



Proceedings of the Large Jail Network Meeting: September 2013

Session topics:

**The Affordable Care Act and
Jails**

**From Corrections Fatigue to
Fulfillment**

PREA Facility Auditing

Legal Issues Update

Association Updates

Open Forum

National Institute of Corrections

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**Proceedings of the Large Jail Network Meeting
Aurora, Colorado
September 15 – 17, 2013**

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National Institute of Corrections

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About the Large Jail Network

The National Institute of Corrections (NIC) established the Large Jail Network (LJN) in 1989 as a connection point for administrators of jails and jail systems housing 1,000 or more inmates. The network was launched with 67 member agencies and convened at its first meeting in 1990. Participants meet twice yearly, in the spring and fall.

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NIC provides a private web site for the LJN, where members can access presentation files from this and earlier LJN meetings as well as share other materials throughout the year. A member forum facilitates a day-to-day dialogue on issues facing large jails and strategies for responding to them. Current and prospective members can access the site at <http://community.nicic.org/forums>.

Purpose

The NIC Jails Division networks' mission is to promote and provide a vehicle for the free and open exchange of ideas and information and innovation among network members. In addition, NIC networks reinforce the assumption that knowledge can be transferred from one jurisdiction or agency to another, and this knowledge can serve as a stimulus for the development of effective approaches to address similar problems or opportunities.

Our belief is that, collectively, network members are likely to have developed successful strategies for meeting challenges that arise. As a group, network members are an available resource to each other. The network provides a systematic way for information to be shared, which not only benefits the network member, but also those they serve and represent – the local government, state, community, staff, and inmate.

LJN Goals

- To explore issues facing jail systems from the perspective of network members with administrative responsibility.
- To discuss strategies and resources for dealing successfully with these issues.
- To discuss potential methods by which NIC can facilitate the development of programs or the transfer of existing knowledge or technology.
- To develop and improve communication among network members.
- To seek new and creative ways to identify and meet the needs of network members.

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Appendix A. LJN September 2013 Final Meeting Agenda

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ABOUT THIS MEETING

The September 2013 Large Jail Network meeting took place at the National Institute of Corrections Academy in Aurora, Colorado. There were 55 detention agency personnel in attendance, representing 51 agencies.

The meeting began with an informal dinner on Sunday, September 15, with participant and guest introductions. Two days of presentations and discussion followed.

Guests and speakers at the meeting included:

- Donna Strugar-Fritsch, Principal, Health Management Associates, Oakland, California;
- Caterina G. Spinaris and Micheal D. Denhof, Desert Waters Correctional Outreach, Florence, Colorado.
- Joshua Delaney, Office of the U.S. Attorney General, U.S. Department of Justice, Washington, D.C.;
- Bill Collins, Attorney, Olympia, Washington;
- Jeff Washington, Deputy Executive Director, American Correctional Association, Alexandria, Virginia;
- Bob Kasabian, Executive Director, American Jail Association, Hagerstown, Maryland;
- Dee Halley, National Institute of Corrections; and
- Connie Clem, meeting recorder, Clem Information Strategies, Longmont, Colorado.

The agenda for the meeting is provided in Appendix A.

A list of LJN members in attendance and meeting guests appears in Appendix B.

An index of past topics covered at LJN meetings is provided in Appendix C.

MEETING HIGHLIGHTS

The Affordable Care Act and Jails

- p. 3* Jails can see significant financial benefits as the roll-out of the Affordable Care Act goes forward. Many jail inmates will be newly eligible for Medicaid, based on their income. Others will be able to afford individual insurance through state exchanges. New access to community-based health care and substance abuse treatment is likely to keep more released inmates from returning to jail. Jail administrators can help steer local planning and coordination of services that ultimately reduce costs to the jail.

Staff Response to Job Stress

- p. 9* The corrections workplace places more stress on staff than other public safety occupations. Jails leaders can alleviate some of this stress by addressing agency culture and providing training programs and other assistance to reduce stress and help staff learn to manage it.

Getting Ready for PREA Audits

- p. 15* Audits to certify facilities' compliance with the Prison Rape Elimination Act standards are now under way. Comprehensive information is available online to help agencies prepare for an audit. Some specific aspects of the audit and certification process are still evolving. Jail staff members who become certified PREA auditors may be an asset for audit preparations as well as for reciprocal, low-cost auditing by groups of agencies.

Religious Observance

- p. 21* Jails reasonably can review the sincerity of inmates' religious beliefs when an inmate requests an accommodation for religious observance. Accommodations should be as little restrictive on the inmate's observance as possible.

Restricted Housing

- p. 27* The American Correctional Association (ACA) is recommending that agencies adopt the term "restricted housing" to replace "administrative segregation." Advocacy groups are focusing on the perceptions that segregation is synonymous with isolation, is applied punitively, and is detrimental to inmates' well-being.

PROGRAM SESSION: THE AFFORDABLE CARE ACT

HEALTH CARE REFORM AND JAILS

Presenter: Donna Strugar-Fritsch, Principal, Health Management Associates, Oakland, California

The expansion of Medicaid through the Affordable Care Act of 2010 (ACA) has many implications for jails. Jail officials can provide the leadership to begin exploring them at the county level.

Jails have new funding and partnership opportunities in two major areas:

- Direct Medicaid coverage for very low-income inmates, whatever their age (except in states that have chosen not to participate in the Medicaid expansion); and
- Access to insurance coverage for many other inmates through the new state insurance exchange programs (which are being created in all states, even those that are not expanding their Medicaid programs).

By preparing now, jails and their partners will be ready for changes in benefits that go into effect January 1, 2014.

About the Act

The aim of the ACA was to expand medical insurance coverage to more citizens, creating a more equitable funding system and reducing the use of publicly funded emergency rooms for primary care. ACA does not provide a mechanism for covering illegal immigrants or people who choose not to participate. ACA also makes the national and state insurance markets more uniform and closes gaps in insurance coverage. For example, insurers will no longer be able to refuse to cover children or adults with preexisting conditions, set lifetime limits on benefits, or stop coverage for a medical patient who makes too many claims.

Before the ACA, Medicaid eligibility was defined for specific categories of individuals and for the poor, as poverty was defined by individual states. ACA has established a national standard for Medicaid eligibility for persons earning 133% or less of the Federal Poverty Level (FPL). By this standard, most jail inmates will be eligible for Medicaid. Medicaid will continue to cover only inpatient hospital medical services for inmates.

Ex-offenders are expected to comprise 10% to 30% of the Medicaid expansion population. Community health providers can develop partnerships with jails as a way to connect with their expanded client base. The federal government will pay 100% of Medicaid-eligible costs during the initial phase of ACA implementation.

However, some states are choosing not to expand Medicaid as provided for in the ACA. These states will lose both their share of the expanded Medicaid funding and their current funding for hospitals that provide a disproportionate share of their services to low-income and under- or uninsured patients.

Many inmates will qualify for insurance subsidies extended to those with an income between 100% and 400% of the FPL (in states not expanding Medicaid) and between 133% and 400% of the FPL in Medicaid expansion states. In 2014, 400% of FPL will equate to \$94,200 in annual income for a couple or \$45,960 for a single person.

Online state insurance marketplaces, known as “exchanges,” open on October 1, 2013. People can use their state’s exchange to find and enroll in coverage plans that will be effective on January 1, 2014. The exchanges will offer a variety of insurance policies at four pricing and coverage levels: bronze, silver, gold, and platinum. In plans at the silver level, for example, 80% of actuarially calculated costs will be covered. Under the terms of the ACA, insurance premiums for exchange plans may not cost more than 9.5% of the individual’s or family’s take-home income. Subsidies will be available to make up the difference. In Michigan, for example, 65% of families will qualify for a subsidy.

A simple, uniform online application form will be available October 1, 2013. It will interface with Internal Revenue Service data to immediately verify the applicant’s income. Individuals or families will be determined to be eligible for either Medicaid coverage or enrollment in a subsidized insurance plan through the exchange, or to have sufficient income to enroll in self-funded insurance on the open market. Community-based “navigators” will be available to help people choose the plan they want.

Enrolling Jail Inmates for Coverage

Some states, such as California and New Mexico, already have eliminated regulations that prohibited Medicaid enrollment of inmates. Any regulations of this type are not set by the Federal government but by states. Jail leaders can advocate for change in their states’ regulations if current rules prohibit enrolling detainees into Medicaid.

Jail inmates may enroll in exchange insurance plans and are eligible for benefits as long as their cases are pending disposition. However, it may not be easy at first for jails to access the benefits they are due. Insurers may deny payment on grounds the services were not preauthorized, were not medically necessary, or were not delivered by an authorized provider. Jails will find it worthwhile financially to work through the claims process one inmate at a time and smooth out the wrinkles.

It may be feasible to use exchange plan benefits for prescription drugs and off-site services that are approved by the insurer and provided within its network. It will be more difficult to access benefits for services delivered by the jail, but some jails are considering making the effort to become exchange plan network providers and billing for care.

If a jail’s medical services are contracted, the jail should work with the provider and others as needed to define who is responsible for accessing Medicaid coverage for hospitalizations. A health care vendor that is active in several states may not be connected with local providers and the community health network.

