



SHERIFF

HARDEE COUNTY

Sheriff Arnold Lanier

PREA – PRISON RAPE ELIMINATION ACT OF 2003 PROPOSED NATIONAL PREA STANDARDS

Prevention Planning (PP)

PP-1 – Zero Tolerance of Sexual Abuse:

1. Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse?
2. Does the agency ensure that all of its facilities comply with the PREA standards?
3. Does the agency employ or designate a PREA coordinator to develop, implement, and oversee agency efforts to comply with the PREA standards?

PP-2 – Contracting with other entities for the confinement of inmates:

1. Does the public agency contract for the confinement of inmates only with private agencies and other entities, including other government agencies that agree to adopt and comply with the PREA standards?
2. Do all contracts and contract renewals include an obligation to adopt and comply with the PREA standards?
3. Do all new contracts and contract renewals specify that the public agency will monitor the entity's compliance with the PREA standards as part of its monitoring of the entity's performance?

PP-3 – Inmate Supervision:

1. Does security staff provide the supervision of inmates necessary to protect them from sexual abuse?
2. Do the upper management officials responsible for reviewing critical incidents examine areas in the facility where sexual abuse has occurred to assess the following?
 - a. Physical barriers that may have enabled the abuse
 - b. Adequacy of staffing levels in those areas during different shifts
 - c. Monitoring technology needs
3. When problems or needs are identified, does the agency take corrective action?

PP-4 – Limits to cross-gender viewing and searches:

1. Except in the case of emergency, does the facility prohibit cross-gender searches of the following types?
 - a. Strip
 - b. Visual body cavity
2. Except in the case of an emergency or other extraordinary or unforeseen circumstances, does the facility restrict cross-gender viewing by non-medical staff of inmates who are nude or performing bodily functions?
3. Except in the case of emergency or other extraordinary or unforeseen circumstances, does the facility restrict cross-gender pat-down searches?
4. Are examinations of transgender individuals to determine their genital status conducted only by medical practitioners in private settings and only when an individual's genital status is unknown?

PP-5 – Accommodating inmates with special needs:

1. Are all LEP, deaf and disabled inmates able to report sexual abuse to staff directly, through interpretive technology, or through non-inmate interpreters?
2. Are accommodations made to convey all written information about sexual abuse policies, including how to report sexual abuse, verbally to inmates with limited reading skills or who are visually impaired?

PP-6 – Hiring and Promotion Decisions:

1. Consistent with Federal, State, and local law, does the agency make it best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse?
2. Does the agency disqualify applicants or employees being considered for promotion upon learning the following?
 - a. Any history of substantiated allegations of sexual abuse in an institutional setting
 - b. That they have engaged in sexual activity in the community facilitated by force, the threat of force, or coercion
3. Does the agency run criminal background checks for all applicants and employees being considered for promotion?
4. Does the agency carefully consider any history of criminal activity at work or in the community, including the following?
 - a. Any convictions for domestic violence
 - b. Any convictions for stalking
 - c. Any convictions for sex offenses committed in the community
5. Does the agency ask all applicants and employees directly about previous misconduct during interviews and reviews?

PP-7 – Assessment and use of Monitoring Technology:

1. Does the agency use video monitoring systems and other cost-effective and appropriate technology to supplement its sexual abuse prevention, detection, and response efforts?
2. At least annually, does the agency assess the feasibility of and need for new or additional monitoring technology and develop a plan for securing such technology?

Response Planning (RP)

RP-1 – Evidence Protocol and Forensic Medical Exams:

1. Has the agency developed a written protocol adapted from or otherwise based on the U.S. Department of Justice's "A National Protocol for sexual Assault Medical Forensic Examinations, Adults/Adolescents," any subsequent updated editions, or similarly comprehensive and authoritative protocols developed after 2004?
2. Does the facility provide victims of inmate-on-inmate sexually abusive penetration or staff-on-inmate sexually abusive penetration with access to a forensic medical exam?
3. Are all forensic medical exams provided by the facility performed by a qualified forensic medical examiner?
4. Are forensic medical exams provided free of charge to the victim?
5. Does the facility make available a victim advocate to accompany the victim through the forensic medical exam process?

