

**Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails**

Interim Final

Date of Report November 05, 2019

Auditor Information

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Company Name: Melinda Allen & Associates, LLC	
Mailing Address: P.O, Box 703	City, State, Zip: Braselton, GA 30517
Telephone: 706-449-0003	Date of Facility Visit: August 15-16, 2019

Agency Information

Name of Agency: Athens-Clarke County Department of Corrections	Governing Authority or Parent Agency (If Applicable): Unified Government of Athens-Clarke County		
Physical Address: 2825 County Farm Road,	City, State, Zip: Athens, Georgia 30605		
Mailing Address: Click or tap here to enter text.	City, State, Zip: Click or tap here to enter text.		
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: Click or tap here to enter text.			

Agency Chief Executive Officer

Name: Ray Covington, Warden	
Email: ray.covington@accgov.com	Telephone: (706) 613-3400

Agency-Wide PREA Coordinator

Name: Daniel Young	
Email: daniel.young@accgov.com	Telephone: (706) 613-2022

PREA Coordinator Reports to: Warden Covington	Number of Compliance Managers who report to the PREA Coordinator 0
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Facility Information

Name of Facility: Athens-Clarke County Corrections Institute

Physical Address: 2825 County Farm Road

City, State, Zip: Athens, GA 30605

Mailing Address (if different from above):

Click or tap here to enter text.

City, State, Zip: Click or tap here to enter text.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: <https://www.accgov.com/7110/PREA>

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: Click or tap here to enter text.)

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:

None

Warden/Jail Administrator/Sheriff/Director

Name: Ray Covington

Email: ray.covington@accgov.com

Telephone: 706-613-3400

Facility PREA Compliance Manager

Name: Daniel Young

Email: daniel.young@accgov.com

Telephone: 706-613-2022

Facility Health Service Administrator N/A

Name: Kandy Frazier		
Email: kandy.frazier@correcthealth.org	Telephone: (706) 613-3400	

Facility Characteristics	
Designated Facility Capacity:	200
Current Population of Facility:	183
Average daily population for the past 12 months:	178
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input checked="" type="checkbox"/> Males <input type="checkbox"/> Both Females and Males
Age range of population:	18+
Average length of stay or time under supervision:	2 years
Facility security levels/inmate custody levels:	Minimum and Medium
Number of inmates admitted to facility during the past 12 months:	306
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	306
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	285
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input type="checkbox"/> Federal Bureau of Prisons <input type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider

	<input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input checked="" type="checkbox"/> N/A
Number of staff currently employed by the facility who may have contact with inmates:	42
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	7
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	2
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	16
Physical Plant	
Number of buildings: Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.	4
Number of inmate housing units: Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a	7

<p>control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	
<p>Number of single cell housing units:</p>	<p>2</p>
<p>Number of multiple occupancy cell housing units:</p>	<p>7</p>
<p>Number of open bay/dorm housing units:</p>	<p>7</p>
<p>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</p>	<p>7</p>
<p>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A</p>
<p>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>Medical and Mental Health Services and Forensic Medical Exams</p>	
<p>Are medical services provided on-site?</p>	<p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are mental health services provided on-site?</p>	<p><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<p><input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)</p>

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	3
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input checked="" type="checkbox"/> Other (please name or describe: Georgia Department of Corrections Investigators) <input type="checkbox"/> N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	3
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input checked="" type="checkbox"/> Other (please name or describe: Georgia Department of Corrections Investigators may be used in sensitive situations) <input type="checkbox"/> N/A

Audit Findings

Audit Narrative

The Athens- Clarke County Department of Corrections PREA audit was conducted August 15-16, 2019. The auditor wishes to extend its appreciation to Warden Ray Covington and his staff for the professionalism they

demonstrated throughout the audit and for the kindness and hospitality they showed the auditor. The auditor also wishes to compliment Superintendent Daniel Young for his work in organizing the audit files that for the on-site audit. This preparation enabled the audit to move forward very efficiently through the documentation phase of the audit.

Prior to conducting the onsite visit to the facility, the auditor requested that the facility identify a comprehensive list of inmates, staff, volunteers, and contractors along with relevant facility records to determine the universe of information from which the auditor would sample during the onsite portion of the PREA audit. From these listings, the auditor selected representative samples for interviews (i.e., inmate and staff) and document reviews during the onsite portion of the audit. The listings requested by the auditor in the pre-onsite audit phase included:

1. Complete inmate roster (provide based on actual population on the first day of the onsite portion of the audit)
2. Youthful inmates (if any)
3. Inmates with disabilities (i.e., physical disabilities, blind, deaf, hard of hearing, cognitive disabilities)
4. Inmates who are Limited English Proficient (LEP)
5. Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) Inmates (identify all inmates in each category)
6. Inmates in segregated housing
7. Inmates who reported sexual abuse
8. Inmates who reported sexual victimization during risk screening
9. Complete staff roster (indicating title, shift, and post assignment)
10. Specialized staff which includes:
 - Agency contract administrator
 - Intermediate- or higher-level facility staff responsible for conducting and documenting unannounced rounds
 - Line staff who supervise youthful inmates, if any
 - Education staff who work with youthful inmates, if any
 - Program staff who work with youthful inmates, if any
 - Medical staff
 - Mental health staff
 - Non-medical staff involved in cross-gender strip or visual searches
 - Administrative (human resources) staff
 - SAFE and/or SANE staff
 - Volunteers who have contact with inmates
 - Contractors who have contact with inmates
 - Criminal investigative staff (e.g., at agency level, facility level, external entity, etc.)
 - Administrative investigative staff (e.g., at agency level, facility level, external entity, etc.)
 - Staff who perform screening for risk of victimization and abusiveness
 - Staff who supervise inmates in segregated housing
 - Staff on the sexual abuse incident review team
 - Designated staff member charged with monitoring retaliation

- First responders , security staff (individuals who have responded to an incident of sexual abuse)
 - First responders , non-security staff (individuals who have responded to an incident of sexual abuse)
 - Intake staff
11. All grievances made in the 12 months preceding the audit
 12. All incident reports from the 12 months preceding the audit
 13. All allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit including:
 - Total number of allegations
 - Number determined to be substantiated, unsubstantiated, or unfounded
 - Number of cases in progress
 - Number of criminal cases investigations
 - Number of administrative case investigations
 14. All hotline calls made during the 12 months preceding the audit

Upon arrival to the Athens-Clarke County Department of Corrections, the auditor met with the facility leadership to include Warden Covington and Superintendent (PREA Coordinator) Daniel Young. The auditor explained the audit process and expectations for the audit. The auditor was given a through tour of the facility after the in-brief meeting.

After the on-site review, the auditor began the interviews and review of investigative files and other proof documentation. The facility provided the auditor the requested listings of documents, files and records. From this information, the auditor selected and reviewed a variety of files, records and documents summarized in the following table and discussed in detail below:

Personnel and Training Files.

The facility has 42 full and part-time staff. The auditor reviewed 12 personnel records that included 3 individuals hired within the past 12 months as well as 9 existing staff members. Additionally, the auditor reviewed one staff member who received a promotion in the last year. The sample included a variety of job functions and post assignments, including both supervisory and line staff. Files for two volunteers and one contractor who have contact with inmates were sampled randomly across functional service areas. Additionally, the auditor reviewed 12 training files for staff members that were selected randomly using a 3rd number method (i.e., 20) from the listing of all staff.

Inmate Files

On the first day of the onsite phase of the audit, the inmate population was 177. A total of 20 inmate records were reviewed by the auditor. Twenty inmate records were sampled across all housing units in the facility; the auditor was unable to locate a targeted inmate to interview and review file. This correctional institution is a work camp that only receives inmates in good

health and physical condition. At the time of the audit, there were no inmates being housed that met the qualification of targeted inmates.

During the past year, there were no inmates that reported sexual abuse; there were no inmates that reported prior sexual victimization.

Grievances

In the past year, the facility received 4 grievances; none of the grievances were identified that alleged sexual abuse or sexual harassment. The auditor reviewed the list of grievances from the facility.

Incident Reports

The facility reported there were 26 incident reports for the 12 months prior to the audit. None of the incidents were related to PREA incidents.

Investigation Files. During the past 12 months, there were 1 total allegations of PREA related misconduct at the facility. Upon initial investigation it was determined the outcry to the PREA Hotline was not a PREA incident at all.

The Auditor conducted the following number of inmate interviews during the onsite phase of the audit:

Random Inmates (Total) = 20
Targeted Inmates* (Total) = 0
Total Inmates Interviewed = 20

The breakdown of the number of targeted inmate interviews is as follows:

- Youthful Inmates (0 identified)
- Inmates with a Physical Disability (0 identified)
- Inmates who are Blind, Deaf, or Hard of Hearing (0 identified)
- Inmates who are LEP (0 identified)
- Inmates with a Cognitive Disability (0 identified)
- Inmates who Identify as Lesbian, Gay, or Bisexual (0 identified)
- Inmates who Identify as Transgender or Intersex (0 identified)
- Inmates in Segregated Housing for High Risk of Sexual Victimization (0 identified)
- Inmates Who Reported Sexual Abuse (0 identified)
- Inmates Who Reported Sexual Victimization During Risk Screening (0 identified)

Total targeted inmate interviews* = 00

In order to complete the minimum number of inmate interviews, additional randomly selected inmates were interviewed.

When the on-site audit was completed, the auditor conducted an exit debrief. While the auditor could not give the facility a final ruling/finding, as there was a lot of proof documentation

interviews to review, the auditor did discuss areas where the facility had questions as to the compliance with specific standards. The auditor did give an overview of the audit and thanked the staff for their hard work and commitment toward compliance with the Prison Rape Elimination Act. After the on-site audit, the auditor reviewed proof documents secured while on-site and began to triangulate the evidence for compliance with the PREA Standards.

Facility Characteristics

The Athens- Clarke County Department of Corrections is located in Athens, Georgia approximately 50 miles northeast of Atlanta, GA in Athens-Clarke County. It is a medium security institution that can hold 200 adult males. Inmates are housed in seven open dormitories. There are two single cell housing units. Inmates who qualify can participate in work crews that work outside of the facility doing various labor for the Athens- Clarke county government, including working for the grounds maintenance, fleet, landfill, facilities maintenance, Leisure Services, State DOT, Heavy Maintenance Shop, Fleet Solid Waste, GPSTC (Local police academy), Georgia State Patrol, local airport, and facility kitchen which provides food for the corrections facilities and the Athens-Clarke County Jail. The facility offers GED courses to provide inmates with the chance to further their education and increase the potential for inmates to obtain a job once they are released. Counseling for substance and alcohol abuse, and a re-entry program is designed to help modify an inmate's behavior and prepare them for their release.

The facility was originally opened in 1983. The Athens-Clarke County Department of Corrections is an indirect supervision facility consisting of 200 hard beds. The population at the time of the audit was 177 inmates.

The Athens-Clarke County Department of Corrections also provides a transition center to eligible residents under the guidelines and supervision of ACCDC. The facility houses sentenced male felons, with minimum to medium security ratings. The inmates at the facility have less than 13 years remaining on their sentence.

Summary of Audit Findings

The interim report was provided on September 19, 2019, to the Athens-Clarke County Department of Corrections reporting 02 exceed standards; 42 met standards; 01 do not met standards.

The Corrective Action required was as follows:

Standard	Corrective Action Recommendation
§115.15 (d)	§115.15 (d) Create a barrier that blocks staff view of inmate genitals in the showers and toilet areas. (Purchase already in process).

