

# Fulton County Jail – Monitor's Second Report

## Compliance Progress on Benchmark-Relevant Provisions

Monitor: Kathleen M. Kenney, Lead Monitor    Report Filed: February 20, 2026    Monitoring Period: May 2025 – February 2026

Site Visit: October 6–10, 2025    Provisions Reviewed: All 35+ Benchmark-relevant paragraphs

### Monitor's Headline Findings – Benchmark-Relevant Areas

The Monitor's Second Report identifies systemic data and technology failures as the primary barrier to compliance across every section where Benchmark Analytics can help. Key direct quotes from the report:

- "The FCSO currently relies on a patchwork of systems and processes that do not communicate with one another... making it extremely difficult to track the status of investigations, identify patterns or trends."
- "The early warning system exists, but it does not pull information from all necessary sources, including grievances and external complaints."
- Training is tracked via "manual process with handwritten forms"; Monitor recommends FCSO "develop an electronic method for tracking staff training."
- A complete use-of-force trend analysis will not be available until early 2027 under the current approach.

#### Non-Compliance Hotspots

¶65–67 (Staffing tracking), ¶93 (Pattern analysis), ¶102 (Investigative reports), ¶106 (Sentinel event review), ¶125 (Violence data), ¶149–150 (UoF data system), ¶281–282 (RH tracker), ¶294 (QA program), ¶305 (Monthly misconduct reports)

#### Partial Compliance – Progress Being Made

¶37–39 (Training records), ¶64 (Shift staffing), ¶82–83 (Grievance timelines), ¶97–98 (Investigations), ¶123–124 (Quarterly staffing report), ¶148 & 151 (UoF tracking & EWS), ¶293 (QA framework), ¶295–300 (Implementation)

#### Substantial Compliance Achieved

¶99 (Investigative file cross-referencing), ¶301–302 (Compliance Coordinator hired and reporting structure established)

#### Monitor's Technology Recommendation

The Monitor explicitly calls for "a single, integrated platform" to replace fragmented databases across force tracking, grievances, investigations, and the early warning system – precisely what The Benchmark Blueprint™ provides.

### § III – Policies, Procedures, and Training ¶¶ 37–39

BMS

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶ 37	PARTIAL	Document all staff trainings and certify each staff member attended required training and demonstrated competency.	Training tracked via "manual process with handwritten forms." FCSO had "no responsive records" when asked for internal audits verifying staff completion. Monitor recommends "an electronic method for tracking staff training."	BMS – Training Records Module BMS replaces handwritten forms with electronic per-officer training

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				records – exactly what the Monitor is recommending. Produces audit-ready compliance reports on demand.
¶ 38	PARTIAL	Fully train all Custody Staff before allowing any officer to work without direct supervision in a housing unit.	FCSO <i>"did not have records responsive"</i> to a request about whether staff working without direct supervision had completed required training. No system linking training completion to assignment eligibility.	<b>BMS – Training + Assignment Integration</b> BMS can link training completion status to deployment eligibility, blocking unsupervised assignment until prerequisites are met.
¶ 39	PARTIAL	Train all supervisory and leadership personnel in supervision requirements and leadership skills.	Again, FCSO responded that <i>"no responsive records exist"</i> when asked for supervisory training audits. Supervisory training tracking requires a comprehensive update.	<b>BMS – Tiered Training Tracking</b> BMS tracks supervisory-specific training separately from line staff – creating the differentiated documentation needed to satisfy this provision.
<p>Monitor's core recommendation across all three provisions: implement an electronic training tracking system. This is BMS's baseline function.</p>				

## § V.C – Protection from Harm: Staffing and Supervision ¶¶ 61-69

BMS

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶¶ 61-63	PARTIAL	Conduct staffing analysis; develop detailed Staffing Plan	FCSO partnered with CGL Group for staffing analysis. Pilot testing of a daily scheduling	<b>BMS – Workforce Data</b>