RP-2 – Agreements with Outside Public Entities and Community Service Providers:

1. Does the agency maintain an agreement or attempt to enter into an agreement with an outside public entity or office that is able to receive and immediately forward inmate reports of sexual abuse to facility heads?
2. Does the agency maintain or attempt to enter into agreements with community service providers that are able to do the following?
 - a. Provide inmates with confidential emotional support services related to sexual abuse
 - b. Help victims of sexual abuse during their transition from incarceration to the community
3. Does the agency maintain copies of agreements or documentation showing attempts to enter into agreement?

RP-3 – Agreements with Outside Law Enforcement Agencies:

1. If the agency does not have the legal authority to conduct criminal investigations or has elected to permit an outside agency to conduct criminal or administrative investigations of staff or inmates, has the agency established or attempted to establish a written MOU or other agreement specific to investigations of sexual abuse with the Law Enforcement Agency responsible for conducting investigations?
2. If the agency confines inmates under the age of 18 or other inmates who fall under State and local vulnerable persons statutes, has the agency established or attempted to establish an MOU with the designated State or local services agency with the jurisdiction and authority to conduct investigations related to the sexual abuse of a vulnerable persons within confinement facilities?
3. Does the agency maintain a copy of the agreement or documentation showing attempts to enter into an agreement?

Not Applicable – Sheriff's Office has legal authority to conduct criminal investigations.

RP-4 – Agreements with the Prosecuting Authority:

1. Has the agency established or attempted to establish a written MOU or other agreement with the authority responsible for prosecuting violations of criminal law?
2. Does the agency maintain a copy of the agreement or documentation showing attempts to enter into an agreement?

Training and Education (TR)

TR-1 – Employee Training:

1. Do employees receive training necessary to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and relevant Federal, State, and local law?
2. Does the agency train all employees to communicate effectively and professionally with all inmates?
3. Does the agency train all employees on the following topics?
 - a. An inmate's right to be free from sexual abuse
 - b. The right of inmates and employees to be free from retaliation for reporting sexual abuse
 - c. The common reactions of sexual abuse victims
4. Does the agency provide periodic refresher training to ensure that all employees are educated on the agency's most current sexual abuse policies and procedures?
5. Following training, does the agency require employees to sign documentation stating that they understand the training they have received and maintain documentation of these signatures.

TR-2 – Volunteer and Contractor Training:

1. Does the agency ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse prevention, detection, and response policies and procedures; the PREA standards; and relevant Federal, State, and local Law?
2. Does the agency tailor its training for volunteers and contractors based on the services they provide and the level of contact they have with inmates?
3. Are all volunteers and contractors who have contact with inmates notified of the agency's zero tolerance policy regarding sexual abuse?
4. Are all volunteers trained in how to report sexual abuse to security staff and/or other parties, when appropriate?
5. Following training, does the agency require volunteers and contractors to sign documentation stating that they understand the training they have received and maintain documentation of these signatures?

TR-3 – Inmate Education:

1. During the intake process, does staff inform inmates of the agency's zero tolerance policy regarding sexual abuse.
2. During the intake process, does staff tell inmates how to report incidents of suspicions of sexual abuse?
3. Does the agency provide comprehensive education to inmates within a reasonably brief period of time following the intake process?
4. Does the comprehensive education for inmates include the following topics?
 - a. An inmates right to be free from sexual abuse and free from retaliation fro reporting abuse
 - b. The dynamics of sexual abuse in confinement
 - c. The common reactions of sexual abuse victims
 - d. Agency sexual abuse response policies and procedures
5. Does the agency provide periodic refresher training to ensure that all inmates are educated on the agency's most current sexual abuse policies and procedures?
6. Does the agency make training information available in formats accessible to all inmates, including those who are LEP, deaf, visually impaired, or otherwise disabled and inmates who have limited reading skills?
7. Does the facility verify inmate attendance at training sessions and maintain this written verification?

