Prison Rape Elimination Act (PREA) Audit Report Lockups							
	🗌 Interim	I Final					
	Date of Report	August 18, 2018					
Auditor Information							
Name: Barbara Jo Denison		Email: denisobj@sbcglobal.net					
Company Name: Shamrock Consulting, LLC							
Mailing Address: 2617 Xa	ng Address: 2617 Xavier Ave. City, S		y, State, Zip: McAllen, TX 78504				
Telephone: 956-566-2578		Date of Lockup Visit: July 18, 2018					
Agency Information							
Name of Agency:		Governing Authority or Parent Agency (If Applicable):					
The GEO Group, Inc.		N/A					
Physical Address: One Pa 621 Northwest 53rd St.	ark Place, Suite 700,	City, State, Zip: Boca Rat	ton, FL 33487				
Mailing Address: SAA		City, State, Zip: SAA					
Telephone: 561-893-0101		Is Agency accredited by any organization?  Yes No					
The Agency Is:	Military	Private for Profit	Private not for Profit				
Municipal	County	State	Federal				
Agency mission:GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted in GEO's care.Agency Website with PREA Information:https://www.geogroup.com/PREA							
Agency Chief Executive Officer							
Name: George C. Zoley		Title: Chairman of the Board, CEO and Founder					
Email: gzoley@geogroup.com		Telephone: 561-893-0101					
Agency-Wide PREA Coordinator							
Name: Phebia L. Moreland		Title: Director, Contract Co	ompliance, PREA Coordinator				
Email: pmoreland@geogroup.com		Telephone: 561-999-582	27				

PREA Coordinator Reports to:		Number of Compliance Managers who report to the PREA					
Daniel Ragsdale, Executive Vice President, Contract Compliance			Coordinator 111				
Lockup Information							
Name of Lockup:         Alhambra City Jail							
Physical Address: 211 S. First St., Alhambra, CA 91801							
Mailing Address (if different than	above): SAA						
Telephone Number: 626-57	0-5145						
The Lockup Is:	Military		Private for Profit	Private not for Profit			
Municipal	County		State	Federal			
Lockup Type:	□ Sheriff		Court Holding	Other			
<b>Lockup Mission:</b> The mission of the Alhambra City Police Department is to prevent crime, to protect lives and property, preserve the peace and order in the community and build positive relationships with the community we serve.							
Lockup Website with PREA Infor	mation: https://www	.geog	group.com/PREA				
Have there been any internal or e			🗌 Yes 🛛 No				
accreditations by any other orga							
		Direc	tor				
Name: Arturo Hernandez		Title: Jail Administrator					
Email:     arthernandez@geogroup.com     Telephone:     626-570-5171							
Lockup PREA Compliance Manager							
Name: Arturo Hernandez		Title:	tle: Jail Administrator				
Email: arthernandez@ge	Email: arthernandez@geogroup.com Telephone: 626-570-5171						
Lockup Health Service Administrator							
Name: N/A		Title:	N/A				
Email: N/A Telephone: N/A							
Lockup Characteristics							
Designated Lockup Capacity: 44			nt Population of Lockup: 2				
Number of detainees admitted to lockup during the past				2256			
Number of detainees admitted to lockup during the past 12 months who were tr different community confinement lockup:				1050			
Number of detainees admitted to lockup during the past 12 months whose length of stay in the lockup was for 30 days or more:							

Number of detainees admitted to lockup during the past 12 months whose length of stay in the lockup was for 72 hours or more:						0	
Number of detainees on date of audit who were admitted to lockup prior to August 20, 2012:						0	
Age Range of Population	Adults	□ Juveniles □ You		Yout	uthful detainees		
	36 N/A N/A						
Are youthful detainees housed separately from the adult population					No 🛛 NA		
Number of juveniles/youthful detainees held in the lockup during the past 12 months:						0	
Are detainees housed overnight?							
Average length of	stay or time under supervision:					24 hours	
Lockup Security Level:						Minimum	
Detainee Custody	Levels:					Minimum	
Number of staff currently employed by the lockup who may have contact with detainees:						8	
Number of staff hired by the lockup during the past 12 months who may have contact with detainees:						9	
Number of contracts in the past 12 months for services with contractors who may have contact with detainees:					0		
Physical Plant							
Number of Buildings: 1 Number of Single Cell Holding Areas: 3							
Number of Multiple Cell Holding Areas: 12							
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room, is retention of video, etc.):							
The facility has 49 cameras throughout the jail in common areas, the booking area, the main hallway and in cells. Cameras are equipped with digital privacy screens to prevent cross gender viewing of toilets and showers via cameras. DVR's retain data for up to 13 months.							
Medical							
Type of Medical Lockup:         All medical services provide				provideo	d offsite		
Forensic sexual assault medical exams are conducted at: San Gabriel Valley Medical C					Center		
Other							
Number of contractors and inmates currently working in the lockup:				0			
Number of volunteers, who may have contact with detainees, authorized to enter the lockup:					0		
Number of volunteers and individual contractors currently authorized to enter the lockup:					0		
Number of investigators the agency currently employs to investigate allegations of sexual abuse:					111 agency-wide 1 at this facility		

# **Audit Findings**

## **Audit Narrative**

The PREA audit of the Alhambra City Jail was conducted on July 18, 2018. The Alhambra City Jail is operated by the GEO Group, Inc. The Jail houses male and female detainees awaiting arraignment dates for felony arrests. The facility also has a Pay to Stay Program where sentenced detainees can pay \$100 per day to fulfill their sentence. By court order, detainees in this program are allowed to stay at the jail for 2-4 day blocks for no more than 96 hours each stay. The Alhambra City Jail also provides services to the cities of San Marino, South Pasadena and San Gabriel.

#### PRE-AUDIT PHASE

Pre-audit preparation included a thorough review of agency policy 5.1.2-C, Alhambra City Jail Field Policy Manual 1300.02, the PREA training curriculum, the Pre-Audit Questionnaire and supporting PREA-related documentation provided by the facility to demonstrate compliance to the PREA standards. During this review period questions were answered by Arturo Hernandez, Jail Administrator who is designated as the PREA Compliance Manager for this facility, the Montebello City Jail and the Baldwin Park City Jail. The facility was provided with facility notices in English and Spanish informing detainees of the audit date with my name and address if they wished to send correspondence to me. Detainees were also informed on the notices that correspondence sent to me would be handled like legal mail. There was no PREA-related correspondence received from detainees of the Alhambra City Jail.

Documentation for criminal background checks and related required documentation as well as documentation of PREA training for all employees was forwarded for my review in the PREA files. Review of these files revealed that criminal background checks are being completed for applicants and for employees being considered for a promotion or transfer. All employees are receiving PREA training as part of their pre-service program and annually completing PREA refresher training. Employee files are maintained at GEO's Western Region Office by the Human Resource Manager.

#### **ONSITE AUDIT PHASE**

On the first day of the audit a brief entrance meeting was held with Arturo Hernandez, Jail Administrator/ PREA Compliance Manager, Steve Lechuga, Director of Jails and Phebia Moreland, Director, Contract Compliance PREA Coordinator in attendance, followed by a site review of the facility, accompanied by Arturo Hernandez, Jail Administrator/PREA Compliance Manager.

During the site review locations of cameras, room layout, restrooms and the placement of PREA posters and information was observed. Reporting Options posters and facility notices, in English and Spanish, were found posted in all holding cells and in all housing cells. Facility notices noted the date posted as 6/11/18. Third Party Reporting posters and Sexual Assault Awareness Program posters in English and Spanish were posted in four locations in the facility's hallway.

The number for the Peace Over Violence, an area agency that provides detainees with a reporting hotline and offers victim support services, was dialed on a detainee pay phone. Detainees enter an anonymous pin number (91776) before dialing the phone number (626-793-3385). The call was answered by a Peace Over Violence advocate. Calls to this number are recorded, but only the Chief Program Officer and the Director of Intervention Services would have access to these recordings if it

became necessary for any reason. The number for the RAINN National Sexual Assault Hotline (1-800-656-4673) was also called and the call was forwarded to an advocate of the LA Rape and Battery Hotline. Calls to this number are not recorded and callers can remain anonymous.