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
		with mandatory posts, shift levels, and relief factors. Submit to Monitor.	report began November 2025. County intends to transition to <i>Telestaff</i> for integrated scheduling/payroll. Progress noted but plan not yet finalized.	BMS provides the position-level data infrastructure needed to build and sustain the Staffing Plan — tracking posts, shift assignments, and coverage against minimum requirements.
¶ 64	PARTIAL	Document on each shift report whether minimum staffing requirements were met.	Pilot shift scheduling report launched November 2025. FCSO managers and the Monitoring Team can now "better evaluate post vacancies." System in place but not yet fully operational or standardized.	<b>BMS – Shift Documentation</b> BMS creates the per-shift compliance record required — replacing the pilot spreadsheet with a permanent, auditable system.
¶ 65	NON-COMPLIANCE	Track and report unfilled posts; develop corrective action plans to address deficiencies.	Custody staffing reduced <i>10% from December 2024 to December 2025</i> (416 → 373 filled positions). Unfilled post tracking is not yet systematic.	<b>BMS + C.A.R.E.®</b> BMS tracks vacancy data in real time; C.A.R.E. structures the corrective action plan workflow when post deficiencies are identified.
¶ 66	NON-COMPLIANCE	Track and report on lack of assigned supervisory staff; develop corrective action plans.	Supervisory coverage gaps not yet systematically tracked or reported. Staffing shortage " <i>contributes to extreme violence and security violations</i> " per the Monitor.	<b>BMS – Supervisory Coverage Tracking</b> BMS's Benchmark 360® supervisory data category tracks coverage by

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
				shift and unit – enabling the gap reporting required here.
¶ 67	NON-COMPLIANCE	Document security rounds electronically; Watch Commander reviews each shift; Chief Jailer reviews monthly sample.	Electronic rounds documentation not yet fully implemented. " <i>Essential correctional practices, such as timely security checks, are not being adequately carried out</i> " due to staffing shortages.	<b>BMS – Rounds Documentation Integration</b> BMS ingests electronic rounds data and creates the supervisory review logs required by this provision.
¶¶ 68–69	PARTIAL	Supervisor documentation requirements; post order compliance.	Partial structures in place but documentation is inconsistent and not yet meeting decree standards.	<b>BMS</b> BMS captures supervisory activity logs and post-order compliance in a structured format.
<p>The Monitor's key message: staffing crisis is the #1 barrier to compliance. Benchmark addresses the data tracking side – ensuring every vacancy, gap, and corrective action is documented even during the crisis.</p>				

§ V.F/G – Grievances, Incident Reporting & Investigations ¶¶ 82–83, 86–89, 92–99, 102, 106

C.A.R.E.®

BMS

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶¶ 82–83	PARTIAL	Grievance acknowledgement within 24 hrs; final decision within 7 days.	Grievance system exists but timeline enforcement is inconsistent. Grievance and incident data stored in separate systems with no cross-referencing.	<b>C.A.R.E.® – Deadline Enforcement</b> C.A.R.E. enforces the 24-hr and 7-day deadlines automatically, escalating overdue items and documenting each step for monitor review.

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶¶ 86-89	PARTIAL	Standardized incident reports entered electronically within 24 hrs; supervisor review documented.	Incident reporting occurs in Odyssey but process is not yet standardized. Supervisory review inconsistent. The monitor found <i>"insufficient documentation of findings, and inconsistent follow-up actions."</i>	<b>BMS + C.A.R.E.®</b> BMS stores incident data per officer; C.A.R.E. enforces the structured supervisor review workflow with required sign-offs at each tier.
¶ 92	SUBSTANTIAL	Daily incident review briefing process.	<i>"The daily incident briefing process remains a stable and effective component of operations."</i> This is one of the few bright spots in this section.	<b>BMS – Maintains &amp; Builds on Progress</b> BMS can feed data into the daily briefing process and make it exportable for monitor reporting.
¶ 93	NON-COMPLIANCE	Examine incident data for patterns and trends by floor, group, shift; identify remedial measures.	<i>"Incident reports, grievances, internal investigations... are all captured in different systems or repositories, many of which lack standardization or basic categorization. This fragmentation makes it extremely difficult... to identify patterns or trends."</i>	<b>First Sign® + BMS</b> This is the exact gap First Sign® closes – aggregating data across sources and surfacing patterns by floor, shift, and individual that fragmented systems cannot detect.
¶¶ 97-99	PARTIAL / SUBSTANTIAL	Investigation file system with numbered files cross-referenced to incidents; timeliness monitoring.	¶99 (cross-referencing) at Substantial Compliance. ¶97-98 at Partial – <i>"early exploration of a centralized investigative file system"</i> underway. Not yet fully operational.	<b>C.A.R.E.® – Centralized Case Management</b> C.A.R.E. is the centralized investigative file system