Update: November 5, 2019

The agency has installed additional barriers to block the view of inmate genitals in the showers and toilet areas. The auditor was provided photographic evidence of the installation.

The facility was determined to comply on November 5, 2019.

Standards Exceeded

Number of Standards Exceeded: 03

List of Standards Exceeded:

§115.13, §115.33, §115.41

Standards Met

Number of Standards Met: 42

List of Standards Met:

§115.11, §115.12, §115.14, §115.15, §115.16, §115.17, §115.18, §115.21, §115.22, §115.31, §115.32, §115.34, §115.35, §115.42, §115.43, §115.43, §115.51, §115.52, §115.53, §115.54, §115.61, §115.62, §115.63, §115.64, §115.65, §115.66, §115.67, §115.68, §115.71, §115.72, §115.73, §115.76, §115.77, §115.78, §115.81, §115.82, §115.83, §115.86, §115.87, §115.88, §115.401, §115.403

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met:

PREVENTION PLANNING

Standard §115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

§115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

§115.11 (b)

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

§115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) Yes No NA

Auditor Overall Compliance Determination

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

The following evidence was analyzed in making the compliance determination:

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- a. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Pre-Audit Questionnaire (PAQ) completed by ACCDC
- c. Organizational Chart
- d. Memorandum of SART Team Assignments
- e. Georgia Department of Corrections (GDC) Policy 208.06, Revised, March 2, 2018

2. Interviews:

- a. PREA coordinator

Findings:

§§115.11 (a) The Athens-Clarke County Department of Corrections(ACCDC) operates two facilities. The ACCDC is contracted with the State of Georgia Department of Corrections. to house inmates in a work camp environment and they also operate a Transition center adjacent to the work camp . The ACCDC is required to follow the State of Georgia Policies and Practices pertinent to the Prison Rape Elimination Act for the work camp. The facility has also developed their own Local Operating Policies and Procedures that reflect many of the policies outlined by the State of Georgia Department of Corrections. The agency ACCDC's Policy 208.06 (PREA) Sexually: Abusive Behavior Prevention and Intervention Program, requires zero tolerance for sexual harassment and sexual abuse. Specifically, the policy states, “the Athens-Clarke County Department of Corrections' zero-tolerance policy toward all forms of sexual abuse, sexual harassment, and sexual activity among offenders.” This policy mandates a zero tolerance in philosophy and in its operation.

§§115.11 (b): The agency has a PREA Coordinator according to the organizational chart provided during the pre-audit phase. The ACCDC’s Policy 208.06, Section V, A, 1, states, "...Operating under GDC guidelines, the agency will refer to the Statewide PREA Coordinator to ensure that the facility is compliant with all PREA standards. The Warden will also designate a PREA Compliance Manager for every separate facility under the Department. Along with these positions, the Warden will assign roles to staff members to fulfill the needs of the SART Team. All positions and roles regarding PREA, and the SART Team members, as well as alternate staff members, will be expressed by written memorandum, as found in Attachment 1 of this policy." While the ACCDC is independently funded by the Unified Government of Athens-Clarke County, they do contract with the State of Georgia Department of Corrections (GDC) who to house their inmates. The ACCDC also houses inmates from the local courts at the Transition Center.

GDC's policy ensures that the PREA Coordinator has sufficient time to develop, implement, and oversee the agency efforts to comply with the PREA Standards in its facility. The PREA Coordinator did indicate during his interview with the auditor that he has sufficient time and the

authority to develop, implement and oversee ACCDC's efforts to comply with the PREA standards in his facility. He also indicated that he has the support and authority from the facility's Warden when carrying out required his duties and responsibilities as the PREA Coordinator.

§§115.11 (c): The Athens-Clarke County Corrections Institute(ACCDC) does not have a PREA compliance manager. It should be clarified, that while the ACCDC is an independently contracted facility with the Georgia Department of Corrections(GADOC). Part of the agreement requires the GADOC provides a PREA Coordinator who works for the State and works closely with all contracted County run correctional institutes that house inmates for the State of Georgia. For the purposes of this audit, what the GDC would refer to as a PREA Compliance Manager is a PREA Coordinator at the ACCDC. Since they are independently funded, they are required to have their own PREA Coordinator with oversight of their facility. The duties and tasks completed are as required by the standards, they simply refer to the title differently.

Corrective Action Recommendation:

None

Standard §115.12: Contracting with other entities for the confinement of inmates

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

§115.12 (a)

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

§115.12 (b)

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

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- a. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
b. Georgia Department of Corrections Policy §208.06, Revised, March 2, 2018
c. Pre-Audit Questionnaire Completed by ACCDC

2. Interviews:

- a. PREA Coordinator

Findings:

§115.12 (a) The Athens-Clarke County Department of Corrections does not contract with other facilities to house their inmates. They do contract directly with the Georgia Department of Corrections (GDC) to house inmates in Athens-Clarke County. The contract with the state DOC requires the ACCDC to closely follow the GDC PREA policies.

§115.12 (b) This provision is non-Applicable as the ACCDC does not house inmates in other facilities.

Corrective Action Recommendation:

None

Standard §115.13: Supervision and monitoring

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

§115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? Yes No

- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? Yes No NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? Yes No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

§115.13 (b)

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

§115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

§115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- a. Athens-Clarke County Department of Corrections Staffing Plan
- b. Pre-Audit Questionnaire Completed by ACCDC
- c. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program
- d. Annual Review of Staffing Plans
- e. Staff Daily Tour Logs
- f. Quarterly reviews of Staffing Plan for both facilities

- g. Documentation of deviation from the plan
- h. Security Rounds LOP §115.13

2. Interviews:

- a. PREA coordinator
- b. Warden
- c. Intermediate and Higher-level staff

3. Site review observations:

- a. Blind spots
- b. Camera placement in the facility
- c. Control station
- d. Staffing levels of housing units

Findings:

§115.13 (a) The ACCDC has a staffing plan that includes each element required to meet this provision. The Staffing Study was developed based on The Moss Group, INC./ PREA Resource Center's *Developing and Implementing A PREA-Compliant Staffing Plan* document.

§115.13 (b) The ACCDC documents each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The only deviation noted was based on a single incident of staff abandoning post. The staff member was reprimanded for the incident. The facility does have a plan in place and prioritizes posts that must be covered. Positions are back filled to ensure the minimum staffing as required.

§115.13 (c) The ACCDC is required to review the staffing plan annually with the PREA Coordinator to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. The facility exceeds this requirement as they review the staffing plan quarterly.

§115.13 (d) The ACCDC has implemented a policy requiring intermediate or higher level supervisory staff to conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Interviews with supervisors indicate that unannounced PREA rounds are conducted all shifts. The auditor also reviewed logbook entries and video footage to verify that the unannounced rounds are completed. Supervisors interviewed indicated that they ensure that staff are not alerted when the unannounced rounds are occurring by routing the checks randomly and at various times.

ACCDC's PREA Policy states, "Security supervisors, acting supervisors, and higher-level staff members will conduct regular and irregular rounds of the facility, including the housing areas, as well as the grounds for the expressed purpose of ensuring a safe

environment for the offender population. These rounds will be unannounced, and logged in the Control Room Log Book at the conclusion of each Round... These rounds will be conducted on all shifts. Significant findings will be documented and reported to the PREA Compliance Manager. Staff members are prohibited from alerting other staff members that these rounds are occurring.”

Corrective Action Recommendation:

None

Standard §115.14: Youthful inmates

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

§115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

§115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

§115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- a. Athens-Clarke County Department of Corrections PREA Policy 208.06
- b. Pre-Audit Questionnaire Completed by ACCDC
- c. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program
- d. Housing Rosters of Facility Population

2. Interviews:

- a. PREA coordinator
- b. Warden

Findings:

The Athens-Clarke County Department of Corrections does not house youthful offenders at this facility.

Corrective Action Recommendation:

None

Standard §115.15: Limits to cross-gender viewing and searches

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

§115.15 (a)

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

§115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
 Yes No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) Yes No NA

§115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

§115.15 (d)

- Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

§115.15 (e)

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

§115.15 (f)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)

- a. Athens-Clarke County Department of Corrections Policy 208.06
- b. Georgia Department of Corrections PREA Policy § 208.06, Revised 3.2.2018
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Training documentation
- e. ACCDC Institutional Operation Procedure §115.15: PREA: Limits to Cross-Fender Viewing and Searches

2. Interviews:

- a. PREA Coordinator
- b. PREA Compliance Manager
- c. Interviews with random section of inmates
- d. Random sample of Staff

Findings:

§§115.15 (a) The ACCDC and GDC policies prohibit cross-gender strip searches completely and has an exigent circumstances exception. GDC policy also prohibits staff from performing intrusive or invasive body cavity searches under all circumstances; staff is permitted to do a visual inspection of a resident's mouth cavity only. Cross-gender pat searches are authorized only in exigent circumstances and with supervisor approval. The ACCDC reports that it has conducted no cross-gender strip or cross-gender visual body cavity searches of residents in the last 12 months. Additionally, ACCDC reports no cross-gender pat down searches were conducted. There were no exigent circumstances searches in any category conducted.

§§115.15 (b) The ACCDC does not house female inmates.

§§115.15 (c) ACCDC Institutional Operation Procedure §115.15: PREA: Limits to Cross-Fender Viewing and Searches requires the Athens-Clarke County Department of Corrections to document all cross-gender strip searches and cross-gender visual body cavity searches and document all cross-gender pat-down searches of female offenders by incident report. The ACCDC does not house female inmates. The ACCDC reports that it has conducted no cross-gender strip or cross-gender visual body cavity searches of residents in the last 12 months. Additionally, ACCDC reports no cross-gender pat down searches were conducted. There were no exigent circumstances searches in any category conducted.

§§115.15(d) The ACCDC/GDC policies ensures that residents are able to shower, perform bodily functions, and change clothing with privacy. During the onsite review of the facility, it was discovered that showers and toilets are visible to staff conducting tours in the housing areas. There are windows that allow staff to see into the shower areas that can be seen from outside the Dorm. Staff of the opposite gender are required to announce their presence when entering the unit, but this would not allow for privacy in the shower area. Inmates generally shower one at a time, even though there are four shower heads in each shower area. Inmates line up their towels as place holders for sequence of showering upon return from work details. Policy and practice require announcement when staff of the opposite gender enter the housing unit and the shower/toilet area. Interviews with residents and staff confirm this as the policy and actual practice of the program on a consistent basis. During this on site review, the auditor observed announcements of Female on Deck or Female in the unit. ACCDC is in the process of procuring barriers that would prevent staff being able to readily see into the shower and toilet areas, allowing from an element of privacy while still ensuring the safety and security of inmates and staff. The agency provided the auditor with a copy of the quote received for the shower/toilet barriers.

§115.15 (e) Policy prohibits staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. GDC policy and practice prohibit searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.

§115.15(f) The agency has provided some basic training to staff regarding how to conduct cross-gender pat down searches and searches of transgender and intersex residents in a professional manner.

Corrective Action Recommendation:

§115.15 (d) Create a barrier that blocks staff view of inmate genitals in the showers and toilet areas. (Purchase already in process).

Update: November 5, 2019

The agency has installed additional barriers to block the view of inmate genitals in the showers and toilet areas. The auditor was provided photographic evidence of the installation.