There was one male detainee and one female detainee housed at the Alhambra City Jail on the day of the audit. Both detainees were interviewed. They were both aware of the zero-tolerance policy and knew the methods of reporting available to them. They both stated they feel safe from sexual abuse at this facility.

All staff scheduled to work on the day of the audit visit were interviewed for a total of four Jail Officers, the Jail Administrator/PREA Compliance Manager and the GEO Western Region Human Resource Manager, who was interviewed by telephone. The Jail Officers were asked the random staff questions as well as the questions for those that screen for risk of victimization and abusiveness. The Jail Administrator is the Facility Director, the PREA Compliance Manager, and the Facility Investigator, he is responsible for retaliation monitoring, conducts screenings for risk of victimization and abusiveness and is on the Incident Review Team. He was asked the questions related to each of those roles, as well as the random staff questions. All staff interviewed confirmed completing PREA classroom training at pre-service and annual online training through the Learning Management System (LMS). They were knowledgeable of the zero-tolerance policy and knew what steps to take if a detainee alleged abuse to them and to whom to report to.

The PREA Risk Assessments of the two detainees housed at the facility during the audit as well as random assessments of 9 detainees that were housed at the facility during the month of July were reviewed to determine compliance with screening procedures. All forms were found to be complete. Detainees sign on the bottom of the form that they received the PREA pamphlet upon intake to the Alhambra City Jail.

Head Count Sheets, the Jail Log Book and Jail Activity Logs were reviewed while onsite.

In the 12 months preceding the audit, there were no allegations of sexual abuse or sexual harassment reported. If allegations are reported, the Alhambra Police Department would investigate all allegations. In the event that the Alhambra Police Department determines the allegation is not criminal, the allegation may be referred back to the facility for investigation. The Jail Administrator is the facility's trained investigator responsible for administrative investigations of allegations of sexual abuse and sexual harassment in the event that the Alhambra Police Department refers the allegation back to the facility for administrative investigations.

At the conclusion of the audit, an exit meeting was held with Arturo Hernandez, Jail Administrator/PREA Compliance Manager and Phebia Moreland, Director, Contract Compliance PREA Coordinator. Observations and audit findings for the Alhambra City Jail as well as the Montebello City Jail and the Baldwin Park City Jail, both audited the previous day, were discussed. The Jail Administrator/PREA Compliance Manager was thanked for his cooperation prior to the audit visit and during all three audits. He was informed of the process that would follow the audit visits and of GEO's responsibility to publish this final report on the agency's website.

#### POST-AUDIT PHASE

Following the On-Site Audit Phase, all documentation received prior to the on-site visit and documentation received during the On-Site Audit Phase was reviewed. Observations made during the site review of the facility and information gathered through interviews with detainees and staff was also reviewed. Through this review during the Post-Audit Phase, a determination was made of compliance to all of the PREA standards.

## **Lockup Characteristics**

The Alhambra City Jail is located at 211 S. First Street, Alhambra, CA. The Jail is located in the same building as the Alhambra Police Department. The facility is a 44-bed lockup with eight housing cells and seven holding cells. The jail is contained in one hallway with arrestees coming into the jail through a secure sally port and processed at a desk referred to as the Control Area. All individuals receive a PREA Risk Assessment screening when they arrive at the jail. If there are multiple intakes at one time, PREA Risk Assessments are conducted in one of the Holding Cells to provide confidentiality to screening information. Jail Officers review live camera footage and document all activities and movements in the jail and document them in a Jail Log Book. To the left of the Control Area there is a Visitation Room and an Interview Room.

The Alhambra City Jail housing cells 1, 2, 5, 6, 7 and 8 have two sets of bunk beds in each cell with a toilet, a sink, a shower stall with a shower curtain and a pay telephone in each cell. Cells 1, 2 and 8 are used to house females or detainees on the Pay to Stay Program. The windows and glass doors of these cells are tinted halfway up for added privacy.

At the far end of the hallway, housing cells 3 and 4 are located. There is a control panel in the hallway outside of the entry to cells 3 & 4 that controls entry to this area, with another control panel in the Control Area. As you enter into this housing area there is a day room with a table with stools, a television, a pay telephone and a single shower cell with a partial concrete wall for privacy in front of the shower stall and a shower curtain on the shower entry. Cells 3 & 4 have a total of 10 beds in six individual cells. The individual cells are numbered 3A-3F and 4A-4F. Four of the individual cells are two-man cells and two are single cells. All cells in this area have a toilet, a sink and a pay telephone within the cell.

All showers have curtains for privacy and detainees are provided with portable partitions that are placed in front of the toilets to give detainees privacy when toileting in holding and housing cells.

The seven holding cells are identified as Holding Cells A – G. Holding Cells D & E are Sobering Cells and Holding Cell G is a Safety Cell. All holding cells, with the exception of holding cell F, have tinted glass on half of the windows and glass doors. Holding cell F is the only holding cell that has a pay telephone within the cell and English and Spanish PREA Reporting Options posters and Facility Notices were posted on the wall near the telephone.

The facility has 49 cameras located in common areas, the main hallway and in all cells. The camera monitors were reviewed with the Jail Administrator/PREA Compliance Manager. Shower and toilet areas are blocked on the camera monitors. The Alhambra Police Department also has the ability to view the jail's cameras.

The facility currently has one Jail Administrator and seven Jail Officers with vacancies for two Jail Officers. There are five head counts conducted in a 24-hour period (1200, 0300, 0600, 1600 and 2000, and documented on a Head Count Sheet. Jail Officers make security rounds at a minimum of every 30 minutes and document these rounds on Jail Security Logs that are located on clipboards outside of all housing and holding cell doors. The Alhambra Police Department's Watch Commander comes into the jail two or three times each shift to take counts and make security checks. These visits are documented in the Jail Log Book.

## **Summary of Audit Findings**

The audit findings for the audit of the Alhambra City Jail conducted on July 18, 2018 are as follows:

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#### Number of Standards Exceeded:

The facility was found to exceed in the requirements of the following standards: 115.111; 115.117; 115.131 and 115.188.

#### Number of Standards Met: 31

The facility was found to meet all requirements of the following standards: 115.112; 115.113; 115.114; 115.115; 115.116; 115.118; 115.121; 115.122; 115.132; 115.134; 115.141; 115.151; 115.154; 115.161; 115.162; 115.163; 115.164; 115.165; 115.166; 115.167; 115.171; 115.172; 115.176; 115.177; 15.178; 115.182; 115.186; 115.187; 115.189; 115.401 and 115.403.

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#### Number of Standards Not Met:

Summary of Corrective Action (if any) N/A

# PREVENTION PLANNING

# Standard 115.111: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

#### All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

#### 115.111 (a)

- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ⊠ Yes □ No

#### 115.111 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? ⊠ Yes □ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ⊠ Yes □ No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?
   ☑ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- □ **Meets Standard** (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.111 (a):** GEO policy 5.1.2-C and the Alhambra City Jail Field Policy Manual, FM 1300.02 are written policies mandating zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's/facility's approach to preventing, detecting and responding to such conduct. Both policies include definitions of prohibited behaviors and sanctions for those found to participate in these prohibited behaviors. The policies includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of detainees. Both policies were found to be comprehensive and address all provisions of the PREA standards, exceeding in the requirements of this standard.

**115.211 (b):** GEO policy 5.1.2-C, pages 5 & 6, section III-B, outlines the responsibilities of the agency's PREA Coordinator and Alhambra Police Department Policy Manual, section 904, outlines the responsibilities of the PREA Compliance Manager. The Jail Administrator is designated as the PREA Compliance Manager for this facility as well as the Baldwin Park City Jail and the Montebello City Jail Lockups.

