

# PREA Facility Audit Report: Final

**Name of Facility:** Emanuel Women's Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 12/20/2020

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Elisabeth Copeland	<b>Date of Signature:</b> 12/20/2020

AUDITOR INFORMATION	
<b>Auditor name:</b>	Copeland, Elisabeth
<b>Email:</b>	sunflowerorgsolutions@gmail.com
<b>Start Date of On-Site Audit:</b>	10/26/2020
<b>End Date of On-Site Audit:</b>	10/28/2020

FACILITY INFORMATION	
<b>Facility name:</b>	Emanuel Women's Facility
<b>Facility physical address:</b>	714 Gumlog Road, Swainsboro, Georgia - 30401
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	P.O. Box 218, Swainsboro, Georgia - 30401

<b>Primary Contact</b>	
<b>Name:</b>	Whitney East- Hendrix
<b>Email Address:</b>	Whitney.Hendrix@gdc.ga.gov
<b>Telephone Number:</b>	478-494-3520

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Meosha McMillan
<b>Email Address:</b>	Meosha.McMillan@gdc.ga.gov
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<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Whitney East-Hendrix
<b>Email Address:</b>	whitney.hendrix@gdc.ga.gov
<b>Telephone Number:</b>	O: (479) 494-3520

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Teah Gay
<b>Email Address:</b>	Teah.Gay@gdc.ga.gov
<b>Telephone Number:</b>	478-289-2784

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	415
<b>Current population of facility:</b>	406
<b>Average daily population for the past 12 months:</b>	405
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Females
<b>Age range of population:</b>	20-65
<b>Facility security levels/inmate custody levels:</b>	Minium/Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	81
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	34
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	10

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Georgia Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	300 Patrol Rd., Forsyth, Georgia - 31029
<b>Mailing Address:</b>	
<b>Telephone number:</b>	(478) 992-5374

Agency Chief Executive Officer Information:	
<b>Name:</b>	Timothy C. Ward
<b>Email Address:</b>	Timothy.Ward@gdc.ga.gov
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Grace Atchison	<b>Email Address:</b>	grace.atchison@gdc.ga.gov

## AUDIT FINDINGS

### **Narrative:**

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

### **PRE-AUDIT**

The PREA Audit for Emanuel Women's Facility (EWF) was originally scheduled for March 16 - 20, 2020. However, due to COVID-19 and state lockdowns, the audit was moved to October 2020. EWF uploaded all pre-audit documentation through the Online Audit System (OAS) created and monitored by the PREA Resource Center.

A Notice of PREA Audit was sent to EWF on September 15, 2020 via the Georgia Department of Corrections (GDC) Statewide PREA Coordinator, Grace Atchison. Notices were to be posted in all living units, program areas, recreation areas and any other areas that offenders would gather. The notice also contained contact information of the auditor and advised staff and offenders that the onsite portion of the PREA audit will be conducted on October 26 – 28, 2020.

The Auditor reviewed the provided documentation and began completing the Auditor's Compliance Tool to determine a baseline for compliance and to formulate questions for the onsite portion of the audit.

On October 25, 2020, a tentative agenda for the PREA audit was sent to the PREA Coordinator for GDC. This agenda outlined the when the auditing would be on site, the types of staff and inmates that would be interviewed and when the audit would conclude. EWF was advised of which specialized staff would be interviewed as well as which specialized inmate populations would be interviewed.

### **ONSITE**

The Auditor was greeted and given a history and the layout of the facility by Deputy Warden (PREA Compliance Manager) Whitney Hendrix as well as other Executive Team members. After the initial meeting, a detailed tour was provided to the Auditor.

The PREA Compliance Manger lead the onsite tour. The tour began with the dorms and ended in the intake/shakedown area. The Auditor viewed camera placements, showers/restrooms and observed cross-gender announcements being made to offenders in the housing units. PREA reporting information was clearly marked on bulletin boards and painted on walls in each living unit. In all the living units, toilets and shower stalls all had appropriate coverings. The "Notice of PREA Audit" was also clearly visible throughout the tour.

In addition to the living units, intake, medical area, outside recreation, inside recreation, dining areas, library, programs, and control posts were also toured. PREA reporting information in English and Spanish were found on every bulletin board and were clearly marked.

Immediately after the tour, the PREA Compliance Manager provided the Auditor with staff rosters from all shifts and provided a list of specialized staff. The Auditor then randomly selected staff from each shift, as well as established times to interview specialize staff.