Standard §115.16: Inmates with disabilities and inmates who are limited English proficient

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

§115.16 (a)

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

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

§115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

§115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §§115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: §208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. PREA Training Materials for inmate education
- d. MOU with Language Services Plus for interpretation services.
- e. Athens-Clarke County Department of Corrections Policy 208.06

2. Interviews:

- a. PREA Coordinator
- b. PREA Compliance Manager
- c. Warden
- d. Random sample of facility staff
- e. Random sample of residents

3. Site review observations:

- a. PREA Posters and Signage

Findings:

§115.16 (a) The ACCDC/GDC policies require the program to ensure residents with special needs have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and harassment. The ACCDC is unique in that as a work camp that only receives inmates from State DOC that are physically, mentally and otherwise capable of working a job. They do not receive inmates that are disabled, deaf, or blind. They may receive an inmate that is Limited English Proficient; however, there were none to interview onsite during the audit. The facility does have bilingual staff and have an MOU for interpretation services as well. The Transition Center can receive inmates from the county that may have limitation and the facility is prepared to provide the necessary services required in this provision. The agency takes appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

§115.16 (b) The ACCDC has established procedures for providing inmates with limited English proficiency the opportunity to participate in the agency's PREA education sessions aimed at prevention, detection and response to sexual abuse and sexual harassment. In addition to having staff that speak English, the facility has a MOU with Language Services Plus to assist in translation services. PREA pamphlets and posters are provided in Spanish, the most

frequent non-English language spoken in this area. PREA posters and brochures are located throughout the facility in English and Spanish.

§115.16 (C) ACCDC Policy 208.06 prohibits the use of residents/clients as interpreters when dealing with first responder situations or any allegation/investigations of sexual abuse or harassment. The ACCDC reports that there have been no instances in the past 12 months where resident interpreters have been used.

Corrective Action Recommendation:

None

Standard §115.17: Hiring and promotion decisions

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

§115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?
 Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

§115.17 (b)

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

§115.17 (c)

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

§115.17 (d)

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

§115.17 (e)

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

§115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No

- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

§115.17 (g)

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

§115.17 (h)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- ACCDC Policy 208.06
- GDCO PREA Policy 208.06
- Completed Pre-Audit Questionnaire submitted by ACCDC
- Review of Random sample of personnel files
- Review of newly promoted or hired staff files
- ACCDC Equal Opportunity Employment §115.17
- ACCDC Criminal Background Check §115.17
- ACCDC Criminal History Consent Form
- Logs of Background Checks
- Review of employee files for new hires and newly promoted staff

2. Interviews:

- PREA Coordinator
- PREA Compliance Manager
- HR Administrative Staff

Findings:

§115.17 (a) The GDC PREA policy 208.06 and the ACCDC 208.06 prohibit the hiring, promotion or retention of any employee, or contractor that has the prohibited conduct specified in this standard. The agency completes a criminal background check to verify that there are no convictions for this conduct.

§115.17 (b) The Athens Clarke County Department of Corrections (ACCDC) Policy 208.06 requires the agency to consider any incidents of sexual harassment in determining whether to hire or promote staff or to enlist the services of a contractor that may have contact with residents. Staff and contractor files were reviewed for compliance with this standard and the auditor found that the ACCDC asks about incidents of sexual harassment and sexual abuse when considering hiring or promoting staff. The facility is currently in the process of installing a large number contractors within the facility as the program is associated with the University of Georgia, who just returned for the new school year.

§115.17 (c) The ACCDC conducts the required criminal history checks prior to hiring new employees that will have contact with inmates. The policy requires the agency to use its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. During the onsite, the auditor reviewed employee files for completion of a criminal history background check and verified that prior institutional employers are contacted for reference checks as well as inquiring specifically for information on substantiate allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. The questions asked of previous employers are detailed on a form that the staff member completing the background check completes.

§115.17 (d) The PREA policy requires criminal history checks before enlisting the services of a contractor who may have contact with residents. The auditor reviewed the criminal background checks completed for contractors.

§115.17 (e) GDC PREA policy 208.06 and ACCDC Policy 208.06 require criminal history checks on all employees at least every five (5) years. Employee files were reviewed for compliance and the auditor found that the five year criminal history checks are completed.

§115.17(f) The facility provided copies of a form which is to be included with each application for new hires as proof documentation to confirm that all applicants and employees are asked about previous misconduct described in paragraph (a) of this standard in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of the reviews of current employees. The agency also imposes a continuing affirmative duty to disclose any such misconduct. A review of employee files revealed that this form is included as part of the application process and documented that the questions have been asked and answered.

§115.17 (g) Agency policy 208.06 states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

§115.17 (h) The GDC/ACCDC has a policy and practice requiring the agency to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for who such employee has applied to work. The GDC policy 208.06 imposes a continuing duty to disclose any misconduct listed in §§115.17(a).

Corrective Action Recommendation:

None

Standard §115.18: Upgrades to facilities and technologies

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

§115.18 (a)

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

§115.18 (b)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Athens-Clarke County Department of Corrections Policy 208.06
- b. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. ACCDCP list of video camera locations
- d. Technology Upgrades for ACCDC 2017 and 2018

2. Interviews:

- a. Warden
- b. PREA Coordinator
- c. PREA Compliance Manager

3. Onsite review:

- a. Observed camera placement
- b. Observed camera lines of sight in the Control Room.

Findings:

§115.18 (a) The ACCDC has not designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, since the last audit.

§115.18 (b) The facility has added additional cameras to the video monitoring system, and they are in the process of adding additional cameras. Agency leadership considered a variety of factors when upgrading technology in the facility including primarily sight lines, blind spots, and inaccessible areas. Interviews with facility leadership indicate that placement of cameras and mirrors are discussed frequently to keep enhancing safety for all residents. The facility has both external and internal video camera monitoring. Cameras are strategically located on all external entrances/exits from the building and covering the inmate yard and outdoor area. Cameras internally are located in hallways, common areas (laundry, kitchen, property room), and entrances to building. Each ACCDC dorm has cameras in the living areas. There are no cameras in the shower/toilet areas. Video cameras are monitored 24/7 by the main control booth. Interviews with the Warden and PREA Coordinator reveal that inmate sexual safety and security was considered when deciding on placement of the additional cameras.

Corrective Action Recommendation:

None

RESPONSIVE PLANNING

Standard §115.21: Evidence protocol and forensic medical examinations

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

§115.21 (a)

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

§115.21 (b)

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

§115.21 (c)

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

§115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency

a/ways makes a victim advocate from a rape crisis center available to victims.) Yes
 No NA

- Has the agency documented its efforts to secure services from rape crisis centers?
 Yes No

§115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?
 Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

§115.21 (f)

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

§115.21 (g)

- Auditor is not required to audit this provision.

§115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *a/ways* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Athens-Clarke County Department of Corrections PREA Policy 208.06
- b. Georgia Department of Corrections Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. GDC SOP 103.10, Evidence Handling and Crime Scene Processing
- e. GDC SOP 103.06, Investigations of Allegations of Sexual Contact, Sexual Abuse, Sexual Harassment of Offenders.
- f. U.S. Department of Justice's *A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents*

2. Interviews:

- a. PREA Compliance Manager
- b, SAFE/SANE Nurse
- c. No inmates were present that had reported sexual abuse to interview at the time of the audit.

Findings:

§115.21 (a) ACCDC is responsible for completing Administrative Investigations. The Athens-Clarke County Police Department or the Georgia Department of Corrections Office of Professional Services will complete criminal investigation of all allegations of sexual abuse or Sexual Harassment. The Sexual Allegation Response Checklist is completed for all PREA allegations. When conducting a sexual abuse investigation, the agencies investigators follow a uniform evidence protocol. These protocols are evident in GDC Policies 103.06 and 103.10 and the US Department of Justice's (DOJ) National Protocol for Sexual Assault Medical Forensic Examinations.

§115.21 (b) ACCDC follows the DOJ's *A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents*, which is developmentally appropriate for youth.

§115.21 (c) GDC Policy 208.06 allows for all inmates who experience sexual abuse are afforded access to a forensic medical examination. Offender victims are transported to the Piedmont-Athens Regional Medical Center's Emergency Room to be evaluated by a SANE. The auditor confirmed with Piedmont-Athens Regional Medical Center that there is a SANE available. If a SAFE/SANE is not available, a qualified medical practitioner would complete the examination. The facility has secured access to a SAFE/SANE for examinations. The facility has not requested any forensic medical examinations in the past year.

§115.21 (d) The ACCDC has entered into an MOU with The Cottage Sexual Assault Center and Child Advocacy Center (Cottage) to provide a victim advocate to the victim in person or by other means. This MOU was signed on October 6, 2015 with not expiration date. If the Cottage is not available to provide victim advocacy services, an advocate would be requested

from the Georgia Diagnostic Correctional Prison. There were not victims of sexual abuse present at the facility to interview during the onsite.

§115.21 (e) If requested, the ACCDC would provide an advocate from the Cottage and if they were not available to provide victim advocacy services, an advocate would be requested from the Georgia Diagnostic Correctional Prison to accompany the victim during the forensic medical examination to provide emotional support, crisis intervention, information and referrals. There were not victims of sexual abuse present at the facility to interview during the onsite for compliance measures.

§115.21 (f) The Warden will assign the individual who conducts the internal investigation; all individuals conducting investigations must have previously received the special internal investigations training. There are three investigators assigned to the Sexual Abuse Response Team (SART) team. If the cursory review of evidence indicates that a criminal activity has occurred, the case may be forwarded to the GDC Investigators or the Athens-Clarke County Police Department for investigation.

§115.21 (g) The Auditor is not required to audit this provision.

§115.21 (h) This provision is non-applicable as the agency always uses a qualified individual from a Rape Crisis Center to accompany the victim.

Corrective Action Recommendation:

None

Standard §115.22: Policies to ensure referrals of allegations for investigations

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

§115.22 (a)

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

§115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

§115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See §115.21(a).) Yes No
 NA

§115.22 (d)

- Auditor is not required to audit this provision.

§115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- Athens-Clarke County Department of Correction Policy 208.06
- Georgia Department of Corrections Policy 208.06
- Completed Pre-Audit Questionnaire submitted by ACCDC
- Athens-Clarke County Department of Corrections website:
<https://www.accgov.com/71110/PREA>
- Sample internal investigation (1)
- U.S. Department of Justice's *A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents*

2. Interviews:

- Warden
- PREA Coordinator
- There were no inmates who had reported a sexual abuse or sexual harassment incident present to interview.

Findings:

§115.22 (a) ACCDC is responsible for completing Administrative Investigations. The Athens-Clarke County Police Department or the Georgia Department of Corrections Office of Professional Services will complete criminal investigation of all allegations of sexual abuse or Sexual Harassment. The Sexual Allegation Response Checklist is completed for all PREA allegations. When conducting a sexual abuse investigation, the agencies investigators follow a uniform evidence protocol. These protocols are evident in GDC Policies 103.06 and 103.10 and the US Department of Justice's (DOJ) *A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents*.

In the past 12 months, there was one allegation of sexual harassment or sexual abuse. The case was an administrative investigation. There were no cases that required a criminal investigation. The one investigation was completed in a timely manner.

§115.22 (b) ACCDC policy requires that all criminal allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations. The agency's website includes information regarding this referral. The website states, "Designated staff members will receive training to conduct thorough, prompt, and professional investigations of all allegations. In instances where a criminal investigation is necessary to uphold the safety of the facility and the integrity of the investigation, the department will utilize the Athens-Clarke County Police Department's Centralized Criminal Investigation Unit, as well as the Georgia Department of Corrections' Officer in Charge of the Criminal Investigations Division. When working with these agencies, the Athens-Clarke County Department of Corrections will make every effort to support these investigations.