TR-4 – Specialized Training: Investigations:

1. Does the agency ensure that all agency investigators conducting sexual abuse investigations have received training in conducting such investigations in confinement settings?
2. Does specialized training for sexual abuse investigations include the following?
 - a. Techniques for interviewing sexual abuse victims
 - b. Proper use of Miranda – and – Garrity – type warnings
 - c. Sexual abuse evidence collection in confinement settings
 - d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral
3. Does the agency verify that investigators have completed specialized training in conducting sexual abuse investigations and maintain written verification?

TR-5 – Specialized Training: Medical and Mental Health Care:

1. Does the agency ensure that all full and part time medical and mental health care practitioners working in its facilities have been trained in how to detect and assess signs of sexual abuse?
2. Does the agency ensure that all full and part time medical practitioners working in it facilities have been trained in how to preserve physical evidence??
3. Does the agency ensure that all full and part time medical practitioners working in it facilities have been trained to respond effectively and professionally to all victims of sexual abuse?
4. Does the agency provide training in how and to whom to report allegations or suspicions of sexual abuse?
5. Does the agency verify that all full and part time medical and mental health practitioners have received specialized training in detecting, assessing, and responding to sexual abuse victims and maintain this written verification?

Screening for Risk of Sexual Victimization and Abusiveness (SC)

SC-1 – Screening for Risk of Victimization and Abusiveness:

1. Are all inmates screened during intake, the initial classification process, and at all subsequent classification reviews to assess their risk of being sexually abused by other inmates and/or their risk of being sexually abusive toward other inmates?
2. Does the facility provide employees with a written screening instrument tailored to male or female populations, depending on the makeup of the facilities population?
3. Do Screening instruments for risk of sexual victimization for male inmates include the following criteria?
 - a. Mental or physical disability
 - b. Young age
 - c. Slight build
 - d. First incarceration in jail or prison
 - e. Nonviolent history
 - f. Conviction for sex offense against an adult or child
 - g. Sexual orientation of gay or bisexual
 - h. Gender nonconformance (e.g. transgender or intersex identity)
 - i. Prior sexual victimization
 - j. Inmates own perception of vulnerability
4. Do screening instruments for risk of being sexually abusive for male inmates include the following criteria?
 - a. Prior acts of sexual abuse
 - b. Prior convictions for violent offenses
5. Do screening instruments for risk of sexual victimization for female inmates include the following criteria?
 - a. Prior sexual victimization
 - b. Inmate's own perception of vulnerability
6. Do screening instruments for risk of being sexually abusive for female inmates include the following criteria?
 - a. Prior acts of sexual abuse
7. Are screening instruments available to the public upon request?

SC-2 – Use of Screening Information:

1. Do employees use information from the risk screening to inform housing, bed, work, education, and program assignments?
2. Does the facility make individualized determinations about how to ensure the safety of each inmate, including lesbian, gay, bisexual, transgender, or other gender nonconforming inmates?
3. Does the facility ensure that lesbian, gay, bisexual, transgender, or other gender nonconforming inmates are not placed in particular facilities, units, or wings solely on the basis of their sexual orientation, genital status, or gender identity?
4. Does the facility separate those at high risk of being victimized from those at high risk of being abusive?
5. Are inmates at high risk of sexual victimization placed in segregated housing only as a last resort and only until other means of separation are arranged?
6. To the extent possible, do inmates at high risk of being sexually victimized have access to the same programs, education, and work opportunities as the general population?

Reporting (RE)

RE-1 – Inmate Reporting:

1. Does the facility provide internal ways for inmates to report easily, privately, and securely sexual abuse, retaliation by other inmates or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse (e.g., locked drop boxes in common areas for reports or requests; grievance procedures; sick-call systems; access to a central or headquarters office)? (Please attach documentation explaining the specific internal reporting mechanisms the facility has in place.)
2. Does the facility provide at least one way for inmates to report sexual abuse to an outside public entity or office not affiliated with the agency that has agreed to receive reports and forward them to the facility head, except when the inmate requests confidentiality (e.g., ombudsperson; outside law enforcement agency; inspector general's office; attorney general's office) (RP-2) (Please attach documentation explaining the specific outside reporting mechanism(s) the facility has made available to inmates.)
3. Does staff accept reports made verbally, in writing, anonymously, and by third parties
4. Does staff immediately put into writing any verbal reports