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				the Monitor is calling for — numbered files, cross-referenced incidents, documented timeliness, all in one platform.
¶ 102	NON-COMPLIANCE	Written investigative report to Chief Jailer within 30 days with substantiation finding.	30-day deadline not being consistently met. Written reports lack required findings elements. <i>"Substantial compliance with most provisions is not anticipated before 2027"</i> without systemic improvements.	<b>C.A.R.E.® — Report Templates + Deadline Tracking</b> C.A.R.E.'s structured templates and 30-day deadline enforcement directly address both failures the Monitor identifies here.
¶ 106	NON-COMPLIANCE	Semi-annual sentinel event review; identify systemic remedial measures.	No semi-annual review process established. Pattern analysis capacity does not yet exist.	<b>BMS + C.A.R.E.®</b> BMS provides the longitudinal data; C.A.R.E. manages the corrective action workflow from review through remediation.

## § V.J — Protection from Harm: Data Tracking and Reporting ¶¶ 123–127

BMS

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶ 123	PARTIAL	Quarterly Staffing Update (hiring, attrition, vacancies, overtime) — 4× per year.	Q2 and Q3 2025 updates provided. Q3 included recruitment activities (37 career fairs), hiring/attrition breakdowns, and overtime data	<b>BMS — Quarterly Report Automation</b>

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
			(67,276 OT hours in Q3, 46,283 in Jail Operations). Partial because not all required data elements consistently included.	BMS's Benchmark 360® data architecture organizes all required categories for automatic quarterly export – eliminating the manual compilation that produces incomplete reports.
¶ 124	PARTIAL	Track all grievances; analyze for patterns to prevent violence.	Grievance data tracked but not systematically analyzed for patterns. Grievance system not connected to incident or UoF systems – preventing cross-system pattern analysis required by this provision.	<b>BMS + First Sign®</b> BMS centralizes grievance data; First Sign® incorporates it into behavioral pattern detection – the specific gap the Monitor identifies (grievances not feeding into EWS).
¶ 125	NON-COMPLIANCE	Track homicides, assaults, stabbings, hospital transports, contraband – disaggregated by facility and demographics.	Data exists but is not consistently tracked in a system that enables the demographic disaggregation required. No unified reporting capability.	<b>BMS – Multi-Dimensional Reporting</b> BMS supports the facility-level and demographic breakdowns required by this provision without manual analysis.
¶¶ 126-127	PARTIAL	Sexual abuse data tracking; monthly population reporting.	Population reports provided (July–November 2025, fluctuating 1,958–2,079 at Main Jail). Sexual abuse data partially	<b>BMS – Scheduled Monthly Reports</b>

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
			tracked. Monthly cadence established but not all required elements present.	BMS automates the monthly reporting cadence, ensuring all required data categories are captured and submitted on time.

§ VI – Use of Force: Reviews and Data Tracking ¶¶ 131-133, 142-143, 146,

148-151

First Sign®

C.A.R.E.®

BMS

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶¶ 131-133	PARTIAL / NR	Annual UoF training + refresher; supervisory review training; document all training.	UoF policies in place but training curricula require substantial revision. ¶131 (curriculum development) Not Rated; ¶¶132-133 Partial. Training records are the same handwritten system cited in ¶37.	<b>BMS – UoF Training Records</b> BMS tracks UoF-specific training separately by role (line staff vs. supervisor) with completion certificates and renewal dates.
¶¶ 142-143	PARTIAL	UoF supervisor review with 12 documented elements; Watch Commander and Lt. Colonel sign-off chain.	Reviews are occurring but <i>"procedures... are often overly complex... leading to delays in completing reviews, insufficient documentation of findings, and inconsistent follow-up actions."</i> None of the 20 reviewed incidents reflected responses consistent with industry standards.	<b>C.A.R.E.® – Structured UoF Review Workflow</b> C.A.R.E. provides checklist-enforced templates for all 12 required elements and enforces multi-tier sign-offs – simplifying the review process that the Monitor