Anyone (including staff members, offenders, family members, facility visitors, and volunteers) receiving information concerning an allegation or rumors of sexual abuse or assault involving an offender within the Athens-Clarke County Correctional Institution or the Athens-Clarke County Diversion Center is encouraged to report such information. All reports will be accepted, including those made anonymously."

The agency has a policy and procedure for documenting all referrals of allegations of sexual abuse or sexual harassment for criminal behavior. There were no cases to review that were criminal in nature.

§115.22 (c) ACCDC Policy 104.01, page 9, B, 1, g. requires that when a separate entity is responsible for conducting criminal investigations, "the requirements of paragraphs (a) through (e) of this section shall also apply to any entity outside of the Department that is responsible for investigating allegations of sexual abuse in prisons or jails."

§115.22 (d) Auditor is not required to audit this provision.

§115.22 (e) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

TRAINING AND EDUCATION

Standard §115.31: Employee training

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

§115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No

- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

§115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

§115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? Yes No

§115.31 (d)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. PREA Training at Lesson Plans 2015, 2016, 2017, 2018 and 2019

- d. Review of random staff personnel files
- e. Samples of employee training records
- f. PREA Acknowledgement Form for employees

2. Interviews:

- a. Interviews with random staff regarding their PREA training and knowledge

Findings:

§115.31 (a) The ACCDC policy 208.04, requires all new employees who have contact with inmates to have in-depth training on PREA and Sexual Harassment in the Workplace. This includes the zero-tolerance policy for sexual harassment and sexual abuse (pp. 10-11). Employees are trained on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures (pp. 20-28) All employees are trained on the right of inmates to be free from sexual harassment and sexual abuse (p7. 7-8). Employees are trained on the rights of inmates and employees to be free from retaliation for reporting sexual abuse or sexual harassment (p. 28). The agency trains staff on the dynamics of sexual abuse and sexual harassment in confinement (pp. 31-32). Staff are trained on the common reactions of sexual abuse and sexual harassment victims (p. 21). Staff are trained in how to detect and respond to signs of threatened and actual sexual abuse (p. 21). Staff also receive training on how to avoid an inappropriate relationship with an inmate (p. 18). Staff receive training on how to communicate effectively and professionally with lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates (pp. 43-44). Finally, staff are trained in how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities (pp. 22-25). The auditor interviewed 12 random staff and found them well versed in the required training.

§115.31 (b) The training presented is tailored for housing of male inmates. This agency only manages male facilities, so there are no reassignments to facilities housing opposite gender inmates.

§115.31 (c) The ACCDC conducts training annually as required by the Georgia Peace Office Standards and Training. PREA is taught at least every other year and during the years that PREA is not taught, there are refresher courses on current policies regarding sexual abuse and sexual harassment. The typical PREA refresher class is one hour in length and covers a variety of topics each year. The facility has provided PREA training annually since 2015.

§115.31 (d) The agency documents all PREA training and staff sign an acknowledgment of having received and understand the training. A random sample of training records were reviewed for compliance.

Corrective Action Recommendation:

None

Standard §115.32: Volunteer and contractor training

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

§115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?
 Yes No

§115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

§115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. PREA Training curriculum and materials for volunteers and contractors
- d. PREA Acknowledgement Form for Volunteers and Contractors

2. Interviews:

- a. Contractor
- b. Volunteer
- c. PREA Coordinator
- d. PREA Compliance Manager
- e. Warden

Findings:

§115.32 (a) The agency’s PREA policy requires all volunteers and contractors who may have contact with residents to be trained on PREA requirements.

§115.32 (b) The level of training provided is based on the services provided and the level of contact they have with inmates. All contractors and volunteers that have contact with inmates are trained in the zero-tolerance policy regarding sexual harassment and sexual abuse and are informed on how to report an incident should they become aware of an incident. One contractor was interviewed, and compliance was found with this standard. There were no volunteers present at the time of the audit. The contractor interviewed was familiar with the zero-tolerance policy and how to report an incident of sexual harassment or sexual abuse.

§115.32 (c) The agency maintains documentation confirming that volunteers and contractors understand the training they have received. There are 19 volunteers and contractors authorized in the facility. A review of randomly selected training confirm compliance with this provision.

Corrective Action Recommendation:

None

Standard §115.33: Inmate education

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

§115.33 (a)

- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

§115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

§115.33 (c)

- Have all inmates received the comprehensive education referenced in §115.33(b)? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility? Yes No

§115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

§115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

§115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. PREA Acknowledgement Forms
- d. PREA Video with Closed Captioning as well as the Spanish version
- e. ACCDC Offender Handbook
- f. Offender ID Cards which include PREA information on the reverse side of the card.
- g. PREA Posters and Brochures posted and displayed in the facility
- h. Review of inmate files

2. Interviews

- a. Random Sample of inmates
- b. Intake staff
- c. Staff who provides the comprehensive PREA training for residents
- d. PREA Coordinator

Findings:

§115.33 (a) The ACCDC reported that 306 offenders have been admitted in the past 12 months. Of the 306 admitted, 219 received comprehensive education in their right to be free of sexual harassment and sexual abuse, the right to be free from retaliation for reporting an incident and on policies and procedures for reporting. All inmates who had not received training within 30 days of intake, were subsequently trained by March 2019. All inmates are provided PREA orientation materials at intake. Staff and inmates interviewed indicate that intake education normally happens on the first day or second day the resident is admitted to ACCDC.

§115.33 (b) All inmates receive the comprehensive PREA training within 30 days of arriving at ACCDC. The department complies as outlined in ACC DOC's Local Operating Policy §115.16:

(PREA) Equal Opportunity Education. Interviews with staff that provide the comprehensive PREA education/orientation indicate this training is normally done with the first two weeks after arrival. A review of inmate records indicated that inmates received this training within two weeks. This far exceeds the required standard. The training consists of an open forum training lecture, the viewing of a video and open discussion of what constitutes sexual harassment and sexual abuse within the facility. Inmates are advised that they have a right to

be free from sexual abuse and harassment as well as free from retaliation if they report an incident. Inmates are informed as to how to report an incident. The video shown has an option for subtitles for the hearing impaired. Offenders sign the PREA Acknowledgement Statement form and the PREA Video form to demonstrate they have received PREA training and they understand their rights under PREA and specifically understand the ways they can report sexual abuse and sexual harassment. The facility ensures key information about PREA is continuously and readily available and visible to offenders. PREA posters were observed in every housing unit as well as common areas where inmates may spend some time such as the cafeteria, law library, programs area, etc. ACCDC displays PREA posters in common areas of the facility with the abuse hotline number in bold print. Posters are displayed in English and Spanish.

§115.33 (c) All ACCDC inmates have received the required PREA training. Agency policy requires that inmates transferred from one facility are educated regarding their rights to be free from sexual abuse and sexual harassment, retaliation for reporting and on agency policies and procedures for responding that may differ from those of the previous facility.

§115.33 (d) All inmates transferring into the facility from another facility receive training regarding their right to be free from both sexual abuse and sexual harassment and retaliation for reporting and incident as well as the agencies policies and procedures for responding to an incident.

§115.33 (e) The ACCDC maintains documentation of inmate education. An acknowledgement form is signed by each inmate. The auditor reviewed a sample of files for compliance.

§115.33 (f) ACCDC has key information posted throughout the facility that is continuously and readily available or visible to inmates through posters, handbooks, and pamphlets.

Corrective Action Recommendation:

None

Standard §115.34: Specialized training: Investigations

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

§115.34 (a)

- In addition to the general training provided to all employees pursuant to §§115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

§115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

§115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

§115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. ACCDC LOP 104.1,VI,C,5,a-d
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Training curriculum for PREA: Investigating Sexual Abuse in a Confinement Setting

- e. Training curriculum for PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations
- f. Training documentation for staff completing the specialized training

2. Interviews:

- a. Investigative Staff
- b. PREA Coordinator
- c. PREA Compliance Manager
- d. Warden

Findings:

§115.34 (a) ACCDC Policy 208.06, page 11, section 4, provides guidance on specialized employee training. All investigators are required to have training on how to conduct an investigation in a confined setting, to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that agents and investigators have completed the required specialized training in conducting sexual abuse investigations. When an outside entity investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations. The ACCDC investigators investigate administrative cases. Criminal investigations are handled by the Georgia Department of Corrections investigators or the Athens-Clarke County Police Department. The ACCDC has three trained investigator.

§115.34 (b) Investigative staff complete the National Institute of Correction's PREA: Investigating Sexual Abuse in Confinement training. This curriculum covers each provision of this standard. The investigators interviewed was well versed on the curriculum and training received.

§115.34 (c) ACCDC properly documents the training received by the Investigator. Copies of the Certificate of Completion are maintained in the employee's file as well as denoted on the Georgia Peace Officer's Standard and Training records. There are currently three investigators assigned to ACCDC.

§115.34 (d) The Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

Standard §115.35: Specialized training: Medical and mental health care

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

§115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA

§115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)
 Yes No NA

§115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA

§115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §§115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)
 Yes No NA

- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §§115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)
 Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections Policy 208.06
- c. ACCDC LOP 501.01 Contracted Medical Staff
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. PREA Training completed by medical staff

2. Interviews:

- a. Medical Staff
- b. PREA Coordinator

Findings:

§115.35 (a) The ACCDC policy 208.06 and policy 501.01, relate to training of medical staff. This facility does not have Mental Health staff assigned to them. Inmates requiring mental health assistance are transferred to the Phillips State Prison, a local catchment facility, for assistance. The medical staff member at ACCDC has received the training required by this policy. There is only one nurse assigned to this facility. A review of the Medical staff personnel files included a copy of the required PREA training.

§115.35 (b) Medical staff at ACCDC do not conduct forensic examinations. Inmates needing a forensic examination may be transferred to the Piedmont Piedmont-Athens Regional Medical Center's Emergency Room to be evaluated by a SANE.

§115.35 (c) ACCDC maintains records of the training completed my medical staff. These files were located in the employee's personnel file.

§115.35 (d) Medical staff received the same training required of contractors and volunteers as well as the training required by employees. The medical provider is a contract nurse.

Corrective Action Recommendation:

None

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard §115.41: Screening for risk of victimization and abusiveness

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

§115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

§115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

§115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument? Yes No

§115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

§115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? Yes No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? Yes No

§115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

§115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

§115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

§115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument (located in SCRIBE)

2. Interviews:

- a. Staff that complete the Risk Screening Assessment
- b. PREA Coordinator
- c. PREA Compliance Manager

Findings:

§115.41 (a) Agency policy 208.06 p 12, V, D, 1 requires screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates.

§115.41 (b) Agency policy 208.06 p 12, V, D, 1 requires that all offenders have an initial needs assessment/intake summary performed by a Counselor within 72 hours of entering the facility. This intake process utilizes a variety of assessment processes to gather information about the offender. The screening process is very thorough and gathers a significant amount of information that is used to determine the offender's needs. The ACCDC reports that 219 offenders have entered the facility within the past 12 months and were screened as required by this standard. All of these offenders length of stay was at least 72 hours. All offenders were screened within the required 72 hours. Most often, inmates are screened the same day they enter the facility. This exceeds the standard.

§115.41 (c) The ACCDC uses the Risk Screening Assessment Tool prescribed by the Georgia Department of Corrections. This form is electronic and stored in an offender management program named SCRIBE.

§115.41 (d) The Risk Screening instrument appropriately covers nine of the ten areas of information as detailed in this standard. The screening instrument does not reveal if the offender is being held solely for the purposes of civil immigration, however, this is a work camp strictly for housing criminally convicted offenders. There would not be an incident where an individual would be held solely for civil immigration purposes. Additional information received in the intake assessment through other screening instruments adds key information that is used to house offenders appropriately.