Additional points to consider:

- Hospitals that provide care for inmates may help enroll them in Medicaid.
- Navigators may become a partner for working with jail inmates on enrollment.

Medicaid Expansion Effects

Jails located in states that are accepting Medicaid expansion will be affected by four specific provisions.

The 100% match rate for inpatient hospitalizations

It may be difficult to put systems in place to take advantage of money for inmate hospitalizations, but the effort is potentially worth millions of dollars. Once billing has been worked out, jails should not abuse the system by sending more inmates out for hospital stays. Jails also should look at their medical services contracts so providers don't get a windfall from services that will now be covered by Medicaid. For example, if a jail is paying a flat rate based on a per diem cost, this may need an adjustment.

Access to community substance abuse treatment

All Medicaid beneficiaries will have benefits for diagnosis and treatment of substance abuse disorders. Released inmates who are enrolled in Medicaid can receive substance abuse treatment in the community.

Public health care after release

Expansion of Medicaid benefits has major public safety and public health implications. Inmates who are released in stable condition will have a better chance of staying that way. More community care is linked with lower recidivism plus better health outcomes for serious mental illness, addictions, and infectious diseases. Many inmates can be released to Medicaid managed care plans. Managed care plans are different from the existing community mental health provider system; they are insurance plans that are contracted with Medicaid to provide medical benefits. Localities have the opportunity now to make a few key decisions that solve problems that have been intractable and very expensive.

Funding for electronic health records

An incentive of \$63,750 is available to medical service providers whose clientele includes at least 30% Medicaid-eligible patients, to fund the installation and meaningful use of a federally-certified electronic health record (EHR). Jails can tap into this funding, but incentives are paid directly to providers.

Jail health care providers are recognizing that the ACA will change some aspects of their business model. Jails have their own strategic needs and concerns about care coordination, discharge planning, and other issues. It's advised that jail leaders talk with county counsel about language for new contracts with medical services vendors. The ideal answer will be both state-specific and community-specific.

The presenter offered this scenario to illustrate jail/community provider partnerships—

A jail in a Medicaid expansion state is about to release an inmate suffering from both diabetes and hepatitis. The inmate enrolls in Medicaid and chooses a plan for coverage that will be effective at his release. The jail's release planning team calls the Medicaid Health Plan and shares the inmate's case history. The plan has strong financial incentives to keep the ex-offender out of the emergency room and hospital and to help him adhere to treatment plans. The plan sends a case manager to meet with him in the jail to explain how to make appointments and get prescriptions filled, and to arrange transportation if necessary. The probation officer is also a partner in keeping the former inmate on his care plan.

Decision Points for Planning

- 1) Will jails take on the task of enrolling inmates into Medicaid? If so, who will do it—public health staff, medical care contractor staff, or jail staff? When will it happen? If it's when detainees enter the jail, the jail will be eligible for the enrollment and electronic records incentives. Or, the jail might choose to enroll only those inmates who are sent to hospitals, or inmates approaching release.
- 2) Will the jail seek to collect on available electronic health record incentives?
- 3) How will the jail, Medicaid, and any other enrollment agency work together?
- 4) Can the state's Medicaid regulations be altered, if necessary, so Medicaid coverage is suspended, rather than terminated, at jail admission?
- 5) How will the jail develop relationships with Medicaid providers and area public health leaders to support coordination of care after release?
- 6) Will the jail establish practices to collect Medicaid funding for hospital stays?
- 7) Will the jail help inmates enroll in new exchange insurance plans, especially in states where Medicaid is not being expanded? Who would do this, and how? Might a jail pay inmates' premiums to keep their exchange plan coverage in place for pre-adjudicated inmates? In many cases, this will be cheaper than paying the out-of-pocket costs of services.
- 8) Who should lead these efforts? What should be the role of the jail administration and its medical and/or behavioral health vendors/contractors in discharge planning, enrollment in exchange plans, communicating with community providers, and participating in "systems" discussions with the state?
- 9) How will vendors get paid for their new roles, duties, and deliverables?

Jail leaders can engage now in planning discussions with the local health care community. All partners need to understand the implications of Medicaid expansion, to use the same vocabulary, and to understand each other's strategic priorities. Monitoring implementation at the state prison level may be helpful.

Jail leaders also should be aware of the possibility that, with 20 million people newly having access to medical care, localities may experience staffing shortages in areas such as primary care, nursing, and mental health services. Attracting and retaining qualified providers inside the jail may become an issue. Managing psychotropic medications will be more difficult if access to psychiatrists is limited.

Discussion

- In Denver, Colorado, several kiosks have been installed around the community that can be used for Medicaid enrollment. One will be placed in the jail's booking area.
- A participant said the official with oversight for Medicaid in his state expects that hospitals will be an ally for jails in getting inmates enrolled, and they already have the staff in place to do it. Hospitals will appreciate getting paid Medicaid rates if they now get less or often provide care with no reimbursement.
- The Los Angeles County jail did an analysis and expects to enroll 88,000 inmates per year.
- Another participant said jails shouldn't expect inmates to care about the ACA, more access to medical care, or insurance coverage. Inmates get services at the emergency room and won't see any need to make a change.
- Jerry Gutierrez (Riverside County, California) said that how to approach these issues is a business decision connected to the culture of a jail. Jails may want to "cherry pick" the inmates they choose to work with on special services and Medicaid or insurance enrollment.
- Jails can prepare communications for inmates about Medicaid and insurance program enrollment. Flyers, brochures, videos, or a live orientation at intake could be effective. Navigators might be invited into the jail to do educational sessions.
- A participant asked whether licensed jail infirmaries can receive Medicaid payments. Strugar-Fritsch said that Medicaid will pay only when: a) the service provider is a community hospital or nursing home that bills Medicaid, and b) the inmate is enrolled. At this point, jail-based providers are not qualified to receive Medicaid funds for infirmary care.
- Mike Wade (Henrico County, Virginia) asked what information should be included in a budget presentation on Medicaid expansion and the ACA. The answer depends on whether the state is accepting the Medicaid expansion. For a jail in a Medicaid expansion state, the potential money savings is huge. In other states there still will be more funding for medical care, but the difference will be less dramatic. Jails should look at coverage for pre-adjudicated inmates in particular, and at reentry planning and health care at least for the people who are very ill. It's a good idea to get budget officers talking.
- Some models seem to assume a social services person will be the main intervention point in jails to ensure continuity of care after release. Responsibility may be hard to assign when so many agencies are involved. Within a year, there should be evidence of what works best—whether this is being dealt with by mandate or more organically.

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- A participant asked what concerns vendors have with the ACA. Vendors will want to offer their clients neat answers, so jail staff should be prepared to ask a lot of questions about those answers. As Medicaid begins sending payments direct to hospitals that house inmates overnight, many vendors may see a reduced cash flow. Jails should make sure they get their Medicaid reimbursement money back, not let the vendors keep it.
- Mitch Lucas (Charleston County, South Carolina) asked whether the Massachusetts plan, considered a basis for the national ACA, was beneficial for jails. Michael Frost (Essex County, Massachusetts) said the situation for jails is still evolving. Medicaid coverage still is suspended when inmates are in pretrial status. By the time inmates leave, they're enrolled and getting medications, but jails are still paying for everything provided within the jail.

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PROGRAM SESSION: HANDLING CORRECTIONS STAFF WELLNESS/PERFORMANCE ISSUES

FROM CORRECTIONS FATIGUE TO FULFILLMENT

Presenters: Caterina G. Spinaris and Micheal D. Denhof, Desert Waters Correctional Outreach, Florence, Colorado.

In this session, Dr. Spinaris described her research, training, and resources on staff stress and wellness in corrections. Spinaris was a clinical psychologist in private practice in Florence, Colorado, when she began to notice patterns in the local clientele. Many worked, or had worked, in the area's several state and federal correctional institutions or had family members who worked there.

Spinaris said that for staff, safety and sanity go together. Corrections work comes with trauma and/or exposure to trauma. Desert Waters conducted a survey of 3,599 respondents from all types of corrections agencies and in all types of positions. The results showed that male staff members have been exposed to more events involving violence, injury, and death, and they have more indicators of post-traumatic stress disorder. In free society, women are more likely than men to develop PTSD.

Her research found:

- 36% of male security staff had indicators of PTSD, and 32% had indicators of depression.
- For women in security positions, the numbers were 30% for PTSD indicators and 27% for depression.
- For the total pool of corrections personnel surveyed, 27% of respondents were positive for PTSD indicators, and 26% were positive for depression.
- Altogether, 43% of security personnel showed indicators of PTSD, depression, or both.
- Staff with comorbid PTSD and depression symptoms used an average of 17.5 sick days per year, compared with 8.0 sick days for disorder-free respondents. Filling those shifts was estimated to cost an average agency \$600,000 per year.
- Compared with studies of EMTs, police, and firefighters, corrections staff test higher for PTSD.