The PREA Coordinator provided the Auditor with housing unit rosters. In reviewing the housing rosters the Auditor randomly selected inmates from each unit for random inmate interviews and selected inmates for the targeted protocols. Based on the available inmate population, inmates were selected for the following targeted protocols: Limited English Proficient inmates, Gay and Bisexual inmates and Inmates who Reported Sexual Abuse During the Risk Screening. A total of 26 inmates were selected to be interviewed. EWF provided confidential locations in the facility for the Auditor to interview inmates.

EWF provided appropriate accommodations for the Auditor to conduct inmate and staff interviews. The Auditor was given access to staff files, inmate files and any documentation requested. Facility staff were great to work with and were very accommodating. The PREA Compliance Manager and the Warden Designee were readily available to answer any questions and assist in any way. Staff at EWF were extremely helpful and polite throughout the entire process and escorted the Auditor throughout the facility.

The Auditor interviewed a total of 26 inmates with various lengths of stay. In addition, the Auditor interviewed a total of 25 staff to include the Sitewide PREA Coordinator, Warden Designee, PREA Compliance Manager, Medical Staff, Human Resources, Victim Advocate, Upper Level Supervisors, Intake Staff, Staff who Perform Risk Screening, Contractors, Staff who Monitor Retaliation, Members of the Sexual Abuse Review Team, Investigators, as well as random staff from all shifts.

Prior to the exit interview, the Auditor reviewed onsite documentation.

#### **POST AUDIT**

After the onsite portion of the PREA audit, this Auditor reviewed the notes from the tour; all interviews conducted and did another review of the supporting documentation. Work on the final audit report began on the OAS.

On December 11, 2020, the PREA audit report was sent to EWF, as well as the statewide PREA coordinator for approval before being submitted to the PREA Resource Center.

## AUDIT FINDINGS

### Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Emanuel Women's Facility (EWF) is in Swainsboro, Georgia. It currently houses adult female offenders of a minimum and medium custody levels.

This institutional design features a educational buildings which serves locations for EWF's GED programs and braille program. EWF contains food service preparation and dining areas, laundry, property room, education, library, medical and dental services for the inmate population assigned to EWF. The institution's design also includes recreation and visiting areas. EWF has seven open bay/dorm style housing units and seven (7) segregation cells.

EWF receives offenders sentenced to the Georgia Department of Corrections with the current population being 250 adult female offenders.

EWF staff is responsible for the security of all buildings.

EWF is located within a secure perimeter. The facility has the official capacity to house 415 offenders.

## AUDIT FINDINGS

### Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy ). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

<b>Number of standards exceeded:</b>	4
<b>Number of standards met:</b>	41
<b>Number of standards not met:</b>	0

EWF exceeded the following standards:

- 115.11 **Zero Tolerance of Sexual Abuse and Sexual Harassment: PREA Coordinator**
- 115.15 **Limits of Cross-gender Viewing and Searches**
- 115.31 **Employee Training**
- 115.51 **Inmate Reporting**

## **Standards**

### **Auditor Overall Determination Definitions**

- Exceeds Standard  
(Substantially exceeds requirement of standard)
- Meets Standard  
(substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard  
(requires corrective actions)