§115.41 (e) When assessing inmates for risk of sexual abuse the screening considers prior acts of sexual abuse, prior convictions for violent offenses and any history of institutional violence or sexual abuse. Counselors review criminal histories, interview inmates and review records of institutional violence.

§115.41 (f) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 VI,D,2 requires that inmates be reassessed within 30 days based upon any additional, relevant information received by the facility since the intake screening.

§115.41 (g) ACCDC Policy 104.01 VI, D, 2 requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The auditor reviewed assessments and reassessments forms for verification of compliance.

§115.41 (h) Athens-Clarke County Department of Corrections (ACCDC) POLICY 208.06 VI,D,1 and VI,D,3 state that inmates may not be disciplined for not disclosing complete information in response to questions asked as part of the risk screening assessment.

§115.41 (i) ACCDC Policy 208.06. VI,D,2 regulates the control of access to the risk screening assessments. The facility has implemented appropriate controls on the dissemination of the information received at intake. SART team members have exclusive access to these results for the purposes of housing, programs, work details, and other assignments that will promote a safe environment for the offender and the facility.

Corrective Action Recommendation:

None

Standard §115.42: Use of screening information

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

§115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

§115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

§115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the **agency** consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

§115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

§115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

§115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

§115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- Georgia Department of Corrections Policy 208.06
- Athens- Clarke County Department of Corrections (ACDC) POLICY 208.06
- Completed Pre-Audit Questionnaire submitted by ACDC
- Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument

2. Interviews:

- a. Staff that complete the Risk Screening Assessment
- b. PREA Coordinator

Findings:

§115.42 (a) ACCDC uses the information gleaned from the Risk Assessment tool in determining housing, work, bed, education and program assignments with the goal to keep separate inmates that may be vulnerable to sexual abuse from inmates that are sexually abusive.

§115.42 (b) Agency policy 208.06, V, D, 2 requires the agency makes individualized determination based on how to ensure the sexual safety of each inmate.

§115.42 (c) Policy 208.06, VU, D, 2 requires the facility staff to make individualized determinations of how to ensure the safety of each transgender or intersex inmate offender on a case-by-case basis.

§115.42 (d) Placement and programming assignments for each transgender or intersex inmate are reassessed at least twice a year to review any threats to safety experienced by the inmate.

§115.42 (e) Transgender and intersex inmate's own views with respect to their own safety is given serious consideration when determining housing, programming, education, work and bed assignments. This facility has not had any transgender or intersex inmates in the facility. The State of Georgia Department of Corrections has not sent them any Transgender or Intersex inmates to date. The facility is capable of managing the situation should it arise.

§115.42 (f) Transgender and intersex inmates would be afforded the opportunity to shower separately from other inmates.

§115.42 (g) ACCDC does not place gay, bisexual, transgender or intersex inmates in dedicated facilities, units, or wings solely in the basis of such identification or status. They are not under any sort of consent decree, legal settlement or legal judgment for the purpose of protecting such inmates. The auditor was unable to locate any inmates that identified as a LGBTQI to interview.

Corrective Action Recommendation:

None

Standard §115.43: Protective Custody

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

§115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? Yes No

§115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA

§115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Yes No

- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

§115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document the reason why no alternative means of separation can be arranged? Yes No

§115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- Georgia Department of Corrections Policy 208.06
- Athens- Clarke County Department of Corrections (ACCDC) POLICY 208.06
- Georgia Department of Corrections SOP 209.06, Administrative Segregation.
- Completed Pre-Audit Questionnaire submitted by ACCDC
- Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument

2. Interviews:

- Staff that complete the Risk Screening Assessment
- Intake Staff
- Warden
- PREA Coordinator

Findings:

§115.43 (a) The GDC PREA Policy 208.06 and the Athens- Clarke County Department of Corrections ACCDC) POLICY 208.06 V, D, 3 policies prohibit the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. In the past 12 months no inmates have been segregated in involuntary housing pending completion of assessment.

§115.43 (b) GDC policy prohibits offenders at high risk for sexual victimization or aggression from being placed in involuntary segregation based solely on that determination unless a determination has been made that there is no available alternative means of separation from likely abusers. Offenders placed in segregation would receive services in accordance with GDC SOP 209.06, Administrative Segregation.

§115.43 (c) Inmates placed involuntarily in segregated housing would only be there until an alternative means of separation could be arranged, the assignment would not exceed a period of thirty days. Operationally, if an inmate was identified that needed to be kept separate, the State of Georgia would be notified, and the inmate moved to a better location to allow for his safety and security. If this were a transition center inmate, the segregation would not exceed 30 days. The individual may have to be removed from the program and returned to the county jail or alternatively transferred to another facility for housing.

§115.43 (d) There were no files to review for compliance with this standard as no inmates have been placed in segregated housing for their safety based on risk of sexual abuse.

§115.43 (e) If there were an inmate placed in segregate housing the facility would review the inmate's status every thirty days to determine if there is a continuing needs for separation from the general population. ACCDC Policy 104.01 V,D,3, states, " In instances where the segregation unit is determined to be the safest assignment for the offender at risk of victimization, the Protective Custody assignment will not exceed a period of 30-days without a review. During this time, the offender may continue to attend programs and work opportunities as applicable." There were no files available for review as no inmates had been housed in this status in the past 12 months.

Corrective Action Recommendation:

None

REPORTING

Standard §115.51: Inmate reporting

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

§115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

§115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes) Yes No NA

§115.51 (c)

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

§115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Offender educational materials (Inmate handbook; PREA handout; posters, brochures)
- d. Orientation Checklist
- e. Inmate Handbook

2. Interviews:

- a. Random Sample of staff
- b. Random Sample of Inmates
- c. PREA Coordinator
- d. PREA Compliance Manager

3. Site review observations:

- a. Testing of the PREA Hotline by auditor
- b. Tour of facility where abuse hotline number readily visible to offenders and staff through posters and pamphlets

Findings:

§115.51 (a) The ACCDC provides offenders multiple internal ways to report sexual abuse and sexual harassment, retaliation, and staff neglect. Offenders receive education about reporting at intake, through comprehensive PREA education within 10 days and through visible and available information in the facility at all times. Interviews with random staff and inmates revealed that inmates and staff are all well aware of the variety of mechanisms through which they can report. During the onsite review, the auditor observed PREA Posters mounted on the walls of all dorms and housing areas as well as pamphlets that are readily available to inmates. The reporting methods include verbally telling a staff member, medical staff, volunteer, contractor, or PREA Coordinator, calling the PREA hotline; submitting a written grievance; having a third-party submit an oral or written complaint on the individuals behalf; offenders may write a kite (informal written correspondence to supervisory staff).

§115.51 (b) The Department maintains a sexual abuse hotline, currently known as the “PREA” hotline #91, toll-free from any dorm phone. Inmates may This call will not require the use of the offender’s PIN number. Offenders may use the dormitory pay-phones to make a free phone call to the PREA hotline. This hotline is explained in large posters near the phones in every

dormitory, and the number is clearly printed. Brochures issued to offenders provide the phone number to the Ombudsman's office, as well as the Athens' Rape Crisis & Sexual Assault Services Center, the Cottage. Inmates may remain anonymous if they prefer when reporting an incident. The auditor tested the hotline to ensure that the system is operational. The auditor left a voice mail message that was returned in less than 12 hours. The ACCDC does not house inmates solely for immigration purposes. However, they do provide consular information for inmates as needed.

§115.51(c) ACCDC Policy 208.06, V,E,1, states, " When a report is brought to the attention of a staff member it will be handled confidentially, documented promptly, and a SART member will be immediately notified." A review of investigative files revealed that staff do document reports of sexual harassment and sexual abuse as required.

§115.51 (d) Staff may privately report an incident of sexual harassment or sexual abuse utilizing the same resources that are available to inmates. They may also contact the PREA Coordinator or any supervisor to file a report. Staff have been trained in these procedures as part of biennial PREA Training.

Corrective Action Recommendation:

None

Standard §115.52: Exhaustion of administrative remedies

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

§115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No

§115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

§115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

§115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per §115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

§115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) Yes No NA

§115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). Yes No NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

§115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

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

Does Not Meet Standard (*Requires Corrective Action*)

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policies: 208.06 and 227.02
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. ACCDC Offender Handbook
- d. Review of Grievances (2018)
- e. Athens- Clarke County Department of Corrections (ACCDC) Policy 208.06

2. Interviews:

- a. There were no offenders located on site that had filed an emergency grievance to interview.

Findings:

§115.52 (a) Georgia Department of Corrections Policy 227.02, Grievances, VI, B, 2, i, states, "Sexual Abuse and Sexual Harassment shall be forwarded to the Institutional Sexual Assault Response Team (SART) and processed according to SOP 208.06, Prison Rape Elimination Act: Sexually Abusive Behavior Prevention and Intervention Program;" Complaints received regarding sexual abuse or sexual harassment are not treated administratively. They are immediately forwarded to the SART team to be processed according to policy 208.06, Prison Rape Elimination Act: Sexually Abusive Behavior Prevention and Intervention Program;

§115.52 (b) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

§115.52 (c) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

§115.52 (d) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

§115.52 (e) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

§115.52 (f) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

§115.52 (g) The ACCDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.

Corrective Action Recommendation:

None

Best Practice Recommendation:

Provide information in the inmate handbook that details that any grievance for sexual abuse or sexual harassment will be treated as a PREA complaint and dealt with according to GADOC Policy 208.06 and Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06.

Standard §115.53: Inmate access to outside confidential support services

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

§115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

§115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

§115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policies: 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Offender Handbook; PREA handout; posters, brochures
- d. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- e. MOU with The Cottage

2. Interviews

- a. Random sample of offenders
- b. PREA Compliance Manager
- c. Investigative Staff
- d. The Cottage personnel (telephonic)

Findings:

§115.53 (a) The ACCDC has entered into an agreement with the The Cottage in Athens, Georgia to assist with victim advocacy for emotional support services related to sexual abuse and sexual harassment. The facility has posted information in all housing units on how to contact the advocates for assistance. The facility does not house inmates solely for immigration purposes. Inmates are advised of the level of confidentiality afforded for these calls.

§115.53 (b) Flyers are posted in all housing units that provide contract information for The Cottage. Inmates are advised of the level of confidentiality afforded The Cottage for providing Advocacy services to inmate victims of sexual abuse or sexual harassment. The latest MOU was signed on October 6, 2015 with no date of expiration.

Corrective Action Recommendation:

None

Standard §115.54: Third-party reporting

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

§115.54 (a)

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

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policies: 208.06 (PREA) and 227.02, Grievance Procedures
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Review of Agency Website: <https://www.athensclarkecounty.com/7110/PREA>
- d. Review of Investigative Files
- e. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06

2. Interviews:

- a. Random sample of offenders
- b. PREA Compliance Manager
- c. Investigative Staff

Findings:

§115.54 (a) The Athens-Clarke County Department of Corrections website provides information on how to report sexual abuse and sexual harassment to the state PREA hotline or directly to the facility. Basic PREA information regarding zero tolerance and how to report an incident are found on the website at: <https://www.athensclarkecounty.com/7110/PREA>. This information is located on their website as well as being posted in the facility in areas where visitors, attorneys and the public may enter.

Corrective Action Recommendation:

None

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard §115.61: Staff and agency reporting duties

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

§115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

§115.61 (b)

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

§115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

§115.61 (d)

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

§115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- d. Investigative Files.

