who are developmentally disabled or mentally ill to determine if the disability or illness contributed to the behavior when determining what type of sanction should be imposed, if any; policy 16.03 Inmate Disciplinary Procedures. Punitive discipline will be directly related to the severity of the rule violation; which includes but are not limited to: extra work detail, removal from a work assignment without loss of work time credit, and loss of privileges. The Facility Commander confirmed that the sanctions are to be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories, and consider whether an offender's mental disabilities or mental illness contributed to his behavior.

The agency indicated that the facility will offer counseling for the offender designed to address and correct the underlying reasons or motivations for abuse. An offender can be referred to counseling/programming based on the mental health assessment of the offender abuser. The staff also indicated the offender can be referred to outside treatment/counseling services. During the interviews with medical and mental health staff, they indicated that an inmate's participation is not required as a condition of access to programming or other benefits. This supports the answer provided by the facility on the Pre-Audit Questionnaire.

The policy 1.23 PREA General Order states if an assault occurs in which the staff member is the victim, the inmate shall not be disciplined for sexual contact with the staff member unless there is an investigative finding that the staff member did not consent to the contact. The policy also states all incidents of consensual sexual contact between inmates, in addition to being documented in a disciplinary report, shall be investigated and documented in an incident report. The Inmate Rules and Regulations section in the handbook state that sexual contact between inmates is prohibited and classified as a category I violation.

Policy 16.03 Disciplinary Procedures states inmates who falsely file grievances or make false reports of sexual abuse of any kind shall be subject to disciplinary action. Evidence that the inmate acted in bad faith shall be fully documented in a disciplinary or criminal report. One offender was referred for prosecution during this audit time frame for filing two false reports. The offender alleged sexual abuse by staff members on two occasions. The offender was charged.

There were no administrative findings of offender-offender sexual abuse. There was no criminal finding of guilty for offender-on-offender sexual abuse.

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

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

The agency's policies 13.24 PREA Mandated Medical and Mental Health Services, B-21d PREA, Corizon J-B-05.00 Response to Sexual Abuse outlines that offenders that disclose sexual victimization shall receive all necessary emergency and medical and mental health services. The policy states inmates who provide an affirmative response to either if they had been perpetrated any type of sexual abuse or suffered from sexual victimization, in or out of custody questions shall be offered an evaluation with a medical and/or mental health practitioner with 14 days, at no cost to the inmate and shall be consistent with the level of care provided in the community.

At intake screening, if the inmate has disclosed prior sexual victimization and/or previously perpetrated sexual abuse the inmate is referred for medical and mental health services. The offender will be offered an evaluation with a medical and/or mental health practitioner with 14 days, at no cost to the inmate. Health care staff indicated that if deemed as an emergency or a serious nature, the inmate is seen immediately by medical and mental health. During interviews with medical and mental health staff, they outlined the screening process and confirmed that follow-ups are conducted within the proper time frames. Not all inmates that disclosed victimization during screening indicated they were offered medical and mental health services.

The auditor requested to review a selected number of health case files for offenders that disclosed victimization. The first question occurred when the list only contained only 28 names for the period of 33,234 intakes. This number appeared low in relationship to the number of intakes. From the list, a request to review three files was made. The medical files contained the appropriate notes. The mental health files did not document any contact with the offender in regards to the sexual victimization. This standard was non-compliant when the auditor left the site visit. The agency has addressed this process to ensure assessments are occurring within the appropriate time frame. The agency created a trigger in the electronic medical screening process at intake, it allows the medical staff to automatically create a referral to mental health during the medical screening by checking a box. The referral is sent to all mental health supervisors. If the mental health staff are on duty at intake during the hours of 7:00am to 2:30pm, the assessment will be done immediately in most cases. If not, the mental health supervisors will address the following day and triage based upon current cases and need. The mental health provider has dedicated one staff member to be solely responsible for tracking those reports on a daily basis. This position will maintain a file of all mental health referrals and assessments, ensuring they are performed within the 14 day window. The PREA Coordinator and/or PREA Manager will also monitor the process. To ensure the practice, the auditor requested a list of all intakes that disclosed victimization for a selected week. The agency provided the list which contained 27 offenders for the week. The auditor provided four names from the list for the agency to provide verification the assessments occurred. The agency provided the mental health notes for the offenders that demonstrated the assessment process had occurred in the appropriate timeframe. The agency has met compliance with the standard.

Any information related to sexual victimization or abusiveness that occurred in any correctional facility shall be limited to medical, mental health practitioners, and classification staff. The information shall only be used for medical and mental health treatment plans, or all security and management decisions, including: housing/bed assignments, work assignments, and program and education assignments per policy 13.24 PREA Mandated Medical and Mental Health Services. Information is shared only with classification unit to make the housing/bed assignments, work assignments, and program and education assignments. The agency's philosophy is "need to know/ right to know."