In interview with the agency's PREA Coordinator at an earlier date and the PREA Compliance Manager during the on-site audit, both stated that they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards as required

# Standard 115.112: Contracting with other entities for the confinement of detainees

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.112 (a)

If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.) □ Yes □ No ⊠ NA

#### 115.112 (b)

 Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".) □ Yes □ No ⊠ NA

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

**Does Not Meet Standard** (*Requires Corrective Action*)

GEO is a private provider and does not contract for the confinement of its detainees; therefore, this standard is not applicable to this facility.

## Standard 115.113: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.113 (a)

- Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse? ⊠ Yes □ No
- Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse? ⊠ Yes □ No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup? ⊠ Yes □ No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? ☑ Yes □ No
- Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors? ⊠ Yes □ No

#### 115.113 (b)

In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes 

 No
 NA

#### 115.113 (c)

- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns? ⊠ Yes □ No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the lockup's deployment of video monitoring systems and other monitoring technologies? ⊠ Yes □ No
- In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to the resources the lockup has available to commit to ensure adequate staffing levels? ⊠ Yes □ No

115.113 (d)

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.113 (a):** Based on GEO policy 5.1.2-C, pages 6 & 7, section C-1 and FM 1300.02, page 8, section O, the agency/facility has developed and documented a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect detainees against sexual abuse. The agency took into consideration the physical layout of the facility, the composition of the population and the prevalence of substantiated incidents of sexual abuse, and any other relevant factors in the development of the facility's staffing plan. The staffing plan for the Alhambra City Jail includes a Jail Administrator and nine Jail Officers. If at any time, there are vacant positions or call-ins, positions are filled with the use of mandatory overtime and call-in coverage.

**115.113 (b):** According to information provided on the Pre-Audit Questionnaire and on interview with the PREA Compliance Manager, in the past 12 months there have been no deviations from the staffing plan; therefore, this provision of the standard is not applicable to this facility.

**115.113 (c):** Whenever necessary and no less that annually, the staffing plan is reviewed and documented on the *Annual PREA Facility Assessment – Lock-Ups* form. This completed form is submitted to the Corporate PREA Coordinator and the Corporate Divisional Vice President for signature and approval of any recommendations made to the established staffing plan to include the deployment of video monitoring systems and other monitoring technologies or the allocations of additional resources to maintain compliance to the plan. Based on the *Annual PREA Facility Assessment – Lockups* completed each year since the last PREA audit, there have been no recommendations made for changes to the established staffing plan. Per contract, there is always a minimum of two Jail Officer on duty at all times.

**115.113 (d):** If vulnerable detainees are identified through the screening process, security staff will provide vulnerable detainees with heightened protection to include direct sight and sound supervision, single-cell housing and monitored on video by a staff member.

## Standard 115.114: Juveniles and youthful detainees

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.114 (a)

Are juveniles and youthful detainees held separately from adult detainees? (N/A if the lockup does not hold juveniles or youthful detainees (detainees <18 years old).) □ Yes □ No ⊠ NA</p>

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- 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 Alhambra City Jail does not house juvenile and youthful detainees; therefore, this standard is not applicable to this facility.

#### Standard 115.115: Limits to cross-gender viewing and searches

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.115 (a)

 Does the lockup always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
 Xes 
 No

#### 115.115 (b)

 Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches? ⊠ Yes □ No

#### 115.115 (c)

- Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? ⊠ Yes □ No
- Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing? ⊠ Yes □ No

#### 115.115 (d)

 Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status? ⊠ Yes □ No  If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ⊠ Yes □ No

#### 115.115 (e)

- Does the agency train law enforcement staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ⊠ Yes □ No
- Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.115 (a):** Based on review of GEO policy 5.1.2-C, page 11, section I and FM 1300.02, page 9, section Q, 1-4, the agency/facility has policies in place regarding detainee searches. Cross-gender strip searches and cross-gender visual body cavity searches are prohibited except in exigent circumstances or when performed by a medical practitioner.

**115.115 (b):** If it is necessary to conduct a strip search of a detainee at the Alhambra City Jail, the facility must justify and document all cross-gender strip searches and cross-gender visual body cavity searches. According to information provided on the Pre-Audit Questionnaire, in the past 12 months there have been no cross-gender strip searches or cross-gender visual body searches conducted.

**115.115 (c):** The Alhambra City Jail has policies and procedures in place to allow detainees to shower, change clothing and perform bodily functions without staff of the opposite gender viewing them, except in exigent circumstances. Staff of the opposite gender are required to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions or changing clothing. This practice was observed while onsite.

**115.115 (d):** GEO policy 5.1.2-C, pages 11 & 12, section J and FM 1300.02, pages 9 & 10, section Q, 1-7, addresses searches of transgender and intersex detainees. Facilities shall not search or physically examine a transgender or intersex detainee solely to determine their genital status. If the genital status is unknown, it may be determined during private conversation with the individual, by reviewing medical records or by learning this information as part of a broader medical examination conducted in private by a medical practitioner.

**115.115 (e):** All law enforcement staff members have training on conducting searches of crossgender individuals and conducting searches of transgender and intersex individuals in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. Included in the GEO PREA training curriculum is training on searches. Receipt of this training was verified through interviews with staff and in review of staff training records.

# Standard 115.116: Detainees with disabilities and detainees who are limited English proficient

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.116 (a)

- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are deaf or hard of hearing? ⊠ Yes □ No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are blind or have low vision? ⊠ Yes □ No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have intellectual disabilities? ⊠ Yes □ No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have psychiatric disabilities? ⊠ Yes □ No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who have speech disabilities? ⊠ Yes □ No
- Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.) ⊠ Yes □ No
- Do such steps include, when necessary, ensuring effective communication with detainees who are deaf or hard of hearing? ⊠ Yes □ No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ⊠ Yes □ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities? ⊠ Yes □ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills? ⊠ Yes □ No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Are blind or have low vision? ⊠ Yes □ No

#### 115.116 (b)

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?
   ☑ Yes □ No

#### 115.116 (c)

Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?
 Xes 
 No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.116 (a):** Based on GEO policy 5.1.2-C, page 8, section E and FM 1300.02, page 10, section R, the agency and the facility ensure that detainees with disabilities and those who are limited English proficient have an equal opportunity to participate in or benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. FM 1300.02, section R-2, states that if it is determined that a detainee is developmentally disabled or hearing impaired, the detainee would be transported to a facility where an appropriate diagnosis and/or treatment can be made.

**115.116 (b):** Written information is provided to every detainee in formats that ensure detainees with disabilities are able to understand it. Detainees receive the GEO *Sexual Assault Awareness* pamphlet, available in English and Spanish, upon intake to the facility.

**115.116 (c):** Agency and facility policies prohibit detainees to be relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety. The Language Line will used for detainees who

need translation services. The use of detainees under these circumstances must be justified and documented in a written investigative report. In information provided on the Pre-Audit Questionnaire, in the past 12 months, detainees have not been used for this purpose. Jail Officers interviewed knew that detainees were not to be used for this purpose.

## Standard 115.117: Hiring and promotion decisions

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.117 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement lockup, juvenile lockup, or other institution (as defined in 42 U.S.C. 1997)? ☑ Yes □ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been 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 consent or refuse? ⊠ Yes □ No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ⊠ Yes □ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement lockup, juvenile lockup, or other institution (as defined in 42 U.S.C. 1997)?
   ☑ Yes □ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been 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 consent or refuse? ⊠ Yes □ No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Set Yes Description No

#### 115.117 (b)

 Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees? ⊠ Yes □ No

#### 115.117 (c)

 Before hiring new employees, who may have contact with detainees, does the agency: Perform a criminal background records check? ⊠ Yes □ No  Before hiring new employees, who may have contact with detainees, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☑ Yes □ No

#### 115.117 (d)

 Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees? ⊠ Yes □ No

#### 115.117 (e)

 Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees? ⊠ Yes □ No

#### 115.117 (f)

- Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☑ Yes □ No
- Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ⊠ Yes □ No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ⊠ Yes □ No

#### 115.117 (g)

 Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ⊠ Yes □ No

#### 115.117 (h)

 Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) ⊠ Yes □ No □ NA

#### Auditor Overall Compliance Determination

- Exceeds Standard (Substantially exceeds requirement of standards)
- □ **Meets Standard** (Substantial compliance; complies in all material ways with the standard for the relevant review period)

**Does Not Meet Standard** (*Requires Corrective Action*)

**115.117 (a):** GEO policy 5.1.2-C, page 7 section C-2 and FM 1300.02, pages 10 & 11, interview with the Human Resource Director, GEO Western Region Office, and review of employee files were used to verify compliance to this standard. Per policy the agency/facility prohibits hiring or promoting anyone who may have contact with detainees and prohibits enlisting the services of any contractor who may have contact with detainees who have engaged in, been convicted of, or been civilly or administratively adjudicated for engaging in sexual abuse in confinement settings or in the community.