Trauma can be experienced personally, but it doesn't have to be a first-person experience to have an effect on staff. Other stressors can have an effect over time, as in the case of a poor supervisor or a culture problem in the agency. Compounding the exposure is staff members' inability to control their environment. Staff members often feel helpless, depressed, angry, or frustrated. Even relatively simple operational matters such as cell doors that won't lock properly can add to staff stress. The result is a

cumulative negative transformation of the staff member's attitude, morale, and ability to handle job-related stress effectively.

Administrators may see indicators that staff members are handling stress badly.

- Incidents of drunk driving.
- Facebook posts referring to the job or to substance abuse or other unprofessional behavior.
- Military veteran staff being triggered on the job into a PTSD-based reliving of traumatic wartime experiences.
- Domestic violence incidents, often involving staff at middle-management levels who work for long hours at low pay.
- Irritability or depression.
- Increased use of sick leave.
- More requests for employee assistance program services.
- Suicide and suicide attempts.
- Deaths relatively soon after staff retire, reflecting a high degree of sustained stress.

It's both expedient and an ethical matter for the agency to respond. Correctional staff often deal with work stress by drinking alcohol to excess or by calling in sick. Agencies need to educate their staff members on smarter ways to handle stress. One positive development is that the stigma against getting help is fading; more staff members are willing to admit it when they need help. Agencies can improve the culture and environment by putting supportive content in place from the training academy onward. However, there are not many resources available to agencies to help their staff deal with the stress of corrections work.

Meeting participants discussed barriers and cultural factors in their agencies' jails.

- People don't know how to respond when they see a fellow officer who needs help. People may show signs of crisis, but no one steps up to talk about it.
- Corrections staff are trained to intervene when they see equipment readiness issues, but they're not accustomed to intervening with people.
- Some staff keep their personal issues to themselves, thinking they may lose their jobs.
- Supervisors may not know how to respond or intervene and aren't getting trained on how to handle stress (their own and others').
- Access can be an issue. People have asked for help but been told they can't get in the EAP program, because then the agency would have to let everyone in.
- For management, it's sometimes a struggle to get officers rotated out of high-stress assignments. A system of mandatory rotation is important for giving staff a break, whether

they think they need it or not. This gives the agency a systematic response to officers who say, "I'm a warrior. I can stick this out."

- Some agencies are hiring a high proportion of staff just out of college who want the institutional experience and expect to move on. Turnover is high, and staff who aren't committed to corrections work have less need to develop coping skills.
- Some people who choose a corrections career feel they have to be tough. These days, it's more common for an agency to accept that a staff member might be out for 6 months for treatment, especially an officer who has been assaulted.
- Some families have a tradition of working in corrections. This can be good or bad—potentially bad if the emphasis is on toughness rather than interpersonal skills.
- Twelve-hour shifts are understood to be more stressful than 8-hour shifts.
- Many communities have limited mental health resources for jail staff to access. Many local providers do not understand the correctional context and its stressors.
- If an agency's employee assistance plan provides for one free counseling session per year, that's not much help.

Corrections fatigue should be recognized as an unavoidable occupational hazard. If not countered, its effects endure and continue to accumulate. They become chronic and affect staff members on and off the job, even after retirement. People who suffer from corrections fatigue feel down, unhappy, and distressed. They may not like their own negativity, pessimism, and bitterness. They are affected physically through the repeated triggering of their stress response, causing increases in heart rate and blood pressure, muscle tension, digestive disturbances, and other health effects.

Staff members who don't learn techniques for recognizing and managing stress lose more of their coping skills the longer they work. They stop taking care of themselves and may get reclusive and isolated. They have insufficient personal and/or organizational strategies and/or resources available to them for adapting to the demands of correctional work. Their families feel the effects.

There are two main pathways into burnout as a corrections professional. One is the path of control, where all inmates are seen as a threat to the staff member's authority and facility order. The second is the path of concern, where inmates are all seen as needing to be rescued. Both pathways show rigid thinking and a lack of balance. Staff members lose their capacity for compassion and optimism, and their sense of identity narrows.

As corrections fatigue sets in, staff members become less resilient. Their decline follows a gradual continuum. At first, they show no signs or only minor signs. Then, as health and wellness decline, the staff member's job functioning becomes impaired. He or she experiences increasing anxiety. Depression may develop. Over time, accumulated trauma and stress lead to PTSD. If the decline continues unchecked, the staff member can become a threat to self or others. However, if the process is interrupted, the person can regain his or her earlier level of wellness and job performance.

Often, staff will be able to function on the job until something major happens. The trigger could be anything from an assault to being skipped over for a promotion. Ideally the staff member will get help. Once they understand their situation and the factors contributing to it, staff members can learn to cope better or choose to leave the business, or they will keep getting worse.

The first aim of an intervention is to acknowledge what's going on. One exercise in a class setting involves staff writing on an index card their personality changes that they attribute to job stress. Then the cards are taped to the wall for the group to see and review. This exercise breaks the ice by showing that no one is alone in having these feelings.

Personal stories may be recognized as part of a larger pattern:

- "Fifteen years on the job and suddenly I'm short tempered and can't sleep."
- "I've been at this for 17 years, and I'm seriously considering suicide."
- "I treat my children like offenders."
- "Nothing I see at work bothers me anymore. My wife asked me if I have become heartless."
- "I'm always miserable, and my co-workers are making my life hell."

Agency Strategies

Staff members who have access to management support and a positive organizational climate are more likely to retain a healthy identity and a sense of positive morale on the job. Participants discussed ways their agencies are meeting seven primary needs of their staff to alleviate the stress of working in corrections.

Physical safety

- Agencies provide as safe and functional a working environment as possible.
- Cleanliness makes a big difference with staff morale. Noise and crowding increase stress.

Psychological safety

- Agencies can offer peer support teams.
- Agencies can discourage cliques, bullying, and unwritten rules of staff behavior that undermine trust.
- Agencies can encourage staff to alert their managers when they see signs of stress in fellow officers, in person or online.

Trust in their peers and management

- Agencies can implement a "back to the front" program in which managers do a shift in a line officer job once a quarter.
- Agencies can provide staff training on how to relate to one another in a positive manner.
- Managers can ask the staff to discuss their morale and job concerns.

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- Jail management can advocate for staff. For example, if jail officers don't have the same retirement timeline as patrol officers, these policies should be changed.
- Agencies can rotate senior command staff through different departments. This gives them exposure to the jail environment, its people, and its issues. It helps them understand the professionalism of the staff in a well-run jail. The days are gone of moving officers who can't make it on patrol into jail positions.
- One agency had staff from all teams sit down and list all the work that gets done in the jail. This helped everyone know and respect each other's roles.

Power to influence their environment and experiences

- One agency convenes an occupational issues committee to address jail concerns. There is no rank in the room; cooks meet with captains. People are rotated on and off the group, which is facilitated by an assistant jail chief.
- Jails can survey their staff on concerns and things that might be done differently, provide an idea box, or open the floor during roll call.
- Agencies can form an "Ask a CO" panel or put questions and answers in a staff newsletter.

Respect from peers and supervisors

- Asking line officers to conduct group tours is rewarding and recognizes their expertise.
- Helping staff see how their work relates to outcomes is good for morale. If a jail does a stellar job in an accreditation review, be sure to recognize the staff's achievement.

Connection on a human level

- Leaders help people deal with stress on the job. The best response is to know each staff member individually and match what you say and do to their needs and concerns.
- Leaders can create a positive tone in the jail by smiling and saying good morning.
- Administrators can be visible in the facility and on the units. If an officer's daughter is graduating from school one week, ask the officer later how the celebrations went.
- Administrators can write personal notes recognizing staff members' birthdays, anniversaries, and other life events.
- Managers should help their staff to recognize their own strengths and skills.
- Jails can host a barbeque for each shift and invite the nurses and other teams.
- Some staff needs are difficult to meet. Officers can feel isolated when working their unit. They can't have family photos in their workspace, as office staff can. Managers can help make up for this by connecting often through email and in person.
- Leaders and managers need to be seen to make a difference.

Meaning in their lives and work

- Jail leaders can tell people that their work is important and acknowledge that staff members are doing a demanding job.
- Helping the outside world understand the work that goes on in the jail and the stressors that are involved contributes to a sense of meaning for staff. Most community residents never see what jails actually do.

Resources

The jail can provide a list of resources for staff self-care, including reading material and sources of counseling. Two books suggested by meeting participants are *Emotional Survival for Law Enforcement Officers and Their Families*, by Kevin M. Gilmartin (<http://www.emotionalsurvival.com>) and *Staying Well: Strategies for Corrections Staff*, a booklet available from the Billy Graham Center (<http://www.bgbookstore.com>).

Desert Waters offers a free newsletter, *The Correctional Oasis*, which agencies can subscribe to online and provide to staff. Desert Waters also offers free online access to its Corrections Fatigue Status Assessment, version 3 (CFSA-V3). Agencies can have their staff take the assessment, examine their aggregate scores, and do re-tests after training to see if there's improvement.

Desert Waters is working with NIC on a cooperative agreement project that includes resource development and train-the-trainer programs. Elias Diggins said staff from the Denver Sheriff Department participated in this training in 2013, and it was well received. Agencies can contact Desert Waters for more information on training and coaching packages. Handouts provided at the meeting included sample worksheets from the training program.