The medical and mental health staff obtains informed consent before reporting prior sexual victimization that did not occur in an institutional setting, per policy 13.24 PREA Mandated Medical and Mental Health Services and B-21d PREA. The auditor was provided examples of completed medical (Corizon) informed consent forms to review. This process was confirmed through interviews with medical and mental health staff, the Facility Commander, and the PREA Coordinator.

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)

The Department’s policies 13.24 PREA Mandated Medical and Mental Health Services, 13.07 Sexual Assaults in Custody, and B-21d PREA indicate that offenders who are victims of sexual abuse shall be afforded access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. The process outlined for the facility indicated when staff becomes aware of a sexual assault, Corizon medical staff shall be notified immediately for a preliminary medical assessment of the inmate’s injuries. Determine the seriousness of the injuries, if injuries are life threatening, request EMS immediately. If a sexual assault or attempted sexual assault has occurred, and the inmate consents, transportation to Highland Hospital shall be provided for the inmate so he/she may be seen by an emergency physician and a forensic medical exam may be performed. All contact with a sexual assault inmate will be professional and nonjudgmental. Staff shall behave in a professional manner consistent with their training. Advise the inmate of services available and that may be provided. If the inmate refuses medical treatment, the Watch Commander or supervisor in charge is notified immediately. The classification unit will be advised of the circumstances. Emergency medical attention is provided through the facility’s medical department. Health care services are provided seven days a week, 24 hours a day. There were no alleged victims of sexual assault who required a forensic exam.

The interview with staff first responder confirmed understanding the responsibilities of the first responder including taking actions to protect the victim and then notifying the shift supervisor. Upon an allegation of sexual abuse, the shift supervisor begins the notifications which include medical and mental health services as outlined in the Institutional Plan for Response to Sexual Abuse. This process was verified through incident reviews, notes within the investigation files, and interviews with staff and medical and mental health practitioners.

The offenders also receive timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, policies J-B-05.00 Response to Sexual Abuse and B-21d PREA. These services are offered through medical immediately and during follow-up appointments. The interviews with medical staff confirmed this process. Treatment services are provided to every victim without any financial costs, policies 13.24 PREA Mandated Medical and Mental Health Services, 13.07 Sexual Assaults in Custody, and B-21d PREA. Offenders interviewed who reported sexual abuse acknowledged there was no cost for the medical and mental treatment related to the incident. Medical and mental health staff also indicated that treatment is provided to the offender with no financial costs.

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)

The agency’s policies 13.07 Sexual Assaults in Custody and B-21d PREA outline medical and mental treatment including assessment, treatment, referral, follow-up, and evaluations to all offenders that have been victims and abusers. The policy states the inmate is brought to the housing unit clinic for a medical evaluation immediately. The medical staff will perform first aid treatment and refer the inmate to the Highland Hospital Emergency for a forensic sexual assault examination if appropriate. Inmates who are sexually abused while in Sheriff’s Office custody will be provided timely information about and access to, emergency contraception, pregnancy tests, and sexually transmitted infections prevention and testing, as appropriate. The inmate will be advised that there is no cost to them for any medical treatment pertaining to the assault, including the forensic medical exam.

The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary referrals for continued care following their transfer to, or placement in, other facilities, or their release from

custody, per policy B-21-d PREA. The health care staff acknowledged that offenders are provided referrals and follow-up information upon return from the hospital and as part of their release process. Policies 13.24 PREA Mandated Medical and Mental Health Services and B-21-d PREA state the offenders will receive medical and mental health services consistent with the community level of care. The medical and mental health staff interviews indicated the treatment provided to offenders is consistent with the community level of care and may be better for accessibility to staff and timely.

Policy 13.24 PREA Mandated Medical and Mental Health Services states inmates who are sexually abused while in Sheriff's Office custody will be provided timely information about and access to, emergency contraception, pregnancy tests, and sexually transmitted infections prevention and testing, as appropriate. If a female inmate becomes pregnant as a result of an abusive act in custody, she will receive timely and comprehensive information about access to all lawful pregnancy related medical services. Prophylactic treatment of venereal diseases is offered to victims of sexual abuse and the offender is scheduled for testing and education. These services are offered through the medical department immediately. Additional education, follow-up treatment, and testing are provided as needed by the medical department. The inmate shall be advised that there is no cost to them for any medical treatment pertaining to the assault, including the forensic medical exam. Interviews with medical and medical health staff, offenders, and file reviews verified and documented the process.