RE-2 – Exhaustion of Administrative Remedies:

1. Does agency policy reflect that an inmate has exhausted administrative remedies with regard to a claim of sexual abuse under the following circumstances?
 - a. When the agency makes a final decision on the merits of the report of abuse (regardless of whether the report was made by the inmate, made by a third party, or forwarded from an outside official or office) or
 - b. When 90 days have passed since the report was made, whichever occurs sooner
2. Does agency policy reflect that an inmate seeking immediate protection from imminent sexual abuse has exhausted administrative remedies 48 hours after notifying any agency staff member of his or her need for protection.

RE-3 – Inmate Access to Outside Confidential Support Services:

1. In addition to providing on-site mental health care services, does the facility provide inmates with the current mailing addresses and telephone numbers, including toll-free hotline numbers, of local, state, and/or national victim advocacy or rape crisis organizations? (Please attach documentation explaining how the facility provides inmates with access to outside confidential support services related to sexual abuse.)
2. Are inmates able to communicate with outside victim advocates privately in settings in which conversations cannot be overheard?
3. To ensure privacy of communications, is staff prohibited from reading correspondence to or from victim advocates.
4. Does the facility explain to inmates, prior to giving them access to outside support services, the rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including limits to confidentiality under relevant Federal, State, or local law?

RE-4 – Third Party Reporting:

1. Does the facility receive and investigate all third party reports of sexual abuse?
2. At the conclusion of the investigation, does the facility notify in writing the third-party individual who reported the abuse and the inmate named in the third party report of the outcome of the investigation.
3. Does the facility distribute publicly information on how to report abuse on behalf of an inmate?

Official Response Following an Inmate Report (OR)

OR-1 – Staff and Facility Head Reporting Duties:

1. Has the agency notified staff members that they are required to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse that occurred in an institutional setting, including any knowledge of retaliation against inmate or staff who reported abuse and any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or retaliation?
2. Has the agency notified staff members that they are required to limit information related to any incident of sexual abuse to those who need to know, as specified in agency policy, to make treatment, investigation, and other security and management decisions?
3. Has the agency notified medical and mental health practitioners of their reporting duties, including their duty to inform inmates of the practitioners' duty to report at the initiation of services?
4. If the victim is under the age of 18 or considered a vulnerable adult under State or local vulnerable persons statute, does the facility head report the allegation to the designated State or local services agency under applicable mandatory reporting laws?

OR-2 – Reporting to other Confinement Facilities:

1. When the facility receives an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility where the report was made notify in writing the head of the facility where the alleged abuse occurred?
2. If the facility head receives notice that a former inmate has alleged sexual abuse while confined at his or her facility, does he or she ensure that the allegation is investigated?

OR-3 – Staff First Responder Duties:

1. Has the facility notified security staff that upon learning of an incident of sexual abuse that occurred within a time period that still allows for the collection of physical evidence, they are required to separate victims from abusers, seal and preserve any crime scene(s); and instruct victims not to wash, brush teeth, change clothes, urinate, defecate, smoke, drink, or eat?
2. Has the facility notified non-security staff members that upon learning of an incident of sexual abuse, not to wash, brush teeth, change clothes, urinate, defecate, smoke, drink, or eat and then notify security staff?

OR-4 – Coordinated Response:

1. Are all actions taken in response to an incident of sexual abuse coordinated among staff first responders, medical, and mental health practitioners, investigators, and facility leadership?
2. Does the facility's coordinated response ensure the victims receive all necessary immediate and ongoing medical, mental health, and support services?
3. Does the facility's coordinated response ensure that investigators are able to obtain usable evidence to substantiate allegations and hold perpetrators accountable?