**115.117 (b):** GEO considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees.

**115.217 (c):** The agency requires that all applicants and employees who may have contact with detainees have a criminal background check. Criminal background checks for all potential employees are completed through a contract with Information Discovery Services (IDS). For those considered for promotions or who transfer from another facility, will have an internal background check through GEO conducted by Career Builders. From information provided on the Pre-Audit Questionnaire, in the past 12 months, two criminal background checks were completed.

**115.217 (d):** The Alhambra City Jail does not have any contractors; therefore, this provision of the standard is not applicable to this facility.

**115.217 (e):** The agency conducts criminal background checks through IDS every five years for employees.

**115.217 (f):** The agency asks all applicants and employees who have contact with residents directly about previous sexual misconduct. For consideration for promotions or transfers, employees complete a *PREA Disclosure and Authorization Form Promotions – PREA Related Positions* and another background check is completed as well as a GEO internal PREA verification. At the time of annual performance appraisals, employees complete a *PREA Disclosure and Authorization Form – Annual Performance Evaluation* form.

**115.217 (g):** GEO policy mandates that material omissions regarding sexual misconduct and the provision of materially giving false information are grounds for termination as required by this standard. Employees have a continuing affirmative duty to disclose any sexual misconduct and/or misconduct to the Jail Administrator.

**115.217 (h):** Unless prohibited by law, GEO's Western Region Human Resource Office will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the individual has applied for work.

Human Resource files of all employees of the Alhambra City Jail were reviewed and were found to be complete with documentation showing adherence to standard and agency policy requirements. The Human Resource Director, GEO Western Region Office was very knowledgeable of the agency's hiring and promotion procedures; therefore, the facility was found to exceed in the requirements of this standard.

# Standard 115.118: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.118 (a)

If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse? (N/A if agency/lockup has not acquired a new lockup or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 □ Yes □ No ⊠ NA

#### 115.118 (b)

If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect detainees from sexual abuse? (N/A if agency/lockup has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes 
 No 
 NA

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.218 (a):** GEO policy 5.1.2-C, page 7, section C-3 and facility policy 1300.02, page 8, section O-2, documentation provided for review, observation during site review and interview with the Jail Administrator were used to verify compliance to this standard. Per agency and facility policies, the Alhambra City Jail will consider the effect any new design, acquisition, expansion or modification of physical plant might have on the facility's ability to protect residents from sexual abuse. Since the last PREA audit, there were no new facilities and no substantial expansions or modifications made to the existing facility; therefore, this provision of the standard is not applicable to this facility.

**115.218 (b):** When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology, the agency shall consider how such technology may enhance the agency's ability to protect residents from sexual abuse. Since the last PREA audit, cameras were installed in all housing and holding cells and there were upgrades to existing cameras in the hallway.

# **RESPONSIVE PLANNING**

## Standard 115.121: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.121 (a)

If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ⊠ Yes □ No □ NA

#### 115.121 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ⊠ Yes □ No □ NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/lockup is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ⊠ Yes □ No □ NA

#### 115.121 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside lockup, without financial cost, where evidentiary or medically appropriate? ⊠ Yes □ No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ⊠ Yes □ No
- Has the agency documented its efforts to provide SAFEs or SANEs? ⊠ Yes □ No

#### 115.121 (d)

 If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs? ⊠ Yes □ No

#### 115.121 (e)

If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/lockup is responsible for conducting criminal AND administrative sexual abuse investigations.) ⊠ Yes □ No □ NA

#### 115.121 (f)

• Auditor is not required to audit this provision.

#### **Auditor Overall Compliance Determination**

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.121 (a):** GEO policy 5.1.2-E, pages 6-10, sections D-J outlines the agency's requirements as it applies to this standard. The Alhambra Police Department investigates all allegations of sexual abuse and is required to follow uniform evidence protocols that maximize the potential for obtaining usable physical evidence for administrative and criminal proceedings. In the event that the Alhambra Police Department refers the allegation back to the facility for administrative investigation, the Facility Investigator will also follow a uniform evidence protocol.

**115.121 (b):** The protocol is adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication. As part of the training required in standard 115.131, employees of lockups will receive basic training regarding how to detect and respond to victims of sexual abuse.

**115.121 (c):** Victims of sexual abuse have access to forensic medical examinations. Forensic exams are not performed at this facility. According to FM 1300.02, page 11, section T, all medical services for detainees of the Alhambra City Jail are coordinated through the local fire department. The Watch Commander will contact the Alhambra Fire Department paramedics to respond to the jail for assistance. The paramedics will then make the decision on which facility will be appropriate to handle the situation. The facilities used are the San Gabriel Valley Medical Center, Alhambra Hospital or the Los Angeles County Medical Center. SANE providers are on call 24 hours a day at these facilities to provide exams at no cost to the detainee victim. According to information provided on the Pre-Audit Questionnaire, in the past 12 months, there have been no detainees who have required a forensic exam.

**115.121 (d):** Victim advocacy services are offered to detainee victims of sexual abuse through advocates available at the San Gabriel Valley Medical Center and the Los Angeles Medical Center. Detainees are informed they can contact the Victim Advocacy Services Hotline at 877-209-3049 to request these services.

**115.221 (e):** The agency requests that the Alhambra Police Department follow the requirements of the provisions of this standard.

# Standard 115.122: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.122 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ⊠ Yes □ No

#### 115.122 (b)

- If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? [N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).] ⊠ Yes □ No □ NA
- Does the agency document all such referrals? [N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).] ⊠ Yes □ No □ NA

#### 115.122 (c)

Auditor is not required to audit this provision.

#### 115.122 (d)

Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.122 (a):** GEO policy 5.1.2-E, page 4, section III-A-1 and GEO policy 5.1.2-C, outline the agency's policy and procedures for investigating and documenting incidents of sexual abuse. The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

**115.122 (b):** All allegations of sexual abuse and sexual harassment are referred to the Alhambra Police Department for investigation. According to the FM 1300.02, page 11, section U, the Alhambra Police Department has a protocol describing the responsibilities of the Department in the conduct of investigations of sexual abuse allegations. GEO's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the GEO website at <a href="https://www.geogroup.com/PREA">https://www.geogroup.com/PREA</a>.

In the past 12 months, there were no allegations of sexual abuse or sexual harassment reported at the Alhambra City Jail.

# TRAINING AND EDUCATION

## Standard 115.131: Employee and volunteer training

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.131 (a)

- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment? X Yes □ No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings? ⊠ Yes □ No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?
   ☑ Yes □ No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse? ⊠ Yes □ No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees? ⊠ Yes □ No
- Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with

relevant laws related to mandatory reporting of sexual abuse to outside authorities?  $\boxtimes$  Yes  $\square$  No

#### 115.131 (b)

- Have all current employees and volunteers who may have contact with detainees received such training? ⊠ Yes □ No
- Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures? ⊠ Yes □ No

#### 115.131 (c)

 Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- Exceeds Standard (Substantially exceeds requirement of standards)
- □ **Meets Standard** (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.131 (a):** According to GEO policy 5.1.2-C, page 9, section F-1 and FM 1300.02, page 4, section G, all employees who have contact with detainees will receive training on GEO's Sexually Abusive Behavior Prevention and Intervention Program prior to assignment. New hires complete the DOJ 2017 In-Service PREA Training and all employees have annual in-service PREA training on line through the Learning Management System (LMS). The training curriculum was reviewed and found to include training on all elements of this provision of the standard.