Two research studies are available at the Desert Waters website:

- *Depression, PTSD, and Comorbidity in United States Corrections Professionals: Prevalence and Impact on Health and Functioning.*
- *Post-traumatic Stress Disorder in United States Corrections Professionals: Prevalence and Impact on Health and Functioning.*

For further information

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PROGRAM SESSION: PRISON RAPE ELIMINATION ACT

PREA: THE OUTLOOK FOR FACILITY AUDITS

Presenter: Joshua C. Delaney, Vice Chair, Attorney General's PREA Working Group, U.S. Department of Justice, Washington, D.C.

Moderator: Dee Halley, National Institute of Corrections, Washington, D.C.

Dee Halley opened the session by recalling her work in jails in the 1970s and '80s, when jail personnel didn't know how to respond to inmate sexual assaults. Incidents were coded inconsistently, making it difficult to understand the extent of the problem. The Prison Rape Elimination Act of 2003 (PREA) has provided a platform to talk about inmate safety and best practices. Managers play a key role in staying aware of activity in the jail and providing leadership to take sexual safety seriously.

Halley recommended that jail administrators focus on the intent of PREA rather than becoming too concerned about specific details or process requirements. PREA's implementation is still new and evolving. Today's session will provide the best current guidance in a changing environment. In a survey, 60% of LJN members said they have read the PREA standards in depth, and many today say they feel they are prepared for an audit. The PREA audit instrument is available online at the PRC website, as are self-assessment tools, so agencies should know exactly what to expect and what they need to do to prepare.

The National PREA Resource Center (PRC, <http://www.prearesourcecenter.org>) will soon release five online training e-modules. They address medical care aspects of PREA, behavioral health aspects, a "PREA Coordinator 101" program, the audit process, and basic PREA investigations. Each module takes about 3 hours to complete, depending on how much knowledge the trainee already has.

Joshua Delaney works for the U.S. Department of Justice, focusing on interpretive guidance related to PREA implementation and all things audit-related. In this session, he provided information on certification and training of PREA auditors and what agencies can do to prepare for their audit. As of the LJN meeting date, three facility audits have been completed, each in a Federal Bureau of Prisons location.

PREA Audits and Auditors

The PRC website offers a list of certified PREA auditors that agencies can contract with to have an audit performed. PRC is accepting auditors from an applicant pool based on types of expertise, geographical area they represent, and other factors. Eligibility criteria are available on the PRC website. Auditors will receive 40 hours of training provided by PRC. PRC has received more than 100 applications for its first session of auditor training in November 2013. Four more training sessions are scheduled for 2014, each having a target of 100 auditor trainees. Auditors will receive certification to

audit a jail, a prison, a lockup, an adult community confinement facility, or a juvenile facility after successfully completing an examination after the 5 days of training.

Auditors will be responsible for the quality of the audit, and they may work with or hire other approved auditors and staff. Agencies can contract with any certified auditor. DOJ has not set a fee for auditors; contracts should document the fee negotiated by the auditor and the agency, including the fee and expenses. In the regulatory impact analysis included in the final PREA rule, DOJ estimated an average cost of about \$6,000, including travel and per diem, preparatory work, on-site work, and report development. The per-audit cost could vary substantially according to the size of the facility, how well the agency has prepared and how readily it can provide the information needed by the auditor, and the expertise and efficiency of the auditor.

An existing state agency, such as a state's auditor general, could become a certified PREA auditor. However, audits of one agency cannot be conducted by a related agency, i.e., one that reports to the same top-level state agency. A state sheriffs' association could conduct audits, if concerns about potential conflict of interest are allayed.

Local detention agencies can train staff as auditors and allow them to conduct audits for other agencies for a fee or at no charge. Staff members who already have been conducting audits on behalf of the American Correctional Association (ACA) may be in high demand. If two agencies want to do reciprocal audits in each other's jails, the audits must be a year apart. If three or more agencies plan to audit each other, the time separation is not necessary.

The Audit Process

The actual audit process involves 15 different documents. Auditors will ask specific interview questions of the facility warden or director, its PREA compliance manager, random line staff, and random inmates.

For full compliance, an agency needs to meet every element of every PREA standard. The auditor is required to provide the agency a private, draft report within 30 days of the audit. The agency will then have a window of 30 days to come into compliance on any pending issues. Next, after the formal report is delivered, the agency will have 180 days to come into compliance and/or develop, in conjunction with the auditor, an action plan to identify minimum remedial corrective action. The completed audit documentation should include estimated costs required for achieving compliance. Agencies will be able to appeal the audit results. If multiple complaints or appeals come in from an auditor's caseload, the situation will get attention, and agencies will avoid hiring that person for an audit.

Discussion

Participants expressed concerns about audit costs. One said that jail administrators already fight for every dollar needed to run their institutions, and paying for a PREA audit will affect their operating budgets.

Delaney assured the group that DOJ is not going to send enforcement staff to an agency if it doesn't get audited.

A strong point of leverage for jails is their bedspace contracts with federal agencies. Participants said they have been unable to get answers from the U.S. Marshals Service on whether they will only contract with jails that passed a PREA audit.

Delaney agreed to see that this issue receives follow up. It should be submitted as a formal question to the PRC.

If a jail fails its first audit and is re-audited, will it need to pay a second time?

Audit fees are negotiable.

Participants said that even with their best intentions to comply with PREA, it has been very difficult to get the solid answers they need for planning and budgeting.

Delaney acknowledged that it sometimes takes months to for DOJ to provide answers to agencies' questions. This has been frustrating for everyone.

Is there any guidance on whether having a certified auditor on staff might reduce an agency's liability?

Auditors who conduct ACA accreditation examinations have liability protection from ACA. This type of protection is not in place for PREA auditors. PREA auditors will need to acquire professional liability insurance, either through their agencies or via an external source.

Will PREA audit reports be made public, as DOJ audit reports now are?

DOJ will not have access to the PREA audit reports. Because PREA is not state-mandated, reports probably will not be shared via state systems, either.

Where will the U.S. Marshals Service house inmates if they can't use jails that are non-compliant?

Intergovernmental service agreements will be the substitute mechanism.

PANEL DISCUSSION

Three panelists representing Large Jail Network agencies shared updates on what their agencies are doing to prepare for PREA audits and what the challenges have been.

Don Pinkard, Gwinnett County, Georgia

Don Pinkard summarized the preparations that have been made in Gwinnett County, Georgia. At first, jail leaders thought there would be no way it could comply with PREA. The agency began researching and working on PREA issues 2 years ago, from a starting point of existing, high-quality policies and procedures. The state sheriffs' association took the position that jails don't need to comply with PREA, making it more difficult than it might be otherwise to gain support from the sheriff.

The county's achievements have included the following.

- Establishing a PREA coordinator, a part-time position that could turn full-time and could be given a different name;

National Institute of Corrections

- Installing cameras in blind spots;
- Conducting repeated self-audits;
- Drafting new policy to cover all the PREA standards that the jail can possibly cover;
- Giving staff specialized training on sexual assault;
- Installing digital signage boards;
- Adding PREA signage to the commissary line area;
- Adding PREA information to the inmate handbook;
- Developing PREA brochures in English and Spanish;
- Adding a free, direct telephone line to investigators;
- Creating a roster of all inmates under age 18 years for closer monitoring;
- Changing the method of classification for housing unit assignment;
- Establishing a memorandum of understanding with a third-party crisis center liaison for treating sexual abuse effects;
- Training staff and investigators, including adding PREA content to annual inservice refresher training;
- Expanding the ways inmates can report sexual assault or coercion;
- Updating the agency's anti-retaliation policy;
- Improving system readiness to file criminal charges on inmate perpetrators; and
- Implementing procedures for outside investigators to be called in if there's an allegation.

The agency is still working on issues surrounding retention of PREA-related reports and other records and ultimate responsibility for PREA issues at the command staff level. The jail lets other divisions of the sheriff's department know about PREA topics on which they might need training.

Discussion

- Dee Halley asked about relationships with service providers outside the agency. Pinkard said there is good rapport. There have been some instances of inmates using their access to providers to make unfounded accusations of assaults and agency non-responsiveness to reports of harassment.
- Mitch Lucas (Charleston County, South Carolina) asked why the jail decided to integrate PREA concepts into its existing policies rather than creating new PREA-specific policies. Pinkard's view is that creating good policy is the goal, whether or not the policy specifically refers to PREA.
- Getting all staff members trained on the new PREA policies is still underway and takes effort. Staff need to think and act differently and take PREA safety issues seriously. NIC's PREA classes are helpful. NIC also has online resources, such as the PREA self-assessment and videos. The new e-training resources that will come online soon include a

completion certificate at the end to document the staff member's participation in the training.

Pinkard recognized the staff at Gwinnett County for their excellent work to develop the agency's response to PREA.

Jeffery Newton, Riverside Regional Jail, Virginia

Newton has been actively engaged in commenting on the PREA standards throughout their development. He would have liked the final version to show more differentiation between jails and prisons.