### **Auditor Discussion Instructions**

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<p data-bbox="252 170 928 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1485 573">a) The Georgia Department of Corrections (GDC) and Emanuel Women's Facility (EWF) have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. This policy outlines how EWF will implement the agency's approach to preventing, detecting and responding to sexual abuse and sexual harassment. This same policy also includes definitions of prohibited behavior regarding sexual abuse and sexual harassment.</p> <p data-bbox="252 618 1469 1077">Georgia Department of Corrections Standard Operating Procedures, 208.06, "Prison Rape Elimination Act (PREA) Sexually Abusive Behavior and Prevention and Intervention Program," dated March 2, 2018 states, "The Georgia Department of Correction (GDC) has a zero-tolerance policy toward all forms of sexual abuse, Sexual Harassment and sexual activity among offenders. The purpose of this policy is to strengthen the Department's efforts to prevent occurrences of this nature by implementing key provisions from the U. S. Department of Justice's standards on the prevention, detection, and response to sexual abuse in confinement facilities, in accordance with the Prison Rape Elimination Act of 2003 (PREA). This policy provides guidance to address the following prohibited sexually abusive and/or harassing behavior(s): Offender perpetrator against offender victim; and Staff perpetrator against offender victim." (Page 1)</p> <p data-bbox="252 1122 1465 1536">This same policy also contains sanctions for violating this policy. "Offenders who sexually abuse another offender will be disciplined and referred for criminal prosecution. Offenders who engage in sexual harassment, consensual sexual contact with another offender, attempt to engage in or solicit such contact, or help another engage sexual contact with an offender will be disciplined. Staff members who engage in sexual abuse or sexual harassment of an offender will be subject to disciplinary action, up to an including termination and banishment from all Georgia correctional insititutions, whichever action is applicable. Additionally, staff members who engage in sexual abuse of an offender will be subject to criminal prosecution. Pursuant to O.C.G.A. 16-6.5.1, it is a felony for correctional staff to have sexual contact with an offender." (Page 6)</p> <p data-bbox="252 1581 1477 1738">EWF has zero tolerance signage throughout the facility. In many cases, this information is also painted on the walls. When interviewing staff and offenders, all stated sexual abuse was not tolerated. EWF also has an all female staff. In this Auditor's opinion, while this does not eliminate the risk of staff on offender sexual abuse it does significantly reduce it.</p> <p data-bbox="252 1783 1477 1984">b) GDC employs an upper-level, agency-wide PREA Coordinator as required by this standard and by GDC policy 208.06. This policy states, "The Department shall employ or designate an upper-level, Department PREA Coordinator with sufficient time and authority to develop, implement, and oversee Department efforts to comply with the PREA standards in all facilities." (Page 6)</p> <p data-bbox="252 2029 1449 2096">This position is also found in GDC's organizational chart. This chart shows the Department PREA Coordinator reports directly to the GDC Commissioner.</p>

The PREA Coordinator states, "Yes, I have enough time to get my PREA duties completed. Times can be overwhelming; however, COVID has caused things to slow down and allowed us to focus on the administrative side for our audits. There are 88 PREA Compliance Managers in the state; this includes PCMs at our county facilities. Of these 88 compliance managers, 62 directly report to me. I keep in touch with them through trainings, emails and the telephone. Before COVID, we also had site visits with the facilities. We are always reviewing standards with them to ensure we are all on board. If they can't get on board, then we find new people."

c) EWF has designated a PREA Compliance Manager (PCM) with sufficient time and authority to coordinate EWF's efforts to comply with the PREA Standards. This is done in compliance with the standard and with GDC policy 208.06. This policy states, "The Warden/Superintendent at each institution must ensure that all aspects of this policy are implemented. Each facility shall have an assigned PREA Compliance Manager, who has sufficient time and authority to coordinate the facility's efforts to comply with PREA standards." (Page 6 and 7)

ECF's PCM is the Deputy Warden of Care & Treatment and reports directly to the Warden. This is also demonstrated in EWF's organizational chart.

ECF's PCM states, "Yes, I have sufficient time to complete my duties. I work on classification, participate in shift briefings, conduct facility inspections, talk with staff and inmates, involved with SART and pull records to check."

Based on the tour of the facility, documentation review, and interviews with staff and offenders, ECF exceeds the standard of zero tolerance of sexual abuse and sexual harassment: PREA coordinator.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	a, b) This standard is non-applicable as EWF does not contract with other agencies to house inmates.

115.13	<b>Supervision and monitoring</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>a) GDC requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate staffing level.</p> <p>GDC policy 208.06 states, "The Warden/Superintendent at each facility shall develop a written Staffing Plan in accordance with this SOP using Attaching 11, Staffing Plan Template. To enhance the supervision and monitoring of offenders, each facility shall document and make its best efforts to comply on a regular basis with the established staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect offenders against sexual abuse. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations on the daily Post Roster. Facility management staff will review these deviations on a regular basis..." (Page 7)</p> <p>Section III of GDC's Facility Staffing Plan for EWF states, "The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration the procedures outlined in section VII of this plan." (Page 1)</p> <p>Section VII of EWF's staffing plan addresses all requirements outlined in 115.13a. This plan is also predicated on average daily population (ADP) of 415 since the EWF's last PREA audit.</p> <p>The Warden Designee states, "Yes, we have adequate staffing levels for this facility. We also have adequate camera coverage. Everything is documented if we go below those levels. We have standby mandatory call-in lists to ensure each shift as required coverage."</p> <p>The PCM states they are active in ensuring adequate staffing levels are maintained at EWF.</p> <p>b) EWF documents all instances where the staffing plan is not in compliance.</p> <p>EWF administration states, "Emanuel Women's Facility has eight priority posts on first shift and six priority posts on second shift. When emergencies arise at the facility where an officer's post has to change the following are just some of the reasons: unplanned call-ins, unplanned hospital posts; and unplanned offender transfers. When shift supervisors must deviate from their original post assignments there are on-call calendars of which cover all shifts (including split shift). Each shift on-call calendar is completed by the month. If post assignments are changed, the shift supervisor (OIC) must make sure to document on their shift summary and their post assignment shift briefing notes. Deviations must include officer name, post changed and reason for the change. If split shift works a post that is mainly assigned to first shift or second shift officer the notation should read "split shift," "officer name," covered post due to shift shortage and what post was covered."</p> <p>The Auditor reviewed multiple examples of documentation for staffing plan deviations. All documentations meet EWF's requirements.</p>