**115.131 (b):** The facility has 10 employees and documentation was reviewed that showed that all 10 employees have completed PREA training. The facility does not have any volunteers.

**115.131 (c):** Staff completing PREA training sign a *PREA Basic Acknowledgement* form (attachment E), acknowledging by their signature they have received and understood the training they received.

In review of staff training records, staff are completing PREA training annually and documentation of completing and understanding the PREA training is being maintained by the facility. The facility was found to exceed in the requirements of this standard. The training curriculum was found to be comprehensive and staff interviews revealed staff are knowledgeable to the agency and facility policies.

# Standard 115.132: Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.132 (a)

■ During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Ves No

#### 115.132 (b)

 Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.132 (a):** Based on GEO policy 5.1.2-C, page 8, section E-b and FM 1300.02, page 5, section I, during the intake process detainees are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Detainees are given the GEO *Sexual Assault Awareness* pamphlet, available in English and Spanish upon arrival to the Alhambra City Jail. Detainees sign on the *PREA Risk Assessment – Lockups* form that they have received the PREA pamphlet. In review of detainee records, this process is in place. Detainees interviewed reported they received the pamphlet upon intake to the facility.

**115.132 (b):** This provision of the standard is not applicable to this facility, as the Alhambra City Jail does not utilize the services of contractors.

## Standard 115.134: Specialized training: Investigations

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.134 (a)

#### 115.134 (b)

 Does this specialized training include: Techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] □ Yes □ No ⊠ NA

- Does this specialized training include: Proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] □ Yes □ No ⊠ NA
- Does this specialized training include: Sexual abuse evidence collection in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).] □ Yes □ No ⊠ NA
- Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).]
   Yes 
   No 
   NA

#### 115.134 (c)

Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).]
 Yes 
 No 
 NA

#### 115.134 (d)

Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.134 (a):** According to GEO policy 5.1.2-C, pages 9 & 10, section F-2 and FM 1300.02, pages 4 & 5, section H, in addition to general training provided to all employees, the agency will ensure that investigators have received training in conducting investigations in confinement settings.

**115.134 (b):** In review of the *PREA Specialized Investigators Training* curriculum, the training 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 required to substantiate a case for administrative action or prosecution referral.

**115.134 (c):** The Jail Administrator/PREA Compliance Manager is the trained Facility Investigator and documentation maintained by the facility shows that he completed the *PREA Specialized Investigators Training* on 8/2/13. Documentation showed he also received general PREA training provided to all employees annually.

**115.134 (d):** The Alhambra Police Department conduct investigations of all allegations of sexual abuse and sexual harassment....../

# SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

### Standard 115.141: Screening for risk of victimization and abusiveness

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.141 (a)

- If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.) □ Yes □ No ⊠ NA
- When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.) □ Yes □ No ⊠ NA

#### 115.141 (b)

If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees?
 (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA

#### 115.141 (c)

In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA

#### 115.141 (d)

- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability? (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA
- Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.) ⊠ Yes □ No □ NA

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.)  $\boxtimes$  Yes  $\Box$  No  $\Box$  NA

#### Auditor Overall Compliance Determination

- $\square$ **Exceeds Standard** (Substantially exceeds requirement of standards)
- $\mathbf{X}$ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- $\square$ 
  - **Does Not Meet Standard** (*Requires Corrective Action*)

115.141 (a): According to GEO policy 5.1.2-C, paged 7 & 8, section D, b-e, if a lockup is utilized to house detainees overnight, all detainees will be screened to assess their risk of being sexually abuse by other detainees or sexually abusive towards other detainees. The Alhambra City Jail houses detainees overnight.

**115.141 (b):** The facility uses GEO's *PREA Risk Assessment – Lockups* objective screening tool to assess detainees risk of being sexually abused by other detainees or sexually abusive towards other detainees.

115.141 (c): The screening tool includes the staff asking detainees about his or her own perception of vulnerability.

**115.141 (d):** The *PREA Risk Assessment – Lockups* form was reviewed and found to include the following criteria:

- 1. Whether the detainee has a mental, physical or developmental disability;
- 2. The age of the detainee:
- 3. The physical build and appearance of the detainee
- Whether the detainee has previously been incarcerated; and 4.
- The nature of the detainee's alleged offense and criminal history. 5.

According to information provided on the Pre-Audit Questionnaire, in the past 12 months 1050 detainees who were held overnight at the Alhambra City Jail were screened for their risk of sexual victimization or risk of sexually abusing other detainees. In interview with staff responsible for initial risk screenings of detainees and in review of detainee records, PREA Risk Assessments are being completed as required.

# REPORTING

## Standard 115.151: Detainee reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.151 (a)

- Does the agency provide multiple internal ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ⊠ Yes □ No

#### 115.151 (b)

- Does the agency also provide at least one way for detainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Ves No
- Does that private entity or office allow the detainee to remain anonymous upon request?
   ☑ Yes □ No

#### 115.151 (c)

- Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ⊠ Yes □ No
- Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? ⊠ Yes □ No

#### 115.151 (d)

 Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.151 (a):** Based on GEO policy 5.1.2-C, page 12, section L-1, each facility will provide multiple ways for detainees to privately report sexual abuse, sexual harassment, retaliation by other detainees or employees for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. FM 1300.02, pages 5 & 6, section J, 1-4, addresses detainee reporting options at the Alhambra City Jail.

**115.151 (b):** Posters in English and Spanish inform detainees that they can tell a staff member in person or in writing or by third party anonymously. Detainees also have access to reporting to a public

or private entity or office that is not part of the agency. They are informed they can contact the Victim Advocacy Services Hotline by calling 877-209-3049, a free and confidential 24-hour reporting hotline that detainees can remain anonymous if they wish.

**115.151 (c):** Employees are to accept reports from detainees and third parties and document all reports promptly.

**115.151 (d):** Staff have access to private reporting by calling the Employee Hotline (866-568-5425) or the Corporate PREA Coordinator (561-999-5827). Information for resident and staff reporting was found on the GEO website (<u>https://www.geogroup.com/PREA</u>. *Third Party Reporting* posters informs employees of their responsibility of reporting sexual abuse and sexual harassment and their reporting options. Staff carry with them a Sexual Abuse First Responder Card, which has the employee hotline number and the website address for anonymous reporting. Staff interviewed knew how to privately report sexual abuse and sexual harassment of detainees.

## Standard 115.154: Third-party reporting

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.154 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- - **Does Not Meet Standard** (*Requires Corrective Action*)

**115.254 (a):** Based on GEO policy 5.1.2-C, page 12, section L-3, the agency has established a method to receive third-party reports of sexual abuse and sexual harassment on behalf of individuals in a GEO facility or program. Information on third party reporting is found on *Third Party Reporting* posters in areas visible to staff and visitors and is made available on the GEO website at <a href="http://www.geogroup.com/PREA">http://www.geogroup.com/PREA</a> (Social Responsibility-PREA Certification Section). Third-party reports can be made in person, in writing, anonymously or by contacting the agency's PREA Coordinator. Detainees interviewed were aware of this method of reporting.

In interview with the Jail Administrator/PREA Compliance Manager and on information reported on the Pre-Audit Questionnaire, during the past 12 months, there have been no reports of sexual abuse or sexual harassment made to the facility by a third party.