The Riverside Regional Jail now has a PREA coordinator and has completed initial training for the coordinator and staff. By choice, PREA principles have been integrated into existing policy rather than used to create policy specific to PREA. Individual policies are identified as relating to state standards, ACA standards, and other national standards such as PREA. A strong relationship exists with the local prosecuting attorney, who will take PREA-related cases forward. The jail has a good risk management tool that classification staff find easy to use for identifying predatory or vulnerable inmates.

Some challenges remain to be solved.

- According to Virginia law, juveniles who are adjudicated as adults will be housed with the adult jail population. PREA doesn't allow that to happen. The county is now operating a juvenile housing unit for the four juveniles in the facility. There are substantial financial implications.
- Support agencies in the community that worked with the jail at no cost before PREA are now seeing the jail as a revenue source and expecting reimbursement for their services.
- The agency's PREA coordinator and a few other staff members will be certified to do PREA audits. The Virginia Board of Corrections may conduct jail audits in the state. The state's jail associations are discussing the best way forward for audits.

Discussion

Participants commented on the specifics of PREA's age separation requirements in the context of diverse state laws and on what PREA compliance will actually entail.

- Esteban Gonzalez said that Onondaga County, New York, currently houses 16-, 17-, and 18-year-olds in a juvenile housing unit in the adult jail. State law places juveniles aged 15 and younger in their own facilities and separates those 18 years of age from inmates 19 and older. Crowding is a problem at all nearby jails, and the nearest agency where he could move inmates is 2 hours away. Joshua Delany said that both New York and North Carolina are in the same situation. Interagency agreements to house each other's inmates are one option. Having youthful inmates sleep in an isolation cell is permissible, as long as the inmate is out of the isolation unit during the daytime hours. Some agencies are building walls to split pods into smaller units to gain more options for sight and sound separation.

- Mitch Lucas (Charleston County, South Carolina) and others said that these restrictions limit the agency's ability to use its classification system as intended. Youthful offenders have varying custody needs. There are 19 states in which offenders age 17 are considered adults. Changing the federal PREA standards or their application to help well-intentioned agencies comply would be easier than changing laws in so many states. Delaney suggested that state laws on youth sentencing continue to evolve and can be changed. There is ongoing advocacy for removing anyone under age 18 from adult facilities.
- Steve Morrison (Madison County, Alabama), a former ACA auditor, observed that some agencies will have with permanent obstacles to PREA compliance, such as a physical plant issue. If PREA audits are pass/fail, they have no chance. In other types of audits, as long as the agency makes its best effort or reaches a certain percentage score, it will pass the audit. Bill Collins asked whether a jail can be PREA audit certified if it cannot separate these inmates and is making its best effort. Delaney said some standards require best efforts or have a degree of flexibility for accommodation. The separation standard does not.

Art Wallenstein, Montgomery County, Maryland

Art Wallenstein remarked that the biggest risk and potential expense to agencies in connection with PREA is inmate lawsuits citing negligent failure to comply with PREA. He compared PREA to other “game-changing” events in the justice system. When the *Miranda* decision came down, police officers thought they'd never make another arrest. Cases such as *Wolf v. McDonald* and *Estelle v. Gamble* also established new norms. Women no longer pat search male prisoners. The corrections field will adapt to PREA unless there are specific elements that are overturned in the courts.

Wallenstein described two top PREA concerns for Montgomery County.

- The county cannot comply with requirements for sight and sound separation of juvenile inmates. The county now has eight juvenile offenders certified as adults who have been housed with youthful offenders up to age 21, with no violence. They receive all-day programming. Opening a new unit for juveniles will cost \$1,000,000, and the agency will not be able to duplicate some of its programs.
- PREA requires that any incidence of sexual harassment in a staff member's professional history must be considered in hiring and promotional decisions. This is unrealistic, because the jail has no way to know about matters that were addressed in a private settlement and/or far in the past. The requirement violates collective bargaining agreements. Whether PREA has the legal force to trump a collective bargaining agreement has yet to be demonstrated.

Information is critical. As jail audits begin to happen, jail administrators should share news as quickly as possible on what aspects are popping up as a violation of practice—issues that are not just an error but a significant problem.

PROGRAM SESSION: LEGAL ISSUES UPDATE

Legal Issues in Jails – 2013

Presenter: William C. Collins, Attorney, Olympia, Washington

On the docket:

- PREA Enforcement
- Freedom of Religion
- Bits and Pieces

Docket Item 1— PREA Enforcement

PREA compliance is not compulsory, but jails are working toward compliance for a variety of reasons. Given the stringency of the PREA standards, chances are high that many agencies will fail their audits. The potential consequences are unclear.

- Inmates cannot file a lawsuit based solely on PREA non-compliance, as recently confirmed in *De'Lonta v. Clarke*, 2013 U.S. Dist. LEXIS 5354 (W.D. Va. 2013). However, plaintiffs could say a jail was deliberately indifferent to substantial risk of serious harm, as shown by their failure to comply with PREA standards. An agency will be in a better position to argue a case if it can document the compliance efforts it has made, even if it has not reached full compliance.
- The U.S. Attorney General lacks the authority to enforce PREA. Enforcement incentives come through a limited loss of federal funding: up to 5% of federal grants to states for prison purposes are at risk. The threat of funding loss extends only to facilities “under the operational control of the State’s executive branch.”
- Conceivably, PREA compliance could become a factor in connection with a DOJ CRIPA action, couched as failure to comply with contemporary correctional standards.
- Loss of federal bed contracts may be the biggest incentive urging jails toward PREA compliance. And, when renegotiating contracts with the U.S. Marshals Service and others, jails might increase their per diem rates to help fund PREA compliance activities.
- Public relations could be a factor. Jails might be perceived better if they are in compliance, particularly if a major assault occurs.

Regarding the issue of juveniles sentenced as adults, Collins reiterated that some jails mainstream these inmates with the general population, relying on the effectiveness of their classification systems. In

a hypothetical scenario, if a 17-year-old inmate is placed with older offenders and is assaulted, the jail will likely have to concede that it failed to protect him, as shown by failure to adhere to PREA regulations. However, the jail's response can say, "We use a sound, state-of-the-art classification tool. The inmate was properly placed in the housing unit. What happened was not foreseeable. We may have been negligent, but we were not deliberately indifferent." Specifics of the individual case will also matter, for example, the physical build of the inmate.

The financial impacts could be significant for some agencies faced with revamping their methods of housing inmates under age 18. One facility represented at the meeting has held a young inmate for 4 years by himself. Other facilities may have six young inmates, two of whom are girls, at four different classification levels. Perhaps agencies will be able to sue for relief from some PREA requirements.

Collins advised agencies to study the documents, conduct the self-audits, and get a sense of where things sit and what the agency might be able to do within the next year or more without investing a large amount of money. Three years from now, matters will be much more settled. Possibly, by then the Attorney General will have valid reasons to modify the PREA standards.

Freedom of Religion

Corrections agencies must balance safety and operational issues with the religious beliefs of both their inmates and their staff. Different legal theories underpin these two aspects of religious freedom, but strong similarities exist.

Staff claims: attire

The legal basis for questions of accommodation is found in the First Amendment and in Title VII of the Civil Rights Act of 1964. For an employee to have a valid claim, there must be a matter of serious religious belief that conflicts with a job requirement. The employee must have informed the employer of the conflict and be able to show an adverse effect on employment status (such as having been disciplined for breaking a rule). The agency must be able to show a good-faith effort to accommodate the employee or show that such accommodation would cause undue hardship.

Collins noted that safety and security generally are very strong factors that agencies can rely on. The courts usually will show deference to officials' judgments. Economic costs also may be relevant.

In an EEOC claim brought against the GEO Group, female Muslim officers had been allowed to wear headscarves until a new warden was hired from a location with higher security threat group activity. The court found in favor of the agency on a security basis: the potential added risk of assaults, smuggling, and identity concealment was accorded more weight. *EEOC v. Geo Group*, 616 F3d 254 (3rd Cir 2010)

A Pentecostal employee at another agency was prevented from wearing a skirt because a skirt would impede response in an incident, in *Finnie v. Lee County*, 907 F. Supp. 2d 750 (ND MS, 2012). Civilian staff working in the same area of a facility arguably can wear skirts, because they're not trained to perform the same control moves. The best decision will depend on the essential requirements of the job.

Inmate claims: Diets and sincere religious beliefs

Rights of religious observance for inmates derive from the First Amendment and the Religious Land Use and Institutionalized Persons Act (RLUIPA). Any substantial burden that inhibits an inmate's religious practice must be supported by a compelling government interest and be the least restrictive option.

The core issue with regard to inmate religious freedom is their personal sincerity of belief, rather than any rules on accepted practice or orthodoxy as defined by an authority within a faith group. What the inmate believes is irrelevant—what matters is that the belief is sincere.

Caselaw on kosher diets is becoming clearer. Courts in two recent cases, *Rich*, 716 F.3d 5254 (11th Cir., 2013) and *Moussazaheh* 703 F.3d 781 (5th Cir., 2012), found for the inmates. An agency's claim of a cost burden is less convincing than it once was. However, if a larger proportion of the inmate population requests a kosher diet, costs could matter. The security argument also is increasingly difficult to win. Jails might consider reducing the need for special requests by offering dietary variety, such as more vegetarian and pork-free options.