c) EWF's staffing plan is reviewed annually by the PREA Unit. The Auditor reviewed the staffing plans from 2019 and 2020 and found both plans were signed by EWF's warden and a member of the PREA Unit from GDC's Central Office.

The PREA Coordinator states, "We review all plans annually or more if there is a change in facility administration."

d) GDC's requires intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

GDC policy 208.06 states, "Unannounced rounds by supervisory staff, with the intent of identifying and deterring sexual abuse and sexual harassment, are required to be conducted every week, including all shifts and all areas. These rounds will be documented in the area log books. In addition, the institutional Duty Officer is required to conduct and document unannounced rounds at least once per week in all areas. These rounds will be documented in the local Duty Officer Logbook." (Page 8)

One upper-level supervisor states, "We log our rounds in the logbook which is kept at the officer's station. The duty officer also documents the round on a sheet that gets turned in. I make sure I document in the log after I am done checking the area. This way they don't know what I am doing. If I catch staff alerting other staff, I call them in and have a talk with them. I remind them of the importance of PREA."

The Auditor reviewed several logbooks and found documentation of unannounced rounds in each book.

Based on documentation review and staff interviews, EWF meets the standard for supervision and monitoring.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	a, b, c) This standard is not applicable as EWF does not house youthful offenders. This was confirmed through the tour of the facility, interview with staff and inmates as well as documentation review.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>EWF has an all-female staff. While male staff from Central Office or other facilities may visit EWF, there have been no instances of cross-gender strip searches or body cavity searches. The only male employee on the premises works in maintenance and is never with left alone with inmates unsupervised.</p> <p>a) GDC has policy in place prohibiting cross-gender strip or body cavity searches. GDC policy 208.06 states, "The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in Exigent Circumstances or when performed by medical practitioners." (Page 9)</p> <p>There have been zero cross-gender strip or visual caviity searches at EWF. Medical staff has not conducted such searches.</p> <p>b) GDC/EFW prohibits cross-gender pat searches of its female inmates, absent exigent circumstances. GDC policy 208.06 states, "The facility shall not conduct cross-gender pat searches of female offenders, absent exigent circumstances. This requirement shall not restrict female offender's access to regularly available programming or other out-of-cell opportunities in order to comply with this provision." (Page 9)</p> <p>All inmates interviewed reported they have not been pat searched by male staff who visit EWF.</p> <p>c) EWF has provisions in place requiring the documentation of all cross-gender strip and or body cavity searches.</p> <p>GDC policy 208.06 states, "The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female offenders via an incident report." (Page 9)</p> <p>d) GDC/EFW has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing with non-medical staff of the opposite gender can view them in various stages of undress. These same policies require staff of the opposite gender to announce their presence when entering dorms.</p> <p>GDC policy 208.06 states, "The facility shall implement procedures that enable offenders to shower, perform bodily functions, and change clothing without non-medical staff members of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Offenders should only shower, perform bodily functions, and change clothing in designated areas (e.g. cells, shower rooms, and bathrooms). Staff members of the opposite gender shall announce their presence when entering an offender housing unit; this includes the officer assigned to the housing unit. It is understood that staff members might not make announcements when responding to circumstances that require immediate action in order to combat a threat to security. Offenders will be notified of the presence of opposite-gender staff members in several ways: Offenders are advised of the requirement to remain clothed, and the presence of cross-gender staff</p>

members generally, during the intake screening process and the admission and orientation process; The following notice will be posted "NOTICE TO OFFENDERS: Male and female staff members routinely work in and visit housing areas." For staff members with offices in the housing units, the most recent schedule is posted in the unit so offenders are aware of when opposite-gender staff may be present; An announcement shall be made each time an opposite-gender staff member comes into a housing unit and; Nothing in this section should preclude opposite-gender staff members from viewing live or recorded video, or participating in an offender suicide watch." (Page 9 and 10)