# **OFFICIAL RESPONSE FOLLOWING A DETAINEE REPORT**

# Standard 115.161: Staff and agency reporting duties

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.161 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident? ⊠ Yes □ No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?
   Xes 
   No

#### 115.161 (b)

Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment and investigation decisions? ⊠ Yes □ No

#### 115.161 (c)

 If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ⊠ Yes □ No

#### 115.161 (d)

■ Does the agency report all allegations of sexual abuse and sexual harassment, including thirdparty and anonymous reports, to the agency's designated investigators? Z Yes D No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.161 (a):** The agency's requirement on staff reporting duties can be found on pages 12 & 13, section L-3 of GEO policy 5.1.2-A and on pages 6 & 7, section L of FM 1300.02. All staff are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or

sexual harassment and any retaliation against residents or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All allegations of sexual abuse and sexual harassment, including third party and anonymous reports, are reported to the On-Duty Watch Commander, the Support Services Manager and the Jail Administrator/PREA Compliance Manager. Staff interviewed knew their responsibility of reporting and to whom to report.

**115.161 (b):** Apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone.

**115.161 (c):** If the alleged victim is under the age of 18 or considered a vulnerable adult under state statue, GEO will report the allegation to the designated state or local services agency under applicable mandatory reporting laws. The Alhambra City Jail houses adult male and female detainees only, none of whom according to their classified level of care are considered vulnerable adults under the California State Vulnerable Persons Statue; therefore, this provision of this standard is not applicable to this facility.

**115.161 (d):** The Watch Commander is to report to the Alhambra Police Department all allegations of sexual abuse, harassment, retaliation, neglect or violations leading to sexual abuse, harassment or retaliation, including third-party and anonymous reports.

# Standard 115.162: Agency protection duties

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.162 (a)

When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.162 (a):** When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the detainee according to GEO policy 5.1.2-C, pages 12 & 13, section L-3 and page 7, section M-1 of FM 1300.02. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim sensitive, supportive and non-judgmental.

In interview with the Jail Administrator/PREA Compliance Manager, as well as documentation provided in the Pre-Audit Questionnaire, there were no times during the past 12 months that it was necessary for the facility to take immediate action in regards to a resident being in substantial risk of sexual abuse. All Alhambra City Jail staff interviewed knew what to do if they felt a detainee was in risk of sexual abuse.

# Standard 115.163: Reporting to other confinement facilities

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.163 (a)

 Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the lockup that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? ⊠ Yes □ No

#### 115.163 (b)

#### 115.163 (c)

• Does the agency document that it has provided such notification?  $\boxtimes$  Yes  $\Box$  No

#### 115.163 (d)

■ Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- - **Does Not Meet Standard** (*Requires Corrective Action*)

**115.163 (a):** GEO policy 5.1.2-C, page 15, section 4 and FM 1300.02, page 6, section K-7, were used to verify compliance to this standard. Upon receiving an allegation that a resident was sexually abused while confined at another facility, the Watch Commander will notify the head of the facility where the sexual abuse was alleged to have occurred or the appropriate office of the agency where the alleged abuse occurred.

**115.163 (b):** This notification is to occur as soon as possible, but no later than 72 hours of receiving the allegation.

**115.163 (c):** The Watch Commander will document that notification was made and include all actions taken regarding the incident facility PREA Compliance Manager and the agency PREA Coordinator.

**115.163 (d):** The facility will ensure that the allegation is investigated in accordance with the PREA standards.

In interview with the Jail Administrator/PREA Compliance Manager and in information provided on the Pre-Audit Questionnaire, there were no allegations of sexual abuse received from other facilities.

# Standard 115.164: Staff first responder duties

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.164 (a)

- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?
   ☑ Yes □ No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? ⊠ Yes □ No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ⊠ Yes □ No
- Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? ⊠ Yes □ No

#### 115.164 (b)

If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff? ⊠ Yes □ No

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.164 (a):** GEO policy 5.1.2-C, pages 13 & 14, section M-2 and FM 1300.02, pages 7 & 8, section M, outline the procedures for first responders to follow for allegations of sexual abuse and sexual harassment whether that person is a security or non-security staff member.

Per policy, upon learning of an allegation of sexual abuse, the first officer to respond to the report is to separate the alleged victim and abuser, immediately notify the Watch Commander, Jail Administrator/PREA Compliance Manager, Operations Manager and PREA Coordinator. First responders are to preserve and protect the crime scene, not let the alleged victim or abuser take any actions that

could destroy physical evidence if the abuse occurred in a time that still allows for the collection of physical evidence and not reveal to anyone information related to the incident to anyone other than staff involved with investigating the alleged incident.

**115.164 (b):** If the first responder is not an officer, the responder is to request that the alleged victim not take any actions that could destroy physical evidence and notify law enforcement staff.

All staff carry with them a Sexual Abuse First Responder Card affixed to their badges reminding them of the steps to take if they are the first responders to an allegation of sexual abuse and are trained on first responder duties.

Interviews of Jail Officers revealed that they knew the policy and procedures to follow if they were the first responder to an allegation of sexual abuse. They reported that they knew that the alleged victim and abuser must be separated and how to preserve the crime scene and physical evidence. In information provided on the Pre-Audit Questionnaire and in interview with the Jail Administrator/PREA Compliance Manager, in the past 12 months there were no allegations of sexual abuse reported so it was not necessary to implement first responder duties.

## Standard 115.165: Coordinated response

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.165 (a)

- Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse? ⊠ Yes □ No
- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services? ⊠ Yes □ No

#### 115.165 (b)

- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.) ⊠ Yes □ No □ NA
- If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim<sup>1</sup>s potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.) ⊠ Yes □ No □ NA

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- $\boxtimes$ 
  - **Meets Standard** (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.165 (a):** GEO policy 5.1.2-C, page 5, section A-4 and in review of the *Alhambra PREA Coordinated Response Plan* were used to verify that there is a plan in place to coordinate actions to be taken in response to an incident of sexual abuse and sexual harassment. It is the responsibility of the Jail Administrator and the Ranking On-Duty Officer to ensure compliance to the plan.

**115.165 (b):** If the victim is transferred from the lockup to the jail, prison or medical facility, the facility shall, as permitted by law, inform the receiving facility of the incident (in writing) and the victim's potential need for medical or social services, unless the victim requests otherwise.

In interview with the Jail Administrator/PREA Compliance Manager, he knew his responsibility in ensuring the PREA Coordinated Response Plan is carried out when there is an allegation of sexual abuse reported. On information provided in the Pre-Audit Questionnaire, in the past 12 months there were no allegations of sexual abuse reported.

# Standard 115.166: Preservation of ability to protect detainees from contact with abusers

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.166 (a)

Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ⊠ Yes □ No

#### 115.166 (b)

• Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.166 (a):** Based on GEO policy 5.1.2-C, page 5, section A-3, in all cases where the alleged abuser is an employee, there will be no contact allowed between an alleged abuser and an alleged victim pending the outcome of an investigation.

**115.166 (b):** The Alhambra City Jail does not have a collective bargaining agreement. In interview with the Vice President, Risk Management (Agency Head Designee), who stated that the agency would not enter into a collective bargaining agreement or other agreements that would prohibit removing an alleged staff abuser from contact with inmates pending an investigation.

## Standard 115.167: Agency protection against retaliation

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.167 (a)

- Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff? ☐ Yes ☐ No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? ⊠ Yes □ No

## 115.167 (b)

■ Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Zeque Yes Description

## 115.167 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse? ⊠ Yes □ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation? ⊠ Yes □ No

## 115.167 (d)

 If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 ☑ Yes □ No

## 115.167 (e)

• Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
	GEO has as policy to protect detainees who report sexual abuse or sexual harassme

**115.167 (a):** GEO has as policy to protect detainees who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff as outlined in policy 5.1.2-C, pages 16 & 17, section N-1 and in FM 1300.02, pages 8 & 9, section O, 5-13.

**115.167 (b):** The Watch Commander or the authorized designee shall employ multiple protection measures, such as housing changes or transfers for detainees, victims or abusers, removal of alleged staff or detainee abusers from contact with victims and emotional support services for detainees or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place.

**115.167 (c):** The Jail Administrator is responsible for monitoring detainees and staff who report sexual abuse or sexual harassment. Monitoring will also include periodic status checks. If retaliation is suspected, the Jail Administrator will act promptly to remedy the retaliation. For at least 90 days following a report of staff sexual misconduct by another employee, the employee will be monitored every 30 days for at least 90 days. Monitoring will be documented on the *Employee Protection from Retaliation Log* (attachment J). Monitoring will terminate if the allegation is determined to be unfounded.