2. Interviews:

- a. PREA Coordinator
- b. Warden
- c. Random sample of staff
- d. Medical staff
- e. No mental health providers were interviewed as there are none assigned to this facility.

Findings:

§115.61 (a) Georgia Department of Corrections Policy 208.06 and Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 both require staff to be mandatory reporters of an incident of sexual harassment and sexual abuse, retaliation for reporting and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews conducted with staff reveal that they are familiar with the mandatory reporting standard and how to report an incident.

§115.61 (b) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 VI, F, 1, states, " Staff shall not disclose any information concerning sexual abuse, sexual harassment, or sexual misconduct of an offender, including the names of alleged victims or perpetrators to anyone other than necessary to make treatment, investigation and other security and management decisions. Staff members who fail to comply with the reporting provisions of this policy will be subject to disciplinary action, up to and including termination, whichever is applicable." Staff interviewed understand the sensitivity of an allegation of sexual abuse and sexual harassment and the need for confidentiality.

§115.61 (c) Contracted medical staff are required to report sexual abuse and to inform inmates of the practitioner's duty to report and the limitations of confidentiality, at the initiation of services. The ACCDC has one nurse assigned to this facility. The nurse was well versed in

mandatory reporting the limitations of confidentiality. The nurse explains her limitation of confidentiality and the duty to report to the inmate. This facility does not have mental health staff. Should an inmate require mental health services they would be transferred to the Phillip State Prison, a local catchment facility, for services.

§115.61 (d) ACCDC does not house inmates under the age of 18. Georgia Code 30-5-5 addresses vulnerable adults in the state of Georgia. Georgia has strict mandated reporting laws that require medical professionals, caregivers, and even employees of financial institutions to report abuse of vulnerable adults to local authorities as well as to Adult Protective Services.

§115.61 (e) ACCDC staff are required to report any incident of sexual abuse or sexual harassment to the facility's designated investigator. This includes reports received via third party complaints. The warden and Investigator confirmed in interviews that this is common practice and investigative files were reviewed to confirm as well.

Corrective Action Recommendation:

None

Standard §115.62: Agency protection duties

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

§115.62 (a)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06

2. Interviews:

- a. Random sample of staff
- b. PREA Compliance Manager
- c. Interview with counselors who conduct intake screening and assessment
- d. Warden

Findings:

§115.62 (a) The agency reports that there have been no situations in the past 12 months where the facility determined an offender was subject to substantial risk of imminent sexual abuse. Review of policy and interviews with the PREA Coordinator, and a random sample of staff demonstrated the protective measures that would be taken in the event it was found that a resident was at imminent risk of sexual abuse.

Corrective Action Recommendation:

None

Standard §115.63: Reporting to other confinement facilities

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

§115.63 (a)

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

§115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

§115.63 (c)

- Does the agency document that it has provided such notification? Yes No

§115.63 (d)

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

Auditor Overall Compliance Determination

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

Does Not Meet Standard (*Requires Corrective Action*)

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. PREA Coordinator
- b. Warden

Findings:

§115.63(a) ACCDC Policy 208.06,V,F,3 states, " Upon receiving an allegation that an offender was sexually abused while confined at another facility, the Warden or his/her designee, that received the allegation shall notify the Warden or Head Authority of the identified facility where the alleged abuse occurred. The State PREA Coordinator will also be notified of the allegation and the manner in which the originating facility was notified." The agency reported that in the past 12 months, the facility has received no allegations that a ACCDC offender was abused while confined at another facility.

§115.63 (b) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 VI,F,3 requires the agency to provide notification as soon as possible but no later than 72 hours after receiving an allegation of sexual abuse or sexual harassment.

§115.63 (c) The ACCDC policy requires staff to document that it has provided notice to a facility with 72 hours of receiving the allegation. There were no such reports in 2018 or 2017 that that required documentation.

§115.63 (d) The ACCDC reports that in the past 12 months, the agency has received no notifications of sexual abuse from other facilities. Interviews with the facility Warden and PREA Coordinator demonstrate compliance with this standard.

Corrective Action Recommendation:

None

Standard §115.64: Staff first responder duties

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

§115.64 (a)

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

§115.64 (b)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Georgia Department of Corrections Sexual Allegation Response Checklist form

2. Interviews

a. Random Sample of Staff

Findings:

§115.64 (a) The ACCDC reports that in the past 12 months, there have been zero allegations that a resident was sexually abused. Thus, there were no victims available for interview by the auditor. Nor were there any first responder staff (security or non-security staff) to interview. The agency PREA policy requires the use of the Georgia Department of Corrections Sexual Allegation Response Checklist form when there is an incident of sexual abuse. GDC policy requires that security staff first responders are required to:

- Notify your shift OIC and ensure the victim is separated from the aggressor.
- Instruct the alleged victim to refrain from changing clothes, drinking eating, brushing teeth or any other activity that could destroy physical evidence.
- If known, instruct the alleged perpetrator to refrain from changing clothes, drinking, eating brushing teeth or any other activity that could destroy physical evidence.
- Secure the crime scene if applicable to restrict access to the area and to prevent handling evidence until an internal investigator arrives.

Interviews with staff indicate that do understand all of the duties required of a first responder to the victim and abuser. Staff were well versed in their duties in responding to a sexual abuse incident.

§115.64 (b) A non-security staff first responder is required to request the victim to not destroy evidence (as detailed in standard) and then notify a security staff member. There were no allegations in the past 12 months that involved non-security staff to respond.

Corrective Action Recommendation:

None

Standard §115.65: Coordinated response

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

§115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Coordinated Response Plan

2. Interviews:

- a. Warden
- b. PREA Coordinator

Findings:

116.65 (a) The ACCDC has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse. The Georgia Department of Corrections Policy 208.06 attachment 6 served as a guideline for a written institutional plan. The plan is an excellent document that details each requirement of this standard.

Corrective Action Recommendation:

None

Standard §115.66: Preservation of ability to protect inmates from contact with abusers

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

§115.66 (a)

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

§115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. Warden/Agency Head

Findings:

§115.66 (a) The ACCDC does not have any collective bargaining agreements in place and has not had any at any time. Athens-Clarke County is non-union and therefore has no union collective bargaining agreements. Thus, it was determined this standard is non-applicable.

§115.66 (b) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

Standard §115.67: Agency protection against retaliation

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

§115.67 (a)

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

§115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from

contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

§115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

§115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

§115.67 (e)

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

§115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. GCDOC Attachment 8 to Policy 208.06, Retaliation Monitoring Form

2. Interviews:

- a. Warden
- b. PREA Coordinator
- c. No Inmates were placed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse to interview
- d. No inmates who reported a Sexual Abuse were located in the facility

Findings:

§115.67 (a) The ACCDC reports that in the past 12 months there have been zero incidents of retaliation reported, known or suspected. The agency PREA policy clearly states that retaliation against any offender or staff member that reports sexual abuse or participates in an investigation is not tolerated. The agency has appointed two individuals responsible for retaliation monitoring.

§115.67 (b) The Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 page 24, VI,F,6 states, " This department will protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with investigations from retaliation from other offenders and staff. The Retaliation Monitor monitors retaliation through face to face visits with the applicable offender or staff and completes a report during the monitoring period.... For at least 90 days following a report of sexual abuse, the Retaliation Monitor or his/her alternate will monitor the conduct and treatment of offenders and staff who reported the sexual abuse and of the offenders who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items monitored include:

- a. Offender disciplinary reports
- b. Housing or program changes
- c. Negative performance reviews
- d. Reassignments of staff"

§115.67 (C) While there have not been any incidents that required retaliation monitoring in the past 24 months, staff interviewed were well versed on their requirements to meet this provision. Interviews with key leadership staff indicate the requirements of this standard would be met in the event the agency does gain knowledge, suspicion or an actual allegation of retaliation. The GADOC has provided an attachment to Policy 208.06 that is a form to be used for retaliation monitoring. The form covers a variety of monitoring techniques and guidance in what to document.

§115.67 (d) Monitoring for retaliation requires periodic checks of the victim.

§115.67 (e) Any individual that cooperates with an investigation would be protected from retaliation if they expressed a fear of retaliation. The facility would take measures to protect the individual, staff or inmate, from retaliation.

§115.67 (f) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

Standard §115.68: Post-allegation protective custody

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

§115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § §115.43? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Athens-Clarke County Department of Corrections (ACCDC) Policy: 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. There were no 30 day reviews to observe.

2. Interviews:

- a. Segregated Housing Unit Staff
- b. No inmates were available to interview that were placed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse)

3. Site review observations:

- a. Tour of the facility indicates there are a few Isolation/Segregation cells that are used for Administrative or Disciplinary purposes.

Findings:

§115.68 (a) The ACCDC has minimal segregation cells in the facility. GDC and ACCDC policies mandate that offenders would only be placed in involuntary segregation when a determination has been made that there is no available alternative means of separation from likely abusers. In the event of a sexual abuse incident the alleged perpetrator would most likely be moved to another facility for secure housing. There were no inmates involuntarily placed in segregation housing in the past 12 months who have alleged sexual abuse. The ACCDC would seek alternate housing for the inmate to include sending the inmate to the Phillips Correctional, a regional catchment facility, for placement.

Corrective Action Recommendation:

None

INVESTIGATIONS

Standard §115.71: Criminal and administrative agency investigations

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

§115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See §115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See §115.21(a).] Yes No NA

§115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by §115.34? Yes No

§115.71 (c)

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

§115.71 (d)

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

§115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

§115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

§115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

§115.71 (h)

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

§115.71 (i)

- Does the agency retain all written reports referenced in §115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

§115.71 (j)

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

§115.71 (k)

- Auditor is not required to audit this provision.

§115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See §115.21(a).) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Training records for Investigative staff
- e. Review of training curriculum for Conducting Internal Investigations
- f. Review of investigative files
- g. Georgia Department of Corrections Policy 103.06

2. Interviews:

- a. PREA Coordinator
- b. Investigative Staff
- c. No Inmates were present that had reported sexual abuse.

Findings:

§115.71 (a) ACCDC Policy 208.06 V,G, 1 governs Investigations in the facility. Facility Investigative staff make an initial inquiry to determine if a report of sexual abuse or sexual harassment is a rumor or an allegation. The local Sexual Abuse Response Team (SART) is responsible for the initial inquiry and subsequent administrative investigation of all allegations of sexual abuse or sexual harassment with limitations. Limitations, such as allegations made against staff members in which the SART investigation deems the allegation unfounded or unsubstantiated by evidence of documentation, camera recordings, witness statements, or other investigative information may result in closing the case at the facility level. However, if there is potential for a criminal investigation, no interviews are conducted, nor statements collected from the accused staff member. ACCDC would consult the ACCPD's Criminal Investigations Division. The agency treats third-party or anonymous reports of sexual abuse in the same manner as they would an initial outcry by a victim.

§115.71 (b) All allegations of sexual abuse are investigated by staff that have received specialized training for conducting investigations in a confinement pursuant to §115.34. Investigative staff have completed the required training.

§115.71 (c) Investigators gather and preserve direct and circumstantial evidence , including available physical and DNA evidence, any electronic monitoring data, and interview alleged victims, suspected perpetrators, and witnesses. During the investigation, investigative staff review prior complaints and reports of sexual abuse involving the suspected perpetrator. A review of investigative files indicates that investigative staff perform these duties.

§115.71 (d) In cases that appear to be criminal in nature, the agency would only conduct compelled interviews after consulting with prosecutors. Cases that rise to the level of criminal activity will typically be handled by the GDC Investigators or the Athens-Clarke County Police Department.