During the tour of EWF, the Auditor observed the following:

#### **A Dorm (Intake Dorm)**

- Bunk beds/Open bay set up to hold 44 inmates
- Empty on day of audit
- Also used as quarantine dorm for new arrivals
- Genders on duty sign posted
- Individual showers with curtains to provide privacy
- Individual toilet stalls with curtains to provide privacy

#### **B, C, D, E, F Dorms are all set up as A dorm**

#### **H Dorm (formally Faith/Character Dorm)**

- 16 rooms -- 16 inmates per room
- Bunk beds/Open bay set up
- Single toilet and Shower.
  - Shower is separate from the toilet area with a curtain
  - Toilet and shower area separate from the living area by a solid door
- Dorm also contains a classroom with a single inmate restroom

#### **Laundry**

- No inmate restrooms

#### **Braille Education Building (A/B sides)**

- One inmate restroom (only one inmate at a time)

#### **Gym (also doubles as intake due to Covid-19)**

- Toilets are individual stalls with curtains for privacy
- Strip searches are done in the restroom

#### **Library (includes law library and career center)**

- No Inmate Restrooms

#### **Kitchen**

- Staff bathroom located across from staff office
- Mirrors in the corners to aid in preventing blind spots
- All freezers and dry storages are locked; inmates must have staff unlock these areas to enter
- Inmate restroom is across the hall from the dining room; inmates must have staff permission to use

### **Intake/Shakedown Building**

- Currently only used to run outside crew through metal detector due to Covid-19
- Inmates strip out individual stalls behind curtains to protect privacy

All inmates interviewed report they have enough privacy to shower, change their clothes and use the restroom without staff observing them.

During the tour the Auditor also observed inmates making announcements when staff entered the dorms. All inmates would stand and loudly make the announcement staff had entered the dorm.

e) GDC/EFW has policy in place prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

GDC policy 208.06 states, "The facility shall not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it may be determined during conversations with the offender, 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. The provision does not limit searches of offenders to ensure the safe and orderly running of the institution." (Page 10)

There were no transgender or intersex inmates present during the onsite portion of this audit. This was confirmed through interviews with staff and administration.

f) 100% of all security staff have received training on conducting cross-gender pat down searches and searches of transgender or intersex inmates in a professional and respectful manner, consistent with security needs.

All staff interviewed reported being trained to conduct cross-gender pat searches and searches of transgender inmates.

Based on the information gathered during the tour and interviews with staff and inmates, EWF has exceeded the standard of limits of cross-gender viewing and searches.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) EWF has established procedures to provide disabled inmates equal opportunity to participate or benefit from all aspects for the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.</p> <p>GDC policy 103.63, Americans with Disabilities Act (ADA), Title II Provisions, dated 4/20/2018 states, "This Standard Operating Procedure provides information concerning how the Georgia Department of Corrections (GDC) shall maintain compliance with the Americans with Disabilities Act (ADA). The ADA is a Civil Rights law, which requires the agency to provide Reasonable Accommodations and accessibility to programs, services, and activities for offenders with disabilities. The GDC shall ensure compliance with the law, with the only exceptions of Undue Burden or Direct Threats to safety and security. The agency prohibits discrimination based on an offender's Disability when making administrative decisions and in providing access to programs, services, and activities." (Page 1)</p> <p>GDC policy 208.06 states, "The local PREA Compliance Manager shall ensure the appropriate resources are available to offenders with disabilities and those who are LEP so they may understand the facility policies around reporting, preventing, detecting, and responding to sexual abuse and sexual harassment." (Page 11)</p> <p>The PREA Compliance Managers states, "In the event an inmate who has any of the following disabilities and is in need of assistance for a PREA incident, Emanuel Women's Facility has the following assistance in place: Deaf (Inmate will be able to read the materials); Visually Impaired (Staff Will Read to Inmate); Otherwise Disabled (Staff Will Read to Inmate); and Limited in Reading Skills (Staff Will Read to Inmate)."</p> <p>There were no inmates identified as visually impaired, hearing impaired or having a cognitive disability onsite during this portion of the audit. This was verified through interviews with staff and inmates.</p> <p>b, c) EWF has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects for the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. EWF also prohibits the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety.</p> <p>This can be found in GDC's policy 208.06. This policy contains the same language as the standard.</p> <p>The PREA Compliance Manager states, "If an inmate is limited English proficient, we will use the Language Line. We also have one Spanish-Speaking staff member from another facility that has agreed to assist."</p> <p>All staff have access to a Quick Reference Guide on how to use the Language Line. All staff</p>

interviewed stated they would not use inmate interpreters and would access the Language Line when needed.