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)

The agency's policy 1.23 PREA General Order outlines the facility will conduct an incident review following every sexual abuse incident involving those in the Sheriff's Office custody, unless the allegation has been determined to be unfounded. Every attempt will be made to insure the review occurs within 30 days of the conclusion of the investigation. The facility shall implement the recommendations or document its reasons for not doing so. The review team shall consist of a member at or above the rank of Lieutenant, a supervisor not involved in the investigation, one of the investigators from the case, and a representative from medical (Corizon) or mental health (Criminal Justice Mental Health). The review team will: consider whether a change to policy or practice is necessary to better prevent, detect, or respond to sexual abuse; consider if the event was motivated by race, ethnicity, gender identity, LGBTI identification, status or perceived status, gang affiliation, or was motivated by other group dynamics at the facility; examine the area where the incident occurred to assess whether physical barriers may enable the abuse; assess the staffing levels in the area during different shifts and assess whether video should be deployed or augmented in the area. The PREA Manager is responsible for preparing a report of the findings, including at a minimum, the team's findings in the previously mentioned areas and any recommendations for improvement. The report shall be submitted to the Facility Commander and forwarded to the facility PREA Compliance Manager. The PREA Coordinator will maintain copies of all reviews. The PREA Manager and PREA Coordinator indicated they review the incident review report for compliance with the standard, to identify any issues or trends that need to be addressed. If there are any issues to address, they would begin the process to determine what actions need to be taken and ensure the recommended actions are appropriate. There have not been any reports of sexual abuse with a finding other than unfounded since June 2015, so no trends have been noted by the facility.

Sexual abuse incident reviews were completed on eighteen (18) cases. The PREA Coordinator provided copies of incident review team reports for review. The review of the files and interviews with the Warden, Incident Review team members, and PREA Manager demonstrates compliance with the standard.

Standard 115.87 Data collection

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

The agency's policy 1.23 PREA General Order states the Sheriff's Office will collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control. The collection process requires the PREA managers to collect all information based on the Survey of Sexual Victimization 2015 Local jail Jurisdictions Summary Form. This information is forwarded to the agency's PREA Coordinator, while maintaining a copy for their files. All data will be securely retained.

It is the responsibility of the agency's PREA Coordinator to compile all the incidents on an annual basis using the form Survey of Sexual Victimization 2015 Local Jail Jurisdictions Summary Form. The information from all the incidents in the prior calendar year will be compiled into an annual report. The report will also include corrective actions along with a comparison to previous year's data. The report is submitted to the Sheriff for his review. Upon approval of the Sheriff, the report is posted on the agency web site. The data will be made public, after proper redaction pursuant to PC293, on the Sheriff's Office web site.

All documents pertaining to investigations shall be securely retained by the agency PREA Coordinator for no less than ten (10) years.

The 2015 Prison Rape Elimination Act Annual Report is available for review on the agency's website. The report is dated January 12, 2016 and documents the review and approval by the Sheriff and Division Commander. The annual report was reviewed as part of the audit process. The Department of Justice has not requested data from the facility.

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)

The agency's policy 1.23 PREA General Order outlines the PREA Manger's responsibilities for collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from the facility. This information is forwarded to the agency's PREA Coordinator, while maintaining a copy. The PREA Coordinator's responsibility is to review the data collected for identifying problems areas, corrective actions taken, and preparing an annual report of findings for the agency. The information from all the incidents in the prior calendar year will be compiled into an annual report. The report will also include corrective actions along with a comparison to previous year's data. The report is submitted to the Sheriff for his review. Upon approval of the Sheriff, the report is posted on the agency web site. Before publishing the annual report, all personal identifiers are redacted pursuant to PC293. The annual report is published on the Sheriff's Office website, www.alamedacountysheriff.org under the Prison Rape Elimination Act tab. The 2015 Prison Rape Elimination Act Annual Report is available for review on the agency's website, as well as, information for the years 2007 through 2015. The report is dated January 12, 2016 and also documents the review and approval by the Sheriff and Division Commander. The annual report was reviewed as part of the audit process.

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)

The agency’s policy 1.23 PREA General Order outlines how the incident based information and aggregate data is collected, properly stored, and securely retained. The PREA Managers responsibilities include collecting statistics regarding allegations of sexual assault, sexual contact, and staff sexual misconduct from the facility. The agency’s aggregate data along with the 2015 Prison Rape Elimination Act Annual Report is available to the public through the agency’s website. Before publishing the annual report, all personal identifiers are removed pursuant to PC293. All documents pertaining to investigations shall be securely retained by the agency PREA Coordinator for no less than ten (10) years, per policy 1.23 PREA General Order.

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.

Barbara King

September 12, 2016

Auditor Signature

Date