**115.167 (d):** If another individual who cooperates with sexual abuse or sexual harassment investigation expresses a fear of retaliation, appropriate measures will be taken to protect that individual against retaliation.

In the past 12 months, retaliation monitoring has not been necessary. The Alhambra City Jail has not had any allegations of sexual abuse or sexual harassment.

# INVESTIGATIONS

## Standard 115.171: Criminal and administrative agency investigations

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.171 (a)

• When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/lockup is not

responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).]  $\boxtimes$  Yes  $\Box$  No  $\Box$  NA

## 115.171 (b)

Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134? ⊠ Yes □ No

## 115.171 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ⊠ Yes □ No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
   ⊠ Yes □ No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ⊠ Yes □ No

#### 115.171 (d)

 When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? ⊠ Yes □ No

## 115.171 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as detainee or staff?
   ☑ Yes □ No

## 115.171 (f)

- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? ⊠ Yes □ No

## 115.171 (h)

Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?
 ☑ Yes □ No

## 115.171 (i)

■ Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Ves Does No

## 115.171 (j)

 Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the lockup or agency does not provide a basis for terminating an investigation?
 ☑ Yes □ No

## 115.171 (k)

Auditor is not required to audit this provision.

## 115.171 (I)

 When an outside entity investigates sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? [N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.121(a).] ⊠ Yes □ No □ NA

#### Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.171 (a):** According to GEO policy 5.1.2-C and the FM 1300.02, page 11, section U. The department will promptly and objectively investigate all allegations, including third party and anonymous reports, of sexual abuse and sexual harassment. Only trained investigators will conduct sexual abuse investigations.

**115.171 (b):** The Jail Administrator/PREA Compliance Manager is the trained Facility Investigator and documentation maintained by the facility shows that he completed the *PREA Specialized Investigators Training* on 8/2/13. When interviewed he knew his responsibilities in the conduct of administrative investigations.

**115.171 (c):** The Alhambra Police Department investigate all allegations of sexual abuse and sexual harassment. They will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, shall interview alleged victims, suspected perpetrators and witnesses and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

**115.171 (d):** When the quality of evidence appears to support criminal prosecution, the Alhambra Police Department will conduct compelled interviews only after consulting with prosecutors.

**115.171 (e):** The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as a detainee or staff. A detainee who alleges sexual abuse will not be required to submit to a polygraph test.

**115.171 (f):** The administrative investigation will include an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation shall be documented in a written report and include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

**115.171 (g):** A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. The facility shall request a copy of completed investigative reports.

**115.171 (h):** Substantiated allegations of conduct that appears to be criminal shall be referred to the District Attorney for prosecution.

**115.171 (i):** The agency will retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

**115.171 (j):** The departure of an alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating an investigation.

## Standard 115.172: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.172 (a)

 Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? ⊠ Yes □ No

## Auditor Overall Compliance Determination



- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.172 (a):** The agency will impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Based on GEO policy 5.1.2-E, page 6, section B-2-d and FM 1300.02, page 11, section U-6, the Chief of Police or the City Manager will review a completed investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence.

# DISCIPLINE

## Standard 115.176: Disciplinary sanctions for staff

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.176 (a)

#### 115.176 (b)

 Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ⊠ Yes □ No

## 115.176 (c)

Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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? ⊠ Yes □ No

## 115.176 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies unless the activity was clearly not criminal? ⊠ Yes □ No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? ⊠ Yes □ No

## Auditor Overall Compliance Determination



- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.176 (a):** Employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy as outlined in policy GEO policy 5.1.2-E, page 11, section L-1 and in FM 1300.02, page 13, section X.

**115.176 (b):** Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

**115.176 (c):** Disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.

**115.176 (d):** All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignations, shall be reported to law enforcement and licensing agencies unless the activity was clearly not criminal.

In interview with the Jail Administrator/PREA Compliance Manager and in information provided on the Pre-Audit Questionnaire, in the past 12 months, no staff members were disciplined for violating the agency/facility's sexual abuse or sexual harassment policy.

## Standard 115.177: Corrective action for contractors and volunteers

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.177 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees? ⊠ Yes □ No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ⊠ Yes □ No

## 115.177 (b)

In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the lockup take appropriate remedial measures, and consider whether to prohibit further contact with detainees? ⊠ Yes □ No

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- 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 Alhambra City Jail does not utilize the services of contractors and does not have volunteers; therefore, this standard is not applicable to this facility.

# Standard 115.178: Referrals for prosecution for detainee-on-detainee sexual abuse

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.178 (a)

When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?
 ☑ Yes □ No

## 115.178 (b)

 If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).) ⊠ Yes □ No □ NA

## 115.178 (c)

Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

**115.178 (a):** Based on GEO policy 5.1.2-C, page 17, section O-2 and FM 1300.02, page 13, section X-4, when there is probably cause to believe that a detainee sexually abused another detainee in a lockup, the allegation of conduct is referred to the District Attorney for possible prosecution.

According to information provided on the Pre-Audit Questionnaire and in interview with the Jail Administrator/PREA Compliance Manager, in the past 12 months there have been no allegations reported that a detainee sexually abused another detainee.

## MEDICAL AND MENTAL CARE

# Standard 115.182: Access to emergency medical and mental health services

**Does Not Meet Standard** (*Requires Corrective Action*)

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.182 (a)

## 115.182 (b)

 Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?
 Xes 
 No

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.182 (a):** Based on GEO policy 5.1.2-C, pages 15 & 16, section 5 and FM 1300.02, page 6, section K-9, detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment. Medical services are provided at the San Gabriel Valley Medical Center.

**115.182 (b):** Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

In interview with the Jail Administrator/PREA Compliance Manager and in information provided on the Pre-Audit Questionnaire, there were no allegations of sexual abuse reported in the past 12 months and therefore, no emergency medical or mental health services due to sexual abuse were required.

## DATA COLLECTION AND REVIEW

## Standard 115.186: Sexual abuse incident reviews

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.186 (a)

#### 115.186 (b)

Does such review ordinarily occur within 30 days of the conclusion of the investigation?
 ☑ Yes □ No

## 115.186 (c)

## 115.186 (d)

- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the lockup? Sec Ves Description
- Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Ves No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ⊠ Yes □ No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1) (d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?
   ☑ Yes □ No

## 115.186 (e)

 Does the lockup implement the recommendations for improvement, or document its reasons for not doing so? ⊠ Yes □ No

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

**Does Not Meet Standard** (Requires Corrective Action)

**115.186 (a):** According to GEO policy 5.1.2-C, page 17, section N-2 and FM 1300.02, page 12, section V, the facility is required to conduct a sexual abuse at the conclusion of every sexual abuse investigation of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated.

**115.186 (b):** The review will occur within 30 days of the conclusion of the investigation.

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**115.186 (c):** The Jail Administrator/PREA Compliance Manager and the Operations Manager make up the facility's Incident Review Team, the PREA Coordinator may be consulted as part of the review.

**115.186 (d):** The team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.

Incident reviews are documented on a *PREA After Action Review Report* (attachment J) and forwarded to the Chief of Police and the PREA Coordinator no later than 10 working days after the review. The Jail Administrator/PREA Compliance Manager maintains copies of all completed *PREA After Action Review Reports* and a copy is retained in the corresponding investigative file.

**115.186 (e):** The Chief of Police or the authorized designee will implement the recommendations for improvement, or document its reasons for not doing so.

In interview with the Jail Administrator/PREA Compliance Manager in the past 12 months, there were no allegations of sexual abuse reported. When interviewed, the members of the Incident Review Team knew their responsibilities as they relate to the review of sexual abuse incidents.