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
				says is too complex.
¶ 146	PARTIAL	Use-of-Force Review Committee; semi-annual systemic trend review; corrective action.	Committee exists but <i>"the absence of a formal investigative manual and force tracking systems"</i> prevents meaningful trend analysis. Technical assistance experts engaged in November 2025 to develop implementation plan.	<b>BMS + First Sign®</b> BMS provides the data; First Sign® performs the trend analysis the committee is required to do – turning a manual committee review into an analytics-driven process.
¶ 148	PARTIAL	Develop a system tracking all UoF by staff member + related complaints/grievances.	Can track by incident number but underreporting of lower-level force. <i>"No direct connection between use of force grievances, the use of force review system, and the employee early warning system."</i> County approved Axon replacement – not yet implemented.	<b>BMS – Integrated UoF Record per Officer</b> BMS maintains the longitudinal UoF record per officer. When Axon is implemented, BMS is the platform that connects force data to grievances and the EWS – filling the exact gap the Monitor identifies.
¶ 149	NON-COMPLIANCE	Tracking system must include supervisor names, investigation timeline, disciplinary action, OPS referral status.	<i>"The current databases... do not capture all of the information required by this provision."</i> Full compliance <i>"not expected to be achieved within the next reporting period."</i>	<b>BMS + C.A.R.E.®</b> BMS and C.A.R.E. together capture every required data element in ¶149(a)–(d) – providing the complete tracking system the

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
				Monitor says does not currently exist.
¶ 150	NON-COMPLIANCE	Every 6 months: analyze force data for underreporting and staff/unit-specific trends; submit to Monitor.	<i>"A complete and accurate use-of-force trend analysis report will not be available until early 2027"</i> under current systems. FCSO <i>"does not conduct meaningful evaluations of use-of-force data trends."</i>	<b>First Sign® + BMS</b> First Sign® is purpose-built for this analysis – surfacing staff- and unit-specific trends from integrated data and generating the semi-annual summary required for monitor submission.
¶ 151	PARTIAL ★ EWS MANDATE	Effective Early Warning System screening UoF, complaints, grievances by staff member. 6-month flagged-staff list to Monitor.	EWS exists but <i>"does not include grievance allegations and complaints received from external sources."</i> Monitor: EWS <i>"requires significant updates."</i> Full compliance <i>"will not be completed during the next review period... likely to become a focus in late 2026."</i>	<b>First Sign® – Direct Solution</b> First Sign® integrates grievances, external complaints, UoF, and sick leave into a single early warning platform – specifically closing the gap the Monitor identifies. Implementing First Sign® is the most direct path to compliance with this provision.
<p>The Monitor's own words: "Because early warning systems rely on information from other database systems, such as the use-of-force system, employee sick leave records, and the grievance system, full compliance with this provision will not be possible until these supporting databases are properly enhanced." – This is exactly what The Benchmark Blueprint™ provides.</p>				

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶ 281	NON-COMPLIANCE	Centralized RH tracker with placement date/ time, reason, charge status, projected and actual release dates, MH consultations.	No centralized tracker in place. Data stored in disparate systems without standardized fields.	<b>BMS – Centralized Data Architecture</b> BMS provides the centralized tracker structure with all required data fields – eliminating the fragmentation the Monitor cites.
¶ 282	NON-COMPLIANCE	System-wide RH data including incidence/ prevalence, recidivism rates, length of stay, and demographic breakdowns.	No system capable of producing this demographic-disaggregated analysis currently exists.	<b>BMS – Multi-Dimensional Reporting</b> BMS's reporting supports demographic disaggregation across all required categories without manual analysis.

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
¶ 293	PARTIAL	Quality Assurance Program established; continues post-decree termination.	NaphCare has a QA policy framework on paper. <i>"The Monitoring Team has not received sufficient evidence demonstrating that an operational, sustainable Quality Assurance Program has been implemented." "FCSO will need to bolster its compliance team capacity."</i>	<b>BMS – QA Data Infrastructure</b> BMS provides the data platform for an operational QA program – moving from policy on paper to measurable

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				outcomes tracked in a system.
¶ 294	NON-COMPLIANCE	QA program collects and analyzes data for patterns and trends; develops corrective action plans with timeframes, responsible parties, and outcome measures.	No operational corrective action planning process in place. Pattern analysis cannot occur without unified data infrastructure.	<b>BMS + C.A.R.E.®</b> BMS provides analytics; C.A.R.E. structures corrective action plans with all required elements (timeframe, responsible party, outcome measures).
¶¶ 295-300	PARTIAL	Implementation plans submitted every 6 months; records maintained and produced to Monitor on request.	Implementation plans submitted on time for June and December 2025. Plans approved. Records production improving but not yet systematic.	<b>BMS – Records Management</b> BMS's centralized records architecture ensures all compliance documentation is retrievable within the 14-day production window required by the Monitor.
¶¶ 301-302	SUBSTANTIAL	Full-time Compliance Coordinator hired; reporting structure established.	Compliance Coordinator position filled during this review period. <i>"These personnel are critical in drafting and updating implementation plans."</i> Monitor notes the current team size is <i>"not sufficient"</i> – recommends at least 5 FTEs.	<b>BMS – Compliance Coordinator's Platform</b> BMS dramatically reduces the Compliance Coordinator's manual workload – enabling one person to produce data packages that would otherwise require