In a claim, inmates must show their request stems from a sincerely held belief. Jails can examine the authenticity of that belief, as per *Cutter v. Wilkinson*, 544 US 709, 733, n. 13 (2005). RLUIPA bars an inquiry over whether a given tenet of a faith is central to observance. For many jail inmates, by the time the jail is able to determine sincerity, the inmate may have been released. A timely process should be followed. Policy in the Riverside Regional Jail (Virginia) allows a 90-day review period for according inmates special religious treatment. For prison inmates in Virginia, the process takes 6 months.

Sincerity can be assessed by reviewing what inmates are buying in the commissary, whether they are attending religious services, and what is learned in interviews with the chaplain or other representative. The purpose of the interview is not to examine or challenge the validity of a conversion, but to explore the inmate's understanding of the faith and look at what led to his/her adoption of it. Occasionally, some clergy can be offended by inmates making accommodation requests. As long as that's not likely to be a factor, a clergy interview can be useful.

Signs of questionable sincerity could include:

- A sudden, dramatic change in religious belief;
- "Selective" practice of the tenets of a faith;
- A unique set of practices/beliefs (Is this a "cut and paste" religion?);
- The inmate's overall religious history—consistent or frequently changing;
- The ways the inmate practices the new faith;
- Knowledge of the professed faith; and
- A request that is one of a sudden flood of religious diet requests from inmates.

Jails should be careful not to dismiss a request on the basis of a single disqualifier. If a grievance is filed, the best outcome for the jail is a summary judgment. The inmate's credibility is a key element.

Discussion

- A resource prepared by the Washington State Department of Corrections is available online at <http://www.doc.wa.gov/family/offenderlife/docs/HandbookReligiousBeliefsPractices.pdf>.
- The July/August 2012 issue of *American Jails* addressed the theme, "Keeping the Faith: Religious Issues in Jails." An article by Chaplain Gary Friedman sets forth some perspectives on determining sincerity of conversion to the Jewish faith. Marilyn Chandler Ford (Volusia County, Florida) favors making it easy for inmates to get kosher meals and easy for the privilege to be taken away, so the jail spends less staff time on gatekeeping.
- Lesser known religions are becoming a more significant concern. The Church of the New Song is an example of a faith that has no substantial literature and often little or no local community. Jails cannot deny requests simply on the basis that a faith is unfamiliar.
- Jails are not obliged to offer religious services for every inmate who comes in the door. Video visitation may be a useful option.

Regarding other accommodations, kufi head coverings have been approved for wear in the inmate's cell or in the chapel only, with prison-issued headgear permissible elsewhere, in *Jihad*, 2001 US Dist LEXIS 46930 (D. Minn 2011). In *Garner*, 2011 U.S. Dist LEXIS 59546 (S.D. Tex., 2011), the inmate was required to remove the kufi for inspections before and after religious services.

Bits and Pieces

Female officers in some jails are uncomfortable conducting strip searches of transgender women who were previously men. The question was raised whether a jail can reasonably accommodate a woman staff member's request not to conduct these searches on religious grounds. The question remains hard to answer.

A Rastafarian inmate received a jury award of \$1.50 after officers handled his dreadlocks.

South Dakota prisons recently banned tobacco, creating an issue for Lakota Sioux who use tobacco in religious ceremonies. Relief was very narrowly drawn in *Native American Council of Tribes v. Weber*, 897 F. Supp. 2d 828 (D.S.D. 2012), allowing the inmates limited access to tobacco. In more than 200 jails that allow ceremonial tobacco use, there have been no security problems, so it is difficult to assert they are likely to be a problem elsewhere. Prison cases may be more relevant to mainstream jails than information from tribal jails.

Psychogenic polydipsia is a rare condition that can be associated with schizophrenia. It causes the person to drink excessive amounts of water, leading to low blood sodium levels, which can affect heart function. Officers should be aware of this, particularly when working with inmates with a history of mental illness.

Presenter information: William C. Collins is an attorney in private practice in Olympia, Washington. He can be reached at (360) 754-9205.

OPEN FORUM

“Hot topic” sessions for the meeting are an opportunity for participants to discuss emerging issues. The sessions were coordinated and presented by Mitch Lucas, Charleston County, South Carolina.

TACTICAL TEAMS

Specially trained and equipped tactical teams provide additional security in many jails. Mitch Lucas described the teams in the Charleston County detention center. There are two, two-officer teams moving through the facility at any time. The teams provide incident response and high-risk escorts, and they are called to the sallyport if patrol officers arrive with an uncooperative arrestee. In an incident, their goal is to control the situation and limit injury.

Officers on the patrol unit wear shoulder-mounted videocameras and carry equipment for use up close or at a distance, such as pepper spray and Tasers®, sufficient to control a housing unit if necessary. Shotguns are loaded with two blanks and one less-than-lethal round. In an incident, the loud blanks usually have an immediate effect. The red targeting dot of a Taser® also can spur inmates into compliance. Officers have shot the projectile rounds about 10 times in incidents to date. Officers seldom need to physically handle inmates, and use of force has declined, so injuries to staff and inmates have been reduced.

Officers use the most appropriate technique to control the situation. Injuries have been less than when response teams had fewer tools at hand: injuries from inmate-on-officer assaults have dropped 23%, and by 32% for inmate-on-inmate assaults.

The shoulder cameras are small, inexpensive, and very effective. Their position captures what the officers see and do. (For more information, see Charleston County's *National Jail Exchange* article at <http://bit.ly/JailCameras>.) The agency has more than 700 fixed cameras as well. The team's incident response recordings are retained for 2 years, except for those needed for evidence of use of force incidents, which are retained for 10 years.

Charleston County considers full staffing of the teams to include 24 positions. About 40% of the officers who apply for positions on the team are successful. Women officers have qualified for the team on its physical fitness tests. Staff members are rotated on and off the team so officers get relief from the stress. Training strongly emphasizes interpersonal communication skills, and if necessary, the use of tactical tools rather than physical techniques to subdue inmates.

Ronaldo Myers (Richland County, South Carolina) said teams provide a show of force to intimidate inmates. Most will choose to comply, and a few will need a stronger intervention.

INMATE TELEPHONE CALLS

The Federal Communications Commission (FCC) is acting to reduce rates charged for interstate telephone calls to inmates by capping rates at \$0.24 per minute. Intrastate calls may be the FCC's next focus. The main rationale for the FCC's action is to ensure inmates have the family contact that has been shown to help keep them from returning to crime. There has been a perception that agencies and vendors have been engaged in unfair pricing. Regulators and advocacy groups do not understand how agencies use telephone proceeds for inmate welfare expenses. New regulations could cut into the profitability to vendors of providing inmate telephone service. If vendors have less incentive to provide jail telephone services, small jails in particular could be at risk.

In a presentation to the FCC, a team representing the American Jail Association emphasized that jails and prisons are different, and that most calls involving jail inmates are local.

Art Wallenstein pointed out that Montgomery County, Maryland, gets no commission from inmate phone calls and negotiated a lower rate instead. Other jails rely on their telephone commissions. Mitch Lucas posed the question, is it appropriate for inmates' families to fund GED programs or the purchase of board games? Meeting participants commented that GED programs are not required by law, but that government should pay for anything required by the state's minimum standards.

Similarly, jails that are moving to video visitation should set appropriate rates. At \$11 per online visit, video visitation may be less expensive than an in-person visit. As long as video visitation remains optional and not the only way to see an inmate face-to-face, rates should not matter.

The group also discussed recording of inmate phone calls for intelligence and investigation use. In Montgomery County, the state's attorney and police can record inmate calls only with a court order, and the jail is not involved at all. Another participant commented that the jail is a hub of criminal activity, and if a jail is not using inmate telephone intelligence, it is not making the community safe.

In some jails, security officers listen to a random sample of inmate calls. Software can automatically scan recorded calls for significant keywords. In some locations, inmates enter a PIN number to access the system, which generates an alert for detectives.

MEDIA ACCESS TO INMATES

Video visitation with inmates has opened some unexpected windows. Public defenders are objecting to media interviews with inmates in which the inmates admit to the details of their crime. Participants discussed whether jails have an obligation to warn inmates against self-incrimination, especially for younger detainees or those with mental health issues.

Many jails have a standard statement that inmates hear at the start of a call. Others don't let journalists interview inmates and/or advise the inmates to speak with their attorney first. Administrators also can ask the mental health staff if an inmate is functioning well enough to speak with the media. Ultimately, jails don't have the legal authority to determine what's best for a person in this situation.

Video visitation is somewhat different from the traditional visitation booth and is likely to become more widely used. Jails may benefit from considering new policies that anticipate these differences.

Media representatives can be asked to identify themselves as such in the online visitation registry process, but it still may not be easy to identify all media representatives. Randy Demory (Kent County, Michigan) said a judge signed a court order saying the jail could refuse media access via video but was later told the ruling was unenforceable. Agencies should document that inmates have been advised on the risks of speaking with the media. Some jails record their face-to-face or video visitation sessions (other than attorney visits), and others do not.