The Auditor reviewed EWF PREA Brochure in English and in Spanish.

There were no inmates identified as limited English proficient during this portion of the audit.

Based on documentation review and interviews with staff, EWF meets the standard of inmates with disabilities and inmates who are limited English proficient.

115.17	<b>Hiring and promotion decisions</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1468 526">a, b, f) GDC/EWF has policy in place prohibiting the hiring and promoting of any employee or enlisting the services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility or juvenile facility or who has been convicted of engaging in or attempting to engage in sexual abuse in the community.</p> <p data-bbox="252 571 1484 862">GDC policy 208.06 states, "The Department shall not hire or promote anyone who may have contact with offenders, who: Has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C 1997); 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; or has been civilly or administratively adjudicated to have engaged in the activity described in paragraph a.i.1., of this section." (Page 11)</p> <p data-bbox="252 907 1468 1019">This policy also states, "The Department shall consider any incident of sexual harassment in determining whether to hire or promote anyone who may have contact with offenders." (Page 11) This same policy also lists the same requirements for all contractors.</p> <p data-bbox="252 1064 1476 1220">GDC use the "Applicant Verification" form to ask specific questions about committing prior sexual abuse. This form becomes a part of the applicant's employment package. At this time, applicants also complete a "Criminal/Driver History Consent Form" which enable GDC to contact previous employment regarding any sexual abuse.</p> <p data-bbox="252 1265 1452 1422">While onsite the Auditor reviewed 21 human resources staff files and two (2) contractor files. All twenty-one employee and both contractor files contained signed "Criminal/Driver History Consent Forms." All files reviewed also contained the "Applicant Verification" form or, depending on the length of service, the "Sexual Assault Awareness" statement.</p> <p data-bbox="252 1467 1428 1534">c, e) GDC policy requires criminal background checks on all new hires and to contact prior institutional employers.</p> <p data-bbox="252 1579 1484 2004">GDC policy 208.06 states, "Before hiring new employees who may have contact with offenders, the Department shall: Ask all applicants and employees who may have contact with offenders directly about previous misconduct described in SOP 104.09, Filling a Vacancy, in written applications or interviews for hiring and promotions and any written interview or written self-evaluations conducted as part of reviews of current employees. Every employee has a continuing affirmative duty to disclose any such misconduct. Perform a Criminal History record checks on all employees and volunteers prior to start date and again within at least every five years. A tracking system shall be implemented at each local facility to ensure the criminal history checks are conducted within the appropriate time frames, according to policy, for each person with access to that facility." (Page 12)</p> <p data-bbox="252 2049 1452 2161">Human Resources state, "We complete background checks on all new hires, for promotions and all re-hires." When it came to considering incidents of sexual harassment, they state, "It has never happened; but, yes, we would consider it."</p>

d) Department policy also requires criminal background checks be completed before enlisting the services of any contractor. Policy 208.06 contains the same language as this standard. This same policy also states, "Material omissions regarding misconduct or the provisions of materially false information shall be grounds for termination." (Page 12)

h) GDC policy 208.06 also states, "Unless prohibited by law, the Department shall 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. The Department complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations." (Page 12)

Human Resources state, "We provide this information only if the former employee signed a release."

Based on documentation review and staff interviews, EWF meets the standard for hiring and promotion decisions.