PARAGRAPH	STATUS	REQUIREMENT	MONITOR'S FINDING	HOW BENCHMARK HELPS
				multiple analysts.
¶ 305	NON-COMPLIANCE	Monthly notification to Monitor of deaths, overdoses, serious injuries, substantiated misconduct findings.	Monitor " <i>received memoranda documenting that the FCSO Internal Affairs Unit had investigated no in-custody deaths classified as homicides</i> " for Aug-Oct. Recommends FCSO revise Sheriff's Monthly Report Policy (700-28) to automate this notification.	<b>BMS – Scheduled Monthly Reports</b> BMS automates this monthly notification – ensuring every required category is captured and submitted on time without manual policy compliance.

### Compliance Status Summary – All Benchmark-Relevant Provisions

PROVISION	STATUS	PRIMARY PRODUCT
¶ 37 – Training documentation & certification	PARTIAL	BMS
¶ 38 – Training before unsupervised deployment	PARTIAL	BMS
¶ 39 – Supervisory training tracking	PARTIAL	BMS
¶¶ 61–63 – Staffing analysis & plan	PARTIAL	BMS
¶ 64 – Per-shift staffing documentation	PARTIAL	BMS
¶ 65 – Unfilled post tracking + corrective action	NON-COMPLIANCE	BMS / C.A.R.E.®
¶ 66 – Supervisory coverage tracking	NON-COMPLIANCE	BMS
¶ 67 – Electronic rounds documentation	NON-COMPLIANCE	BMS
¶¶ 68–69 – Supervisor documentation	PARTIAL	BMS
¶¶ 82–83 – Grievance timeline enforcement	PARTIAL	C.A.R.E.®
¶¶ 86–89 – Incident report + supervisor review	PARTIAL	BMS / C.A.R.E.®
¶ 92 – Daily incident briefing	SUBSTANTIAL	BMS
¶ 93 – Pattern & trend analysis		First Sign® / BMS

PROVISION	STATUS	PRIMARY PRODUCT
	NON-COMPLIANCE	
¶¶ 97-98 – Investigation file system	PARTIAL	C.A.R.E.®
¶ 99 – Incident cross-referencing	SUBSTANTIAL	C.A.R.E.®
¶ 102 – 30-day investigative report to Chief Jailer	NON-COMPLIANCE	C.A.R.E.®
¶ 106 – Semi-annual sentinel event review	NON-COMPLIANCE	BMS / C.A.R.E.®
¶ 123 – Quarterly Staffing Update	PARTIAL	BMS
¶ 124 – Grievance pattern tracking	PARTIAL	BMS / First Sign®
¶ 125 – Violence data + demographics	NON-COMPLIANCE	BMS
¶¶ 131-133 – UoF training documentation	PARTIAL / NR	BMS
¶¶ 142-143 – UoF supervisor review chain	PARTIAL	C.A.R.E.®
¶ 146 – UoF Review Committee (semi-annual)	PARTIAL	BMS / First Sign®
¶ 148 – UoF tracking system by staff member	PARTIAL	BMS
¶ 149 – Required UoF data elements (4 categories)	NON-COMPLIANCE	BMS / C.A.R.E.®
¶ 150 – Semi-annual UoF trend analysis	NON-COMPLIANCE	First Sign® / BMS
¶ 151 – Early Warning System (explicit mandate)	PARTIAL	First Sign®
¶¶ 281-282 – Restrictive Housing data tracker	NON-COMPLIANCE	BMS
¶ 293 – Quality Assurance Program	PARTIAL	BMS
¶ 294 – QA data analysis + corrective action plans	NON-COMPLIANCE	BMS / C.A.R.E.®
¶¶ 295-300 – Implementation plans + records	PARTIAL	BMS
¶¶ 301-302 – Compliance Coordinator	SUBSTANTIAL	BMS
¶ 305 – Monthly death/injury/misconduct notification	NON-COMPLIANCE	BMS