## Standard 115.187: Data collection

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.187 (a)

## 115.187 (b)

Does the agency aggregate the incident-based sexual abuse data at least annually?
 ☑ Yes □ No

## 115.187 (c)

■ Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups? ⊠ Yes □ No

## 115.187 (d)

Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?
 ☑ Yes □ No

## 115.187 (e)

 Does the agency also obtain incident-based and aggregated data from every private lockup with which it contracts for the confinement of its detainees? (N/A if agency does not contract for the confinement of its detainees.) □ Yes □ No ⊠ NA

## 115.187 (f)

 Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)
 Yes 

 NO
 NA

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.187 (a) & (c):** In review of GEO policy 5.1.2-C, pages 17 & 18, section P and FM 1300.02, page 12 & 13, section W, GEO collects accurate uniform data for every allegation of sexual abuse at lockups under its direct control. The Jail Administrator/PREA Compliance Manager ensures that the data is compiled and forwarded to the PREA Coordinator on a monthly basis on the *Monthly PREA Incident Tracking Log* (attachment K) In addition to submitting the *Monthly PREA Incident Tracking Log*, the Jail Administrator/PREA Compliance Manager is to ensure that a PREA Survey is created, updated and submitted for review and approval in the PREA Portal for every allegation of sexual abuse, sexual harassment and sexual activity.

The incident-based data collected includes, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS).

115.187 (b): GEO aggregates the incident-based sexual abuse data at least annually.

**115.187 (d):** GEO maintains, reviews and collects data as needed from available incident-based documents, including reports, investigation files and sexual abuse incident reviews.

**115.187 (e):** This provision of the standard is not applicable to this facility. GEO does not contract for the confinement of its detainees.

**115.187 (f):** Upon request, GEO will provide all data from the previous calendar year to the Department of Justice no later than June 30.

## Standard 115.188: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.188 (a)

- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☑ Yes □ No
- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?
   Xes 
   No
- Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each lockup, as well as the agency as a whole? ⊠ Yes □ No

## 115.188 (b)

 Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse ⊠ Yes □ No

## 115.188 (c)

Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? ⊠ Yes □ No

## 115.188 (d)

 Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup? ☑ Yes □ No

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- □ **Meets Standard** (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.188 (a):** Based on GEO policy 5.1.2-C, page 18, section P-2, FM 1300.02, page 12, section W, 5-7 and on interview with the PREA Coordinator, the agency reviews all of the data collected from all of its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training. The PREA Coordinator stated that a database program is used at the corporate level and monitored by a Data Specialist.

**115.188 (b):** The PREA Coordinator reviews the data collected to identify problem areas, take corrective action on an ongoing basis and prepare an annual report of the findings and corrective actions for each facility and the agency as a whole. The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in

addressing sexual abuse. The Annual PREA Report provides an excellent overview of the agency's efforts in the prevention of sexual abuse and sexual harassment in its facilities and therefore, exceeds in the requirements of this standard.

**115.188 (c):** The PREA Coordinator forwards the annual report to the Senior Vice President of US Corrections for his signature and approval. The report is then made public on the GEO website at <a href="https://www.geogroup.com/PREA">https://www.geogroup.com/PREA</a>. The most recent report for 2017 data was found posted on the agency's website.

**115.188 (d):** The PREA Coordinator redacts specific material from the reports and indicates the nature of the material redacted.

## Standard 115.189: Data storage, publication, and destruction

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.189 (a)

Does the agency ensure that data collected pursuant to § 115.187 are securely retained?
 ☑ Yes □ No

## 115.189 (b)

■ Does the agency make all aggregated sexual abuse data, from lockups under its direct control and private agencies with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Simes Yes Does No

## 115.189 (c)

 Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ⊠ Yes □ No

## 115.189 (d)

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)



**Does Not Meet Standard** (*Requires Corrective Action*)

**115.189 (a):** GEO ensures that data collected pursuant to standard 115.187 are securely retained In interview with the PREA Coordinator, the data that is retained in the database program has restricted

access. The PREA Compliance Managers and facility investigators have access to their facility's information only.

**115.189 (b):** GEO makes all aggregated sexual abuse data, from facilities under its direct control readily available to the public annually on their website at <a href="https://www.geogroup.com/PREA">https://www.geogroup.com/PREA</a>.

**115.189 (c):** Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

**115.189 (d):** All data collected is securely retained for at least 10 years after the date of the initial collection unless federal state or local law requires otherwise.

# AUDITING AND CORRECTIVE ACTION

## Standard 115.401: Frequency and scope of audits

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.401 (a)

During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) ⊠ Yes □ No

## 115.401 (b)

- Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) ⊠ Yes □ No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the second year of the current audit cycle.) ⊠ Yes □ No □ NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) □ Yes □ No ⊠ NA

## 115.401 (h)

Did the auditor have access to, and the ability to observe, all areas of the audited facility?
 ☑ Yes □ No

## 115.401 (i)

Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ⊠ Yes □ No

## 115.401 (m)

Was the auditor permitted to conduct private interviews with inmates, detainees, and detainees?
 ☑ Yes □ No

#### 115.401 (n)

#### Auditor Overall Compliance Determination

_	standard for the relevant review period)
$\boxtimes$	Meets Standard (Substantial compliance; complies in all material ways with the
	Exceeds Standard (Substantially exceeds requirement of standards)

**115.401 (a):** Based on GEO policy 5.1.2-C, page 18, section Q, during the three-year period starting on August 20, 2013, and each three-year period thereafter, GEO's Contract Compliance Department ensures that a PREA auditor who has been certified through the Department of Justice audits each facility at least once. The Alhambra City Jail's initial PREA audit was in May 2015 by a DOJ certified PREA auditor. This audit, conducted three years after the initial PREA audit, was conducted by me, a DOJ certified PREA auditor.

**115.401 (b):** According to GEO's PREA Coordinator, during the three-year period beginning on August 20, 2013, GEO ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years.

**115.401 (f):** I received and reviewed all relevant agency-wide policies and procedures during the onsite audit phase and while on-site.

**115.401 (g):** I reviewed a sampling of relevant documents and other records and information for the most recent one-year period.

**115.401 (h):** During the audit, I was allowed access to all areas of the Alhambra City Jail.

**115.401 (i):** I was permitted to request and received copies of relevant documentation.

**115.401 (j):** I have retained all documentation relied upon to make audit determinations. The documentation will be provided to the Department of Justice upon request.

**115.401 (k):** I interviewed all staff that were scheduled to work during the on-site audit and the two detainees who were assigned to the Alhambra City Jail.

**115.401 (I):** I reviewed camera monitors with the Jail Administrator/PREA Compliance Manager.

**115.401 (m):** I was permitted to conduct private interviews with detainees and staff in an area that ensured confidentiality to our conversation.

**115.401 (n):** Detainees were notified six weeks prior to the onsite audit on posted facility notices in English and Spanish that they could send confidential correspondence to me and were given my name and mailing address. I did not receive any correspondence from detainees of the Alhambra City Jail.

## Standard 115.403: Audit contents and findings

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.403 (f)

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single lockup agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ⊠ Yes □ No □ NA

## Auditor Overall Compliance Determination

- **Exceeds Standard** (Substantially exceeds requirement of standards)
- Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- **Does Not Meet Standard** (*Requires Corrective Action*)

**115.403 (a):** In compliance with the National PREA Standards, I certify by my signature in the *Auditor's Certification* Section of this report that no conflict of interest exists with my ability to conduct this audit.

**115.403 (b):** In thorough review of GEO's policies, as well as facility policies and procedures were found to comply with relevant PREA standards.

**115.403 (c):** For each PREA standard, I made a determination of a finding of Exceeds Standard, Meets Standard or Does Not Meet Standard. See page 7 for a summary of my audit findings for each of the PREA standards.

**115.403 (d):** This report describes the methodology, sampling sizes and basis for my conclusions as required.

**115.403 (e):** I have redacted any personal identifiable resident or employee information, but I can provide such information to GEO or the Department of Justice upon request.

**115.403 (f):** Per agency policy and standard requirements, GEO ensures me that this final report will be published on their website at (<u>https://www.geogroup.com/PREA</u>) to be available to the public

# 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 detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

Barbara Jo Denison Auditor Signature August 18, 2018\_\_\_\_\_ Date