115.18	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b) EWF has not acquired a new facility or made substantial expansion or modification to existing building. EWF has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>Based on documentation review, EWF meets the standard of upgrades to facilities and technology.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b) GDC/EFW are responsible for conducting administrative and criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct.)</p> <p>GDC policy 103.10, Evidence Handling and Crime Scene Processing, dated 3/23/2018 states, "This policy is to establish guidelines and procedures to be employed by Office of Professional Standards (OPS) sworn personnel when identifying, examining, gathering, and documenting evidence. This OPS Standard Operating Procedure (SOP) provides the practice and procedure for the preservation, control, and disposition of all physical evidence obtained in connection with a violation of law and/or institutional regulation. Included in this SOP are the procedures for the chain of custody and evidence handling/collection." (Page 1)</p> <p>GDC policy 208.06 states, "Each facility shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Reference SOP 103.10, Evidence Handling and Crime Scene Processing and SOP 103.06, Investigations of Allegations of Sexual Contact, Sexual Abuse, Sexual Harassment of Offenders. The Department's response to sexual assault follows the guidelines in the U. S. Department of Justice Office of Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adult/Adolescents," dated April 2013, or the most current version." (Page 13 and 14)</p> <p>All staff interviewed are familiar with GDC's evidence protocol and could identify who conducted sexual abuse investigations at EWF.</p> <p>EFW does not house youthful offenders.</p> <p>c) EWF offers all inmates who experience sexual abuse access to forensic medical examinations. These are offered at no charge to the victim. In the past 12 months, there have been no SANE examinations completed on any inmate victims of sexual abuse. This is found in department policy.</p> <p>GDC policy states, "When there is a report of an incident of sexual abuse that was alleged to have occurred within the previous 72 hours, or there is a strong suspicion that an assault may be sexual in nature, a physical examination of the alleged victim shall be conducted to determine if immediate medial attention is necessary and if the SANE protocol should be initiated. (Attachment 5, Procedure for SANE Evaluation/Forensic Collection). The SANE examination shall be provided at no cost to the offender. Physical evidence from the suspected perpetrator(s) will be collect and may also include an examination. Offender consent must be obtained prior to initiating the SANE protocol, in accordance with 507.04.85 Informed Consent." (Page 14)</p> <p>EFW maintains a Medical PREA Log for documentation of all SANE evaluations.</p> <p>There were no SAFEs/SANes staff onsite to be interviewed.</p> <p>d, e, h) EWF provides victim advocate services by a qualified facility staff member. This is</p>

done in accordance with the standard and policy.

The PCM states, "Emanuel Women's Facility has attempted to make an outside victim advocate available to offenders. Multiple Rape Crises Centers have been contacted to establish an MOU or other agreement to no avail. I document all efforts. If requested by the victim, a qualified staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews. They provide emotional support, crisis intervention, information, and referrals. Two staff members have completed The Georgia Network to END Sexual Assault (GNESA) training for Victim Advocacy."

GDC Policy 208.06 states, "The Institution PREA Compliance Manager, under the direction of the Warden/Superintendent, shall attempt to enter into agreement, or Memorandum of Understanding (MOU), with a rape crises center to make available a victim advocate to offenders alleging sexual abuse/sexual harassment upon request. If the facility cannot do so, efforts must be documented, and local staff shall be identified and specially trained to provide this service. Documentation of training must be maintained by the employee's manager and made available to the local PREA Compliance Manager upon request." (Page 15)

The Auditor reviewed documentation of attempts to enter a MOU with five (5) local rape crises centers. In addition, the Auditor also reviewed training certificates for the two qualified staff persons who offer victim advocate services to inmate victims upon request.

While the facility identified one inmate who reported sexual abuse, the inmate would not confirm this report during her interview with the Auditor.

The Auditor reviewed three investigative files of inmate on inmate sexual abuse and found signed documentation showing victim advocate services were offered to the victims and refused.

f) This standard is not applicable as GDC/EWF conduct criminal and administrative investigations of sexual abuse and sexual harassment.

Based on documentation review and interviews with staff, EWF meets the standard for evidence protocol and forensic medical examinations.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b) GDC ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This is done per policy and per practice.</p> <p>In the past 12 months, EWF received two allegations of inmate sexual abuse and sexual harassment. These two allegations resulted in two administrative investigations and no criminal investigations.</p> <p>GDC policy 208.06 states, "All reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. The local SART is responsible for the administrative investigation of all allegations of sexual abuse or sexual harassment. Attachment 4, Sexual Allegation Response Checklist will be completed for all PREA Allegations. In cases where allegations are made against staff members and the SART inquiry deems the allegation is unfounded or unsubstantiated by evidence, the case can be closed at the facility level. If the allegation is criminal in nature, an interview shall not be conducted, nor will a statement be collected from the accused perpetrator with first consulting the Regional SAC." (Page 25 and 26)</p> <p>c) This standard is not applicable as GDC/EWF conducts all criminal and administrative investigations of inmate sexual abuse or sexual harassment.</p> <p>Based on documentation review and interviews, EWF has met the standard of policies to ensure referrals of allegations for investigations.</p>