§115.71 (e) The credibility of the alleged victim, suspect or witness is assessed on an individual basis and is not based on the fact that the individual is incarcerated or a staff member. The agency does not require victims to submit to a polygraph examination or other truth-telling devices as a condition for proceeding with the investigation. No Inmates were present to interview that had reported sexual abuse.

§115.71 (f) Staff completing Administrative investigations attempt to determine if staff actions or inactions contributed to the abuse. Administrative investigative reports include a description of physical evidence, the reasoning behind the credibility assessment and the investigative facts and findings. There were no criminal investigative cases to review. There was one completed Administrative case to review. Review indicated the cases was reviewed an immediately closed as it did not meet the definition of a PREA sexual abuse or sexual harassment complaint. Two other administrative cases were completed and awaiting a Incident Review late this month. All required elements were reviewed.

§115.71 (g) All criminal investigations are documented in writing. Policy mandates that the reports include a description of the physical, testimonial and documentary evidence. Copies of all documentary evidence are to be attached to case file, when feasible.

§115.71 (h) All substantiated cases that appear to be criminal are referred for prosecution. There have not been any substantiated allegations since the last PREA Audit conducted in 2016.

§115.71 (i) ACCDC retains all written reports referenced in §115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The GADOC PREA policy 208.06 requires investigation notes on criminal and administrative cases be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years; or 10 years from the date of the initial report, whichever is greater.

§115.71 (j) Interviews with investigative staff revealed that if an alleged victim leaves their control or the abuser leaves their employment the agency will continue the investigation.

§115.71 (k) Auditor is not required to audit this provision.

§115.71 (I) When outside agencies investigate sexual abuse, the facility cooperate with outside investigators by providing support, collecting evidence and ensuring all electronic monitoring data is secured. The Investigators and PREA Coordinator work with the outside entities to stay informed about the progress of the investigation.

Corrective Action Recommendation:

None

Standard §115.72: Evidentiary standard for administrative investigations

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

§115.72 (a)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Review of Investigative Files

2. Interviews:

- a. Investigative staff
- b. PREA Compliance Manager

Findings:

§115.72 (a) The ACCDC reports that they use the preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with investigative staff confirm compliance with this standard. A review of investigative files confirms this as well.

Corrective Action Recommendation:

None

Standard §115.73: Reporting to inmates

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

§115.73 (a)

- Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

§115.73 (b)

- If the agency did not conduct the investigation into an inmate’s allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

§115.73 (c)

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate’s unit? Yes No
- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently

inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

§115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? Yes No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? Yes No

§115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

§115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06, PREA and 203.03, Incident Reports
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Review of completed investigations to include notices to inmates.

2. Interviews

- a. Investigative staff
- b. PREA Coordinator
- c. There were no inmates present that had reported sexual abuse onsite to interview.

Findings:

§115.73 (a) The ACCDC reports that there have been no investigations of alleged resident sexual abuse in the past 12 months. ACCDC policy requires them to inform inmates that claim sexual abuse whether the allegation was determined to be substantiated, unsubstantiated or unfounded. ACCDC uses a PREA Disposition Offender Notification Form to notify inmates of the status of the investigation. There were not files to review for compliance. There were no inmates to interview that had claimed sexual abuse.

§115.73 (b) In the event ACCDC does not complete the investigation, they will request status updates from the investigative agency so they can keep the inmate informed of the outcome of the case. There were no cases alleging sexual abuse completed by outside agencies in the past 12 months, therefore no notices were reviewed.

§115.73 (c) ACCDC Policy 208.06 ,V, F, 2 requires that If an inmate alleges that a staff member sexual abused him, the facility will inform the victim when the staff member is no longer employed by the agency, when the staff member is indicted on a charge related to sexual abuse within the facility, or if they learn that the staff member was convicted of a charge related to sexual abuse within the facility. There were no cases to review in the past 12 months.

117.73 (d) ACCDC policy 208.06 requires the facility to notify the victim is an inmate abuser has been indicted or convicted of a sexual abuse case within the facility. There were no cases to review in the past 12 months.

§115.73 (e) Facility policy 208.06, requires staff to document this notice on SOP 208.06 attachment 3, Offender Notification Form.

§115.73 (f) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

DISCIPLINE

Standard §115.76: Disciplinary sanctions for staff

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

§115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

§115.76 (b)

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

§115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

§115.76 (d)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. Investigative staff
- b. PREA Coordinator

Findings:

§115.76 (a) ACCDC Policy 208.06, V,G,4, pp 24-25 states, " Staff that engages in sexual abuse or sexual misconduct/harassment with an offender shall be banned from the facility or subject to disciplinary action, up to and including termination, whichever is appropriate." The ACCDC reported that in the past 12 months, there were no staff terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.

§115.76 (b) Policy 208.06, V,G,4, page 24 requires that termination be the presumptive disciplinary sanction for sexual misconduct. Pursuant to O.C.G.A. § 16-6-5.1, it is a felony for correctional staff to have sexual contact with an offender. In the past twelve months, no staff have been terminated or resigned in lieu of termination for violating agency sexual abuse or sexual harassment policies.

§115.76 (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) is be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

§115.76 (d) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06,V,G,4 requires that all cases that all criminal cases be reported to the Georgia Peace Officer Standards and Training Council (POST). POST is the licensing body responsible for all Peace Officers in the State of Georgia to include, Law Enforcement, Fire, and Corrections. There were no cases reported in the past 12 months.

Corrective Action Recommendation:

None

Standard §115.77: Corrective action for contractors and volunteers

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

§115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

§115.77 (b)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. Review of Investigative Files

2. Interviews:

- a. Investigative staff
- b. PREA Coordinator
- c. Warden

Findings:

§115.77 (a) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06, V,G,5 page 25 states, " Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and to relevant licensing bodies unless the activity was clearly not criminal. This department will take appropriate remedial measures and will consider whether to prohibit further contact with offenders, in the case of any other violation of sexual abuse or sexual harassment policies by the contractor or volunteer. (115.77)." Interviews with the Warden confirm that volunteers and contractors that violate the sexual abuse policies would be reported to law enforcement agencies if a crime had been committed and to relevant licensing bodies. Accused contractors and volunteers would be banned from entry into the facility. The contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. The facility reports that there were no cases to report in the past 12 months.

§115.77 (b) Any contractor or volunteer that violates ACCDC sexual abuse or sexual harassment policies would be banned from contacting the alleged victim.

Corrective Action Recommendation:

None

Standard §115.78: Disciplinary sanctions for inmates

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

§115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

§115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

§115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

§115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

§115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

§115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

§115.78 (g)

- If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
 - Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06, PREA, 209.01, Inmate Discipline and 508.18, Inmates with Mental Health Discipline Procedures.
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- c. Completed Pre-Audit Questionnaire submitted by ACCDC
- d. ACCDC Inmate Handbook
- e. Investigative Reports

2. Interviews:

- a. PREA Compliance Manager
- b. Warden
- c. Medical staff

Findings:

§115.78 (a) ACCDC policy 208.06, states that inmates may be disciplined for violations of this standard. The GDC Policy 209.01, Inmate Discipline, provides a formalized disciplinary policy surrounding sexual abuse and sexual harassment. Inmates would be subjected to disciplinary action only following a formal disciplinary process following a criminal finding of guilt for inmate on inmate sexual abuse. There were no cases reported in the past 12 months.

§115.78 (b) Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

§115.78 (c) When determining what types of sanction, if any, should be imposed, the facility disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. GDC Policy 508.18 addresses Inmates with Mental Health that are facing disciplinary action.

§115.78 (d) ACCDC does not offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. Should inmates need these services, they would be transferred to the Phillips State Prison, a local catchment facility, for mental health services.

§115.78 (e) ACCDC Policy 208.06 states inmate can only be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to the contact.

§115.78 (f) Inmates are not disciplined for making a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred. There have been no incidents where residents were disciplined for PREA-related conduct, the auditor could not interview anyone, and no documentation exists to review.

§115.78(g) ACCDC Policy 208.06 prohibits all sexual activity between inmates. Inmates may be disciplined for sexual activity only if the facility determines that the activity was coerced.

Corrective Action Recommendation:

None

MEDICAL AND MENTAL CARE

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

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

§115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

§115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

§115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community,

do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

§115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? Yes No

§115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. Staff that complete Risk Screening Assessments
- b. Medical staff
- c. PREA Coordinator

Findings:

§115.81 (a) -1,2,3 The ACCDC reports that in the past 12 months, no inmates have disclosed prior victimization during screening; thus, no inmates were offered follow-up meetings with mental health practitioner. Agency policy requires the 14-day follow-up meeting with medical or mental health practitioner if sexual victimization or sexual perpetration is disclosed during screening at intake. Medical staff would maintain secondary materials related to these services as the inmate would be sent to another facility for mental health follow up.

§115.81 (b) ACCDC is a prison but they do not provide mental health care onsite. Inmates who have previously perpetrated sexual abuse, as indicated during the screening process would be offered a follow up meeting with a mental health practitioner at the Phillips State Prison, a local catchment facility. This follow up would be within the required 14 days of the intake screening. In the past 12 months there have not been any inmates who have previously perpetrated sexual abuse as indicated through the screening process. This is a work camp that receives inmates that were previously screened at the state level.

§115.81 (c) Not applicable as this is not a jail facility, see §115.81 (a).

§115.81 (d) ACCDC Policy 208.06 , states, " Any information related to sexual victimization or abusiveness that occurred in a confined setting will be limited to medical and mental health practitioners, and other staff, as necessary to provide an informed treatment and security plan." Interviews with Medical and PREA Coordinator verify that this is the practice at the facility. All Medical records are securely maintained.

§115.81 (e) On-site medical personnel provide informed consent disclosures. It should be noted that this is an Inmate Work Camp and this facility does not have on site Mental Health services. Inmates requiring Mental Health services would be transported to the Phillips State Prison located in nearby Buford, GA. for mental health services.

Corrective Action Recommendation:

None

Standard §115.82: Access to emergency medical and mental health services

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

§115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? Yes No

§115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § §115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

§115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

§115.82 (d)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens- Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. Medical staff
- b. SANE

Findings:

§115.82 (a) The ACCDC reports no inmate victims of sexual abuse in the past 12 months; thus there were no medical records for this auditor to review for inmate victims. Agency policy requires that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of the services are determined by medical and mental health practitioners (Phillips State Prison) according to their professional judgment. Medical staff at ACCDC maintain secondary materials such as logs or forms documenting the timeliness of emergency medical treatment and crisis intervention services that were provided and the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. There were no inmates present at that had claimed sexual abuse to

interview for verification and no records to review as the facility has not had a sexual abuse case.

§115.82 (b) If no qualified medical practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim pursuant to § 115.62 and immediately notify the appropriate medical and mental health practitioners. ACCDC has one nurse assigned to the facility. All Mental Health services are provided by the Phillips State Prison.

§115.82 (c) Inmate victims of sexual abuse would be offered timely information about and access to emergency contraception and sexually transmitted infection prophylaxis.

§115.82 (d) Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06 requires that treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Corrective Action Recommendation:

None

Standard §115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

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

§115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

§115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

§115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

§115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

§115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. *Note: in “all-male” facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

§115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

§115.83 (g)

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

§115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06, PREA, SOP 103.06, Investigations of Allegations and SOP 103.10, Evidence Handling
- b. Athens-Clarke County Department of Corrections (ACCDC) Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC

2. Interviews:

- a. Medical staff
- b. PREA Coordinator

Findings:

§115.83 (a) ACCDC offers medical (onsite) and mental health evaluation (offsite) and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. ACCDC does not have mental health practitioners at this facility. On-going Mental Health Services cannot be provided at Athens-Clarke County Prison. An inmate needing on-going Mental Health Services are referred to Phillips State Prison (a local Catchment facility) and transported to such facility for services.