Dennis Lemma (Seminole County, Florida) suggested it might be useful to consider what information is redacted from a public records release; there may be similarities that jails can take advantage of to gain some control over information leaving the jail.

SCARS, MARKS, AND TATTOOS

Participants discussed the need for a software-based solution for identifying visual markers, such as tattoos, through images that are stored in the jail's inmate management system.

MEDICAL CARE CONTRACTS

Jail medical services contracts can include performance-based standards and other requirements or incentives to reduce costs for special treatment, such as off-site surgery. For example, a contract could specify that inmates needing specialty care or surgery are referred to a teaching hospital. Esteban Gonzales (Onondaga County, New York) found a statute that gives the state prison system responsibility for providing specialized medical services to jail inmates.

- Mike Wade (Henrico County, Virginia) said that the agency's contract nets it reduced hospitalization rates of up to 50% less than the stated costs for services.
- Mitch Lucas said that Charleston County has an agreement in place whereby the contractor pays for any inmate care costs in excess of \$40,000 per year, per inmate.
- Mark Foxall (Douglas County, Nebraska) said the jail wants to take advantage of Medicaid rates for pretrial inmates, but the state department of health and human services has been blocking it.
- Steve Morrison (Madison County, Alabama) said his agency places \$200,000 per quarter in a cost pool to cover any inmate care provided outside the jail. At year-end, the jail and the medical provider split whatever money is left in the pool.

USE OF RESTRICTED HOUSING

The American Civil Liberties Union (ACLU) and other advocacy groups have been taking an interest in correctional agencies' use of administrative segregation. Their concern is that agencies may be isolating inmates punitively and/or excessively, and that isolation is not conducive to mental health, physical well-being, or rehabilitation. Jail leaders should proactively educate legislators and others on

how and why they use administrative segregation, because it will be to jails' advantage to head off any future legislation based on inaccurate perceptions. Jail administrators also should be certain that the facility's use of segregated or solitary housing is always appropriate.

The American Correctional Association (ACA) is proposing the use of "restricted housing" as a preferred term for administrative segregation. Jeff Washington affirmed that jail policy needs to be clear in its use of the terms isolation, segregation, and restricted housing.

Mitch Lucas recommended that jail leaders educate legislators on the differences between local detention and state institutions with respect to restricted housing. Most of the information legislators hear about corrections is specific to prisons. Jail leaders also should emphasize how their policies on segregation follow state and national standards.

BOXERS OR BRIEFS?

A discussion of male inmate underwear identified cost advantages with briefs but more difficulty hiding contraband in boxer shorts.

Jails should have a clear rationale for their policies on clothing and underwear. Some jails allow inmates to keep their own t-shirts, whatever the color or as long as they have no logo or inappropriate message. Clothing that shows gang colors may be disallowed.

One rationale for only standard-issue clothing is that if there is an escape, the escapee can blend in more easily if he or she is wearing civilian clothes. Another concern is that jails that allow personal clothing may have more thefts. Allowing inmates to buy clothing through the commissary transfers some of the cost of clothing to inmates.

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ASSOCIATION UPDATES

AMERICAN JAIL ASSOCIATION

Presenter: Bob Kasabian, Executive Director, American Jail Association, Hagerstown, Maryland

AJA representatives gave the jail perspective on fees charged for inmate telephone calls at a meeting with the Federal Communications Commission (FCC). Funding reauthorization for the Mentally Ill Offender Treatment and Crime Reduction Act (MIOTRCA) has been held up in Congress.

AJA has been updating its member communications. The website now offers more content for members. AJA is also sending its magazine, *American Jails*, to all U.S. jails. Membership has grown significantly in the last year.

Conference attendance, training, and certification numbers have all been on the rise. All seats are full for each of three annual, 5-day offerings of the National Jail Leadership Academy, cosponsored by Sam Houston State University in Huntsville, Texas. Five Florida counties approached AJA this year to conduct a jail training academy in that state. The Southwest Florida Jail Leadership Initiative recently graduated its first class. AJA may expand this model by working with other states.

AMERICAN CORRECTIONAL ASSOCIATION NEWS

Presenter: Jeff Washington, Deputy Executive Director, American Correctional Association, Alexandria, Virginia.

ACA has been working with the Federal Communications Commission (FCC) on the issues of inmate telephone rates and contraband cell phones. ACA asked the FCC to extend the comment period on call blocking and has provided a briefing document on the corrections agency perspective.

ACA has been partnering with the PREA Resource Center on preparations for facility audits and provided auditors for the first round of PREA auditing in Federal Bureau of Prisons facilities.

International work continues in Mexico, Saudi Arabia, and the United Arab Emirates. ACA has provided accreditation reviews and training, including correctional management training.

LARGE JAIL NETWORK BUSINESS

FUTURE MEETING TOPICS

The next Large Jail Network meeting is scheduled to take place March 24–25, 2014, in Aurora, Colorado.

Meeting participants selected the following topics for the meeting:

- Interagency intelligence relationships
- Staff wellness programs
- Staff sexual misconduct
- Inmate grievance procedures
- Critical incident response

Appendix A

**Large Jail Network
September 2013 Final Meeting Agenda**

LARGE JAIL NETWORK MEETING

September 15-17, 2013

National Corrections Academy

Aurora, CO

Agenda

Sunday, September 15

6:00 p.m. Introduction and Overview Mike Jackson
NIC Correctional Program Specialist

6:30 p.m. INFORMAL DINNER Mike Jackson

7:30 p.m. Orientation for New Members

8:00 p.m. ADJOURN

Monday, September 16

8:00 a.m. Open Forum: Hot Topics..... Mitch Lucas
Charleston Co., South Carolina

10:00 a.m. Affordable Care Act..... Donna Strugar-Fritsch
Health Management Associates
Oakland, California

12:00 noon LUNCH

1:00 p.m. From Corrections Fatigue to Fullfilment: An Introduction ..Caterina G. Spinaris
Micheal D. Denhof
Desert Waters Correctional Outreach
Florence, Colorado

5:00 p.m. ADJOURN

Tuesday, September 17

8:00 a.m. Association UpdatesACA & AJA

8:30 a.m. PREA Resource Center..... Josh Delaney
U.S. Department of Justice
Caleb Asbridge, The Moss Group
Dee Halley, NIC
Art Wallenstein
Jeffery Newton
Don Pinkard

11:30 a.m. Future Meeting Topics Mike Jackson

12:00 noon LUNCH

1:00 Legal Updates Bill Collins

5:00 p.m. ADJOURN

Appendix B

**Large Jail Network
September 2013 Participant List**

First Name	Last Name	Job Title	Organization	City	State
Kurt	Ester	Captain	Adams County Sheriff's Office	Brighton	CO
Jared	Rowlison	Captain	Arapahoe County Sheriff's Office	Centennial	CO
Louie	Perea	Bureau Chief	Arapahoe County Sheriff's Office	Centennial	CO
Deborah	Richardson	Deputy Director	Baltimore County DOC	Towson	MD
Raul	Banasco	Jail Administrator	Bexar County Sheriff's Office	San Antonio	TX
Rick	Farris	Captain	Caddo Parish Sheriff's Office	Shreveport	LA
Mitch	Lucas	Asst. Sheriff	Charleston County Sheriff's Office	North Charleston	SC
Willis	Beatty	Chief Deputy	Charleston County Sheriff's Office	North Charleston	SC
Robert	Sowell	Jail Administrator	Clayton County Sheriff's Office	Jonesboro	GA
Reginald B	Scandrett	Chief of Jail Operations	DeKalb County Sheriff's Office	Decatur	GA
Elias	Diggins	Division Chief	Denver Sheriff's Office	Aurora	CO
Mark	Foxall	Director	Douglas County DOC	Omaha	NE
Brett	Whitlock	Commander	Escambia County Sheriff's Office	Pensacola	FL
Michael	Frost	Asst. Superintendent	Essex County Sheriff's Office	Middleton	MA
Marshall	Stowers	Captain	Greenville Det. Center	Greenville	SC
Don	Pinkard	Administrator	Gwinnett County Sheriff's Office	Dacula	GA
Thomas	Merkel	Director	Hennepin County Minnesota	Minneapolis	MN
Michael	Wade	Sheriff	Henrico County Sheriff's Office	Henrico	VA
Randy	Demory	Captain	Kent County Sheriff's Office	Grand Rapids	MI
Ed	Sweeney	Director	Lehigh County Prison	Allentown	PA
Rodney	Ballard	Director	Lexington-Fayette County	Lexington	KY
Dennis	Wilson	Sheriff	Limestone County Sheriff's Office	Groesbeck	TX
David	Fender	Chief	Los Angeles County Sheriff's Office	Los Angeles	CA
Mark	Bolton	Director	Louisville Dept. of Corrections	Louisville	KY
Cody	Scott	Chief Deputy	Lubbock County Sheriff's Office	Lubbock	TX
Steve	Morrison	Chief Deputy	Madison County Sheriff's Office	Huntsville	AL
Debra	Burmeister	Major	Milwaukee Sheriff's Office	Milwaukee	WI
Arthur	Wallenstein	Director	Montgomery Co. Corr. & Rehab.	Boyd's	MD
Drew	Brosh	Chief Deputy	Multnomah County Sheriff's Office	Portland	OR
Michael	Shults	Chief Deputy	Multnomah County Sheriff's Office	Portland	OR
Dane	Collins	Commander	Muscogee County Sheriff's Office	Columbus	GA
Esteban	Gonzalez	Chief Deputy	Onondaga County Sheriff's Office	Syracuse	NY
Jerry	Ursin	Chief Deputy	Orleans Parish Sheriff's Office	New Orleans	LA
Christopher	Kneisley	Major	Palm Beach County Sheriff's Office	West Palm Beach	FL
Mike	Gauger	Chief Deputy	Palm Beach County Sheriff's Office	West Palm Beach	FL