OR-5 – Agency Protection Against Retaliation:

1. Does the agency employ the following measures to protect inmates and staff from retaliation for reporting sexual abuse?
 - a. Housing changes or transfers for inmate victims or abusers
 - b. Removal of alleged staff or inmate abusers from contact with victims
 - c. Employee assistance services or other resource for staff who may need psychological or emotional support
2. Does the agency monitor the conduct and/or treatment of inmates or staff who have reported sexual abuse or cooperated with investigations, including any inmate disciplinary reports, housing changes, or program changes, for at least 90 days following their report or cooperation to see if there are changes that may suggest possible retaliation by inmates or staff?
3. When changes have been identified, does the agency discuss those changes with the appropriate inmate or staff member as part of its efforts to determine if retaliation is taking place?
4. When retaliation has been confirmed, does the agency immediately take steps to protect the inmate or staff member?

Investigations (IN)

IN-1 – Duty to Investigate:

1. Does the facility investigate all allegation of sexual abuse from all sources, including third party and anonymous reports?
2. Does the facility notify victims and other complainants in writing of investigation outcomes and any disciplinary or criminal sanctions?
3. Are all investigations carried through to completion, regardless of whether the alleged abuser or victim remains at the facility?

IN-2 – Criminal and Administrative Agency Investigations:

1. Are investigations of allegations of sexual abuse conducted only by investigators who have received special training in sexual abuse investigations (TR-4)?
2. When outside agencies investigate sexual abuse, does the facility keep abreast of the investigation and cooperate with outside investigators (RP-3)?
3. Are investigations of allegations of sexual abuse initiated and completed within prompt timeframes established by the facility?
4. Do investigations include a review of all direct and circumstantial evidence, including physical and DNA evidence when available; interviews of alleged victims, suspected perpetrators, and witnesses; and prior complaints and reports of sexual abuse or misconduct involving the suspected perpetrator?
5. Does the facility contact prosecutors when the quality of evidence appears to support criminal prosecution to determine whether compelled interviews may be an obstacle for subsequent criminal prosecution?
6. Are investigative findings based on the analysis of the evidence gathered and a determination of its probative value?
7. Do investigators assess the credibility of a victim, suspect, or witness on an individualized basis, rather than using the person's status as inmate or staff to assess credibility?
8. Do investigations include an effort to determine whether staff negligence or collusion enabled the abuse to occur?
9. Are administrative investigations documented in written reports that include a description of the physical and testimonial evidence and the reasoning behind credibility assessments?
10. Are criminal investigations documented in written reports that include a description of the physical, testimonial, and documentary evidence and provides a proposed list of exhibits?
11. Are substantiated allegations of conduct that appear to be criminal referred for prosecution?

IN-3 – Evidence Standard for Administrative Investigations:

1. Are allegations of sexual abuse substantiated if supported by a preponderance of the evidence?

Discipline (DI)

DI-1 – Disciplinary Sanctions for Staff:

1. When staff has violated agency sexual abuse policies, has the staff member received sanctions up to and including termination?
2. Do the disciplinary sanctions imposed indicate that the presumptive disciplinary sanction for staff who has engaged in sexually abusive contact or penetration is termination?
3. Does the agency report to law enforcement agencies and any relevant licensing bodies all individuals terminated by the agency for violating agency sexual abuse policies?

DI-2 – Disciplinary Sanctions for Inmates:

1. When there has been an administrative ruling of inmate-on-inmate sexual abuse or a criminal finding of guilt for inmate-on-inmate sexual abuse, is the inmate perpetrator subject to disciplinary sanctions that are commensurate with the nature of the abuse committed, the inmate's disciplinary history, and sanctions meted out for comparable offenses by other inmates with similar histories?
2. Does the disciplinary process include consideration of any mental disabilities or mental illness that may have contributed to the abuse in determining the appropriate disciplinary sanction?
3. Do possible sanctions include interventions designed to address and correct underlying reasons or motivation for the abuse, such as therapy, counseling, or other programs?

Medical and Mental Health Care (MM)

MM-1 – Medical and Mental Health Screenings – History of Sexual Abuse:

1. Do qualified medical or mental health practitioners ask questions about prior sexual victimization and abusiveness during medical and mental health reception and intake screenings?
2. If an inmate discloses prior sexual victimization or abusiveness, whether it occurred in an institutional setting or in the community, during a medical or mental health reception or intake screening, does the practitioner provide appropriate referral for treatment based on his or her reasonable professional judgment?
3. Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff, as determined by agency policy and Federal, State, or local law, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments?
4. Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?