§115.83 (b) Medical follow up treatment would include following a treatment plan, and when necessary referrals for continued care following the transfer or placement in, other facilities, or their release from custody. All Mental Health services would be managed by the Phillips State Prison.

§115.83 (c) ACCDC provides victims with medical (onsite) and mental health services (via Phillips State Prison) consistent with the community level of care.

§115.83 (d) This provision is non-applicable as it is an all-male prison.

§115.83 (e) This provision is non-applicable as it is an all-male prison.

§115.83 (f) Interviews with medical staff confirm that Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

§115.83 (g) Interviews with Medical Staff and PREA Coordinator confirm that treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. There have not been any cases to review for verification.

§115.83 (h) ACCDC would make arrangements with the Phillips State Prison to conduct a mental health evaluation of known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Typically, this would have already been handled at the catchment facility prior to transfer to ACCDC, but if discovered while at ACCDC, arrangements would be made to ensure the inmate was offered treatment.

Corrective Action Recommendation:

None

DATA COLLECTION AND REVIEW

Standard §115.86: Sexual abuse incident reviews

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

§115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

§115.86 (b)

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

§115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

§115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No

- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ §115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

§115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06 to include Attachment 9, Incident Review Checklist
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Investigative Files

2. Interviews:

- a. PREA Compliance Manager
- b. PREA Coordinator
- c. Warden

Findings:

§115.86 (a) The ACCDC reports that in the past 12 months, there have been zero criminal and/or administrative investigations of alleged sexual abuse completed at the facility. Thus, the facility reports zero sexual abuse incident reviews were conducted.

§115.86 (b) The agency's PREA policy, 208.06, establishes a formalized sexual abuse incident review team or process. Interviews with the PREA Coordinator indicate a formal process exists to be completed by the PREA Coordinator, SART and leadership staff. A report would be prepared with recommendations to be discussed with facility leadership. ACCDC

reported zero sexual abuse incident reviews in the past year, thus no incident reviews were conducted. Typically, the Warden, PREA Coordinator and Medical staff would all be a part of the review.

§115.86 (c) Interviews with the PREA Coordinator indicate a formal process exists for reviews to be completed by the PREA Coordinator, Medical, SART and leadership staff.

§115.86 (d) The review team follows the Sexual Abuse Incident Review Checklist, which is Attachment 9 of the Georgia Department of Corrections PREA Policy 208.06. This form reviews the criteria in §§ §115.86(d)(1)-(d)(5) and makes recommendations for improvement. A written report of the review is generated documenting the actions and presented to the facility head and PREA compliance manager. Typically, the Warden, PREA Coordinator and PREA Compliance Manager would all be a part of the review itself.

§115.86 (e) The facility implements the recommendations for improvement or documents its reasons for not doing so.

Corrective Action Recommendation:

None

Standard §115.87: Data collection

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

§115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?
 Yes No

§115.87 (b)

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

§115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

§115.87 (d)

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

§115.87 (e)

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

§115.87 (f)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Athens-Clarke County Department of Corrections Website:
<https://www.athensclarkecounty.com/7110/PREA>

e. Annual Report data

2. Interviews:

- a. PREA Compliance Manager
- b. PREA Coordinator

Findings:

§115.87 (a) ACCDC collects accurate, uniform data for every allegation of sexual abuse at the facility using a standardized instrument or set of definitions. ACCDC follows the guidelines for complete the Survey of Sexual Violence (SSV) report. The auditor reviewed the annual data for 2015-2018.

§115.87 (b) ACCDC aggregates the incident based sexual abuse data annually. Annual reports were reviewed and the Warden and PREA Coordinator were interviewed in order to determine compliance.

§115.87 (c) ACCDC data produced follows the guidelines for complete the Survey of Sexual Violence (SSV) report. The auditor reviewed annual reports for 2015-2018. The reports break the incidents down in the same categories as the survey of sexual violence.

§115.87 (d) ACCDC maintains, reviews and collects data as needed from all available incident-based documents, including report, investigation files, and sexual abuse incident reviews.

§115.87 (e) ACCDC does not contract with any private facilities for the confinement of inmates. This provision is not applicable.

§115.87 (f) ACCDC provides all data from the previous calendar year to the Department of Justice no later than June 30 when requested. This data was not requested for 2018.

Corrective Action Recommendation:

None

Standard §115.88: Data review for corrective action

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

§115.88 (a)

- Does the agency review data collected and aggregated pursuant to § §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?
Yes No
- Does the agency review data collected and aggregated pursuant to § §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?
Yes No

§115.88 (b)

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

§115.88 (c)

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

§115.88 (d)

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

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy 208.06
- b. Athens-Clarke County Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Annual PREA aggregated data reports 2015-2018 posted at:
<https://www.athensclarkecounty.com/7110/PREA>

2. Interviews:

- a. PREA Compliance Manager
- b. PREA Coordinator
- c. Warden

Findings:

§115.88 (a) The agency's first annual report was generated in 2015. Interviews with the Warden and PREA Coordinator demonstrate compliance with this standard. The auditor reviewed information posted on the website from 2015-2018. The agency reviews the aggregated data annually to evaluate and assess their efforts see if they can improve on the effectiveness of their prevention, detection and response to sexual abuse and sexual harassment. Annual reviews included addressing accessibility to a mobile phone with the

PREA hotline accessible- for inmates assigned to the isolation and segregation unit, as well as the medical cell. A kiosk is now available in each of the three dormitories offering inmates the ability to view the Inmate Handbook, including the information pertaining to PREA and suicide prevention information. The facility has also addressed blind spots in the facility and documented the need for improvement.

§115.88 (b) ACCDC annual reports include a comparison from year to year as well as any corrective actions needed. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

§115.88 (c) ACCDC completes an annual report that is available on its website at: <https://www.athensclarkecounty.com/7110/PREA> The Warden confirmed in an interview that he approves all annual reports.

Corrective Action Recommendation:

None

Standard §115.89: Data storage, publication, and destruction

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

§115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained? Yes No

§115.89 (b)

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

§115.89 (c)

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

§115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Georgia Department of Corrections Policy: 208.06
- b. Athens- Clarke County Department of Corrections Policy 208.06
- b. Completed Pre-Audit Questionnaire submitted by ACCDC
- c. Historical data, annual reports
- d. Facility webpage: <https://www.athensclarkecounty.com/7110/PREA>

2. Interviews:

- a. PREA Compliance Manager
- b. PREA Coordinator
- c. Warden

3. Site review observations:

- a. Observed secured office space where investigative files and PREA related files are stored.

Findings:

§115.89 (a) The agency ensures that date is securely retained. The auditor observed that PREA Investigation files are securely retained in a locked office.

§115.89 (b) ACCDC makes all aggregated sexual abuse data, from facilities under its direct control available to the public annually through its website.

§115.89 (c) ACCDC removes all personal identifiers before making aggregated sexual abuse data publicly available.

118.89 (d) ACCDC maintains sexual abuse data collected pursuant to § §115.87 for 10 years after the date of the initial collection.

Corrective Action Recommendation:

None

AUDITING AND CORRECTIVE ACTION

Standard §115.401: Frequency and scope of audits

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

§115.401 (a)

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

§115.401 (b)

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

§115.401 (h)

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

§115.401 (i)

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

§115.401 (m)

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

§115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. 2016 Audit Report
- b. Agency website of Audit and annual Reports

2. Interviews:

- a. Random Sample of Inmates
- b. Random Sample of Staff
- c. Specialized Staff
- d. No Targeted Inmates were identified to interview

3. Site review observations:

- a. Toured entire facility
- b. Camera placement in the facility
- c. Control station

Findings:

§115.401 (a) The ACCDC operates a work camp and a transition center collocated adjacent to each other. There is one Warden that oversees the day-to-day operations at both facilities. The ACCDC was initially audited in 2016, during the third year of the first cycle. This was their second audit and it was conducted in the third year of Audit Cycle 2.

§115.401 (b) Since the ACCDC is an independent county correctional institute, they should be conducting their audit the first year of the audit cycle. Globally, they are a contract facility for the Georgia Department of Corrections paid a sum of money for each day that they house state inmates. As an independent agency/facility, they should shift their audit to the first year of the third cycle. The agency must ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency is audited.

The Third Audit Cycle is as follows:

Third Audit Cycle:

First Year: Ends August 19, 2020

Second Year: Ends August 19, 2021

Third Year: Ends August 19, 2022

The agency should complete their audit for cycle three no later than August 19, 2020.

This information is provided for clarification from the PREA Resource Center's Frequently Asked Questions:

b. As another hypothetical, what happens if an agency has only one facility but receives no audit by the conclusion of the first year of the first audit cycle (by August 19, 2014)?

Because the standards require that an agency have “at least” one-third of its facilities audited during each year of the three-year audit cycle, an agency with a single facility is required to receive an audit during the initial year of the audit cycle to be compliant as of August 19, 2014. In other words, an agency with a single facility cannot be said to have had at least one third of its facilities audited by August 19, 2014, if it has had no facility audits. **However, a single-facility agency could become fully compliant at any point during the remainder of the three-year audit cycle (concluding on August 19, 2016) subject to a successful audit of that facility.** So for example, a single-facility agency that is not compliant as of the conclusion of the first year of the audit cycle because it had received no audits by August 19, 2014, could nevertheless become fully compliant with the audit standards if it receives an audit one month later (early in the second year of the audit cycle) and would remain compliant with this standard through the remainder of the first audit cycle.

§115.401 (h) The auditor was granted full access to the facility for the purposes of the tour review. The PREA Coordinator provided the tour and unlocked all secured access doors to allow the auditor to visually observe all areas of the facility. This included all areas within the facility to include the inmate housing areas, recreation yard, storage, kitchen, law library, programs area, chapel, and intake areas etc.

§115.401 (i) The auditor was provided with copies of all policies and granted access to review documentation of inmate records. The auditor was permitted to copy or to request copies of all documents needed to conduct a thorough audit to include electronic data.

§115.401 (m) The auditor was provided a private setting to conduct interview with staff and offenders without interruption. Inmates and Staff interviewed were informed of the confidentiality of the audit prior to conducting the interviews.

114.401 (n) Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The auditor did not receive any letters from offenders at this facility. The facility posted the Notices of Audit six weeks prior to the audit. The facility provided the auditor with photographic evidence of the postings. During the onsite review, the auditor observed Notices of Audit, in both English and Spanish posted throughout the facility where inmates, staff and the public would frequent.

Inmates interviewed indicated the signs had been up for a period of time in line with what the auditor believed to be valid.

Corrective Action Recommendation:

None

Best Practice Recommendation:

Complete your PREA Audit during Year one of teach audit cycle.

Standard §115.403: Audit contents and findings

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

§115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § §115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

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

1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):

- a. Pre-Audit Questionnaire Completed by ACCDC
- b. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program
- c. Link to website: <https://www.athensclarkecounty.com/7110/PREA>

2. Interviews:

- a. PREA coordinator
- b. Warden

Findings:

§115.403 (f) The ACCDC Final Audit Report for 2016 is posted on the agency website as required by this standard. The report was found on the agency webpage located at: <https://www.athensclarkecounty.com/7110/PREA>.

Corrective Action Recommendation:

None

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Melinda Allen _____

November 5, 2019 _____

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.