First Name	Last Name	Job Title	Organization	City	State
Ed	Beckman	Major	Pasco County Sheriff's Office	Land O' Lakes	FL
Michael	Tolerico	Warden	Passaic County Sheriff's Office	Paterson	NJ
James	Kimble	Deputy Chief	Pinal County Sherriff's Office	Florence	AZ
Timothy	Slaughter	Major	Pinellas County Sheriff's Office	Clearwater	FL
Gregory	Harris	Deputy Director	Prince George's County DOC	Upper Marlboro	MD
Ronaldo	Myers	Director	Richland County	Columbia	SC
Jerry	Gutierrez	Chief Deputy	Riverside County Sheriff's Office	Riverside	CA
Jeffery	Newton	Superintendent	Riverside Regional Jail	Hopewell	VA
Pam	Lofgreen	Chief Deputy	Salt Lake County Sheriff's Office	Salt Lake City	UT
Kimberly	Moule	Captain	San Joaquin County Sheriff's Office	French Camp	CA
Danny	Bardez Bain	Undersheriff	Sedgwick Co Sheriff's Office	Wichita	KS
Dennis	Lemma	Chief Deputy	Seminole County Sheriff's Office	Sanford	FL
Douglas	Jeske	Major	Snohomish County Sheriff's Office	Everett	WA
Wendell	France	Regional Exec. Dir.	State of Maryland	Finksburg	MD
Darren	Long	Major	Travis County Sheriff's Office	Austin	TX
Michelle	Robinette	Chief Deputy	Tulsa County Sheriff's Office	Tulsa	OK
Gary	Pentis	Undersheriff	Ventura County Sheriff's Office	Ventura	CA
Rick	Barrios	Commander	Ventura County Sheriff's Office	Ventura	CA
Marilyn	Chandler Ford	Director	Volusia County Div. of Corr.	Daytona Beach	FL
Andrea	Tack	Superintendent	Winnebago County Sheriff's Office	Rockford	IL

Appendix C

Index of Past LJN Meeting Topics

**LARGE JAIL NETWORK MEETING TOPICS
JUNE 1990 - PRESENT**

1990	June	System Approaches to Jail Crowding and Population Management
1991	January	Crowding Strategies and the Impact of Court Decisions
	July	Managing Jail Litigation Linking Jail and Community Programs
1992	January	Fair Labor Standards Act Writing and Negotiating Contracts
	July	Americans With Disabilities Act
1993	January	Blood-Borne and Airborne Pathogens Health Care Costs in Jails
	July	Privatization Programs for Women Offenders
1994	January	Public Policy and Intergovernmental Dimensions of the Role of Jails, Professional Associations in Corrections: Their Influence on National Perspectives of the Role of Jails
	July	Using Data and the Resources of the Bureau of Justice Statistics Developing Resources to Provide Inmate Programs
1995	January	Gangs, Jails and Criminal Justice
	July	Trends in Employee Relations Sexual Harassment
1996	January	The Dilemma of In-Custody Deaths The Crime Bill and Its Impact on Jails
	July	Juveniles in Adult Jails
1997	January	Meeting the Competition of Privatization
	July	21st Century Technology and its Application to Local Jail Information and Operational Needs.
1998	January	The Future of Our Workforce: Pre-employment Testing, Recruiting, Hiring, Training and Evaluating 'New Age' Employees {Generation X} Legal Issues Update - Update of PLRA {Prison Litigation Reform Act}
	July	Taking A Proactive Approach to the Prevention of Employee Lawsuits.
1999	January	Post-Traumatic Stress Syndrome and Critical Incidents: Preparation, Response, and Review Legal Issues Update
	July	Improving Opportunities for Successful Recruitment, Selection, and Retention of Staff.
2000	January	Criminal Justice System Coordination and Cooperation: How the Jail Benefits and the System Is Improved. Legal Issues Update.
	July	Exploring Issues and Strategies for Marketing, Funding, and Auditing Large Jail Systems.
2001	January	The Use of Data for Planning, Decision Making, and Measuring Outcomes.

**LARGE JAIL NETWORK MEETING TOPICS
JUNE 1990 - PRESENT**

	July	Understanding and Using the Data & Resources of the Bureau of Justice Statistics Staff Issues in Large Jails: Staff Utilization, Relationships, Conduct & Misconduct
2002	January	The Future of Jails, Corrections and Criminal Justice Legal Issues Update
	July	Inmate Medical Care Cost Containment Succession Planning for Future Jail Leaders
2003	January	Addressing the Future of Jail Legislation, Resources and Improving Funding Legislation, Resources and Funding: A Perspective from our Professional Associations The Role and Use of Professional Standards and Internal Affairs Large Jail Network Listserv and Web Technology Legal Issues Update - Health Insurance Portability and Accountability Act of 1996 (HIPAA), Admission Screening
	July	Defining the Future & Exploring Organizational Strategies Impact of Jail Population Changes on Jail Management Jail Standards & Accreditation Use of Technology for Jail Administration & Operation
2004	February	Emergency Preparedness: Planning and Implementation Contagious Disease Identification and Prevention Legal Issues Update - Inmate Medical Confidentiality, Involuntary Mental Health Treatment, Contract Provider Litigation, Arrestee Clothing Searches
	July	Effectively Managing Inmate Gangs in Jails Identifying Problems/Managing Inmate Mental Health
2005	January	Preparing Leaders in Corrections for the Future – NIC's Core Competency Project Training as a Strategic Management Tool Inmate Mental Health: Legal Issues, Management, Diversion Justice and the Revolving Door and Corrections Into the Next Decade
	July	Examining Federal and Local Benefits for Jail Detainees Ethics in the Administration of the Jail Human Resource Issues: Employee Recognition, Attendance, Restricted Duty
2006	January	Implementing PREA: The BJS Report Statistical Analysis: Crowding, Life Safety, Managing Staff Succession Planning The Question of TASERS Legal Issues Update
	July	Diagnosing, Analyzing and Improving the Jails Organizational Culture Planning for Catastrophes and Other Crises Prison Rape Elimination Act (PREA) and Jails Criminal Registration Unit: Hillsborough County, FL

**LARGE JAIL NETWORK MEETING TOPICS
JUNE 1990 - PRESENT**

2007	January	15th Anniversary Meeting Large Jail Systems Assessment Research Project Changing Organizational Culture Improving Collaboration Between Jails and Mental Health Systems Legal Issues Update
	September	Jail Inmate Reentry Programs: Public, Private, Non-Profit Involvement Jail Inmate Reentry Issues on a County Level Responding to Women Offenders in Large Jails Excited Delirium: A Problem to be Eliminated or Managed Recruiting, Hiring and Retention of Staff
2008	March	Immigration and Customs Enforcement 287(g) Program Contract Services Media Relations Workforce Development Legal Issues Update
	September	Faith Based Programs Human Resource Management Emerging Technologies Proactive Discipline
2009	March	Illegal Alien Programs Transgender, Lesbian, Gay and Intersex Inmates Proactive Discipline Part 2 PREA Update Legal Issues Update
	September	PREA Commission Presentation Legislative Updates Successful Pre-Trial and Criminal Justice System Collaborations USDOJ - ADA, CRIPA, LEP Presentation Middle Management Training Programs
2010	March	The Trend of Medical Issues in the Future Creating a Culture of Leadership Creating Efficiencies in the Booking Area R.I.S.E. Program (Henrico County, VA) Coping Skills with and for Staff in Fiscally Tight Times Legal Updates with Bill Collins
	September	ACA Core Jail Standards Comstat Approaches to Accountability and Leadership Battling Complacency in Line Staff and 1st Line Supervisors Return to Work/Terminating the Legitimately Ill Employee Addressing Staff Inmate Fraternization

**LARGE JAIL NETWORK MEETING TOPICS
JUNE 1990 - PRESENT**

2011	March	Legal Updates with Bill Collins Jail Suicide Update PREA Effective Use of Data with Policy Makers
	September	Recovering Jails Staff Issues – Applicants, Discipline and Rumor Control Technology Updates Dealing with FMLA Abuses Prescription Drug Epidemic and the Impact on Jails
2012	March	Legal Issues Update Technology Update Inmate Behavior Management Regulatory Investigations Affecting Jails
	September	Media Relations Civilianization and Use of Volunteers Outsourcing: Pro and Con Mental Health Care in Jails Reentry from Jail
2013	March	No meeting
	September	Affordable Care Act From Corrections Fatigue to Fulfillment PREA Resource Center Legal Issues Update