MM-2 – Access to emergency medical and mental health services:

1. Do inmates have timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
2. Are treatment services provided free of charge to the victim?
3. Are treatment services provided regardless of whether the victim names the abuser?
4. If no qualified medical or mental health practitioners are on duty at the time a report is made, do security staff first responders take preliminary steps to protect the victim (OR-3) and immediately notify the appropriate medical and mental health practitioners?

MM-3 – Ongoing medical and mental health care for sexual abuse victims and abusers:

1. Does the facility provide ongoing medical and/or mental health evaluation and treatment to all known victims of sexual abuse?
2. Does the evaluation and treatment of victims include the following?
 - a. Appropriate follow-up services
 - b. Treatment Plans
 - c. When necessary, referrals for continued care for sexual abuse victims following their release from custody
3. Does the level of medical and mental health care provide to inmate victims match the level of care generally accepted by the medical and mental health professional communities?
4. Does the facility conduct a mental health evaluation of all known abusers?
5. Does the facility provide treatment for abusers, as deemed necessary by qualified mental health practitioners?

Data Collection and Review (DC)

DC-1 – Sexual Abuse Incident Reviews:

1. Does a team of upper management officials, with input from line supervisors, investigators, and medical/mental health practitioners, review the details of each incident of sexual abuse following every sexual abuse investigation, unless the allegation was determined to be unfounded?
2. Does the team use the review of each incident of sexual abuse to identify any policy, training, or other issues related to the incident that indicate a need to change policy or practice to better prevent, detect, and/or respond to incidents of sexual abuse?
3. Does the review team consider whether incidents were motivated by racial dynamics or any existing racial tensions at the facility?
4. When incidents are determined to be motivated by racial dynamics or tensions, do upper management officials immediately notify the agency head and begin taking steps to rectify those underlying problems?
5. Does the review team prepare a report of its findings and recommendations for improvement and submit it to the facility head?

DC-2 – Data Collection:

1. Does the agency collect uniform data for every reported incident of sexual abuse using a standardized instrument and set of definitions?
2. Does the agency aggregate the incident-based sexual abuse data at least annually?
3. Does the agency collect the incident-based data necessary to answer all questions from the most recent version of the BJS Survey on Sexual Violence?
4. Does the agency obtain data from multiple sources, including reports, investigation, files, and sexual abuse incident reviews?
5. Does the agency also obtain incident-based and aggregated data from every facility with which it contracts for the confinement of its inmates?

DC-3 – Data review for Corrective Action:

1. Does the agency review, analyze, and use all sexual abuse data, including incident-based and aggregated data, to assess the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training?
2. Does the agency use the data to access problem areas, including any racial dynamics underpinning patterns of sexual abuse?
3. Does the Agency take corrective action on an ongoing basis, based on the problem areas indicated by the analysis of the data?
4. Does the agency prepare a report at least annually of its findings and corrective actions for each facility as well as the agency as a whole?
5. Does the 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?
6. Is the agency's report approved by the agency head and submitted to the appropriate legislative body?
7. Is the agency's report made readily available to the public through its Web site or, if it does not have one, through other means?

DC-4 – Data Storage, Publication and Destruction:

1. Does the agency ensure that the collected sexual abuse data are properly stored, retained, protected, and destroyed?
2. Does the agency make all aggregated sexual abuse data, from facilities under its direct control and those with which it contracts, readily available to the public at least annually through its Web site or, if it does not have one, through other means?
3. Are all personal identifiers removed from the aggregated data before it is made publicly available?
4. Does the agency maintain sexual abuse data for at least 10 years after the date of its initial collection unless Federal, State, or local law allows for the disposal of official information in less than 10 years?

Audits (AU)

AU-1 – Audits of Standards:

1. Are comprehensive audits conducted at least every three years?
2. Are auditors independent and qualified?
3. Are independent auditors able to do the following, as deemed appropriate by the auditor?
 - a. Enter and tour facilities
 - b. Review documents
 - c. Interview staff and inmates
4. Are audit reports and corrective plans published on appropriate agency's Web site if it has one or otherwise made readily available to the public?