115.31	<b>Employee training</b>
	<p data-bbox="248 168 928 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 1422 405">a) EWF trains all employees who may have contact with inmates on all items listed in this standard. This is also done per GDC policy.</p> <p data-bbox="248 445 1477 904">GDC policy 208.06 states, "All Departmental employees shall be required to attend training annually on: The Department's zero-tolerance policy for Sexual Abuse and Sexual Harassment; How to fulfill their responsibilities under the Department's Sexual Abuse and Sexual Harassment prevention, detection, reporting, and response policies and procedures; Offender's right to be free from Sexual Abuse and Sexual Harassment; The right of offenders and employees to be free from retaliation for reporting Sexual Abuse and Sexual Harassment; The dynamics of Sexual Abuse and Sexual Harassment victims; The common reactions of Sexual Abuse and Sexual Harassment victims; How to effectively and professionally with offenders, including lesbian, gay, bisexual, Transgender, Intersex, or Gender Nonconforming offenders; and How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities." (Page 16 and 17)</p> <p data-bbox="248 945 1422 1064">The Auditor reviewed GDC curriculum, "PREA Prison Rape Elimination Act (Supervision of Offenders including Sexual Abuse and Assault) dated 2019. This curriculum contains all elements listed in this standard and GDC policy 208.06.</p> <p data-bbox="248 1104 1469 1180">All staff interviewed reported receiving PREA training. They were able to discuss and explain what they learned from this training.</p> <p data-bbox="248 1220 1305 1256">b) Staff at EWF also receive gender specific training. EWF is a women's facility.</p> <p data-bbox="248 1296 1461 1458">GDC policy 208.06 states, "In-service training shall include gender specific references and training to staff as it relates to the specific population supervised. Staff members transferring into a facility of a different gender from prior institution shall receive gender-appropriate training." (Page 17)</p> <p data-bbox="248 1498 1474 1617">c) All employees at EWF have received PREA related and gender specific training. They receive initial PREA training during pre-service orientation; and refresher trainings at quarterly staff meetings, monthly meetings and shift briefings.</p> <p data-bbox="248 1657 1193 1693">The Auditor reviewed meeting agendas for 2019 to support this practice.</p> <p data-bbox="248 1733 1437 1852">d) EWF documents that employees who have contact with inmates understand the training they received through employee signature. This was done per the requirements of this standard and GDC policy.</p> <p data-bbox="248 1892 1477 2136">GDC policy states, "Participation in training must be documented through employee signature or electronic verification. Participation documentation will note that employees understood the training they have received by signing Attachment 1, Sexual Abuse/Sexual Harassment Prison Rape Elimination Act (PREA) Education Acknowledgement Statement. This form shall be retained in the employee's local personnel file. At the conclusion of the training, employees are asked to seek additional supervisory direction, if necessary, to ensure understanding of</p>

the training." (Page 16)

The Auditor reviewed 21 employee files and found the signed PREA Education Acknowledgment Statement in every file.

Based on documentation review and staff interviews, EWF exceeds the standard of employee training.

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) All volunteers and contractors who have contact with inmates have been trained on their responsibilities under GDC/EFW policies and procedures regarding sexual abuse and sexual harassment.</p> <p>GDC policy 208.06 states, "The Department shall ensure that all volunteers and contractors who have contact with offenders are provided with a copy of this policy and have been trained on their responsibilities under the Department's PREA policies and procedures." (Page 17)</p> <p>Ten volunteer/contractors have been trained at EWF over the past 12 months.</p> <p>While onsite the Auditor interviewed one contractor. This contractor stated they have received PREA training for EWF.</p> <p>b) The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. This is done in accordance to this standard and GDC policy 208.06.</p> <p>The Auditor reviewed the curriculum, "Volunteer/Contractor PREA Training," provided by EWF. This curriculum meets all the requirements of this standard.</p> <p>c) The agency maintains documentation confirming that volunteers/contractors understand the training they have received.</p> <p>The Auditor reviewed two human resources files belonging to contractors. Each file contained a signed acknowledgment for PREA training.</p> <p>Based on documentation review and interviews, EWF meets the standard of volunteer and contractor training.</p>

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c) Inmates receive information at time of intake about zero-tolerance policy and how to report incidents or suspicious of sexual harassment. This is done in accordance with this standard and GDC policy.</p> <p>GDC policy 208.06 states, "Offender Education. Notification of the GDC's zero-tolerance policy for sexual abuse and harassment and information on how to report an allegation at the receiving facility shall be provided to every offender upon arrival to the facility. In addition to verbal notification, offenders will be provided a GDC PREA pamphlet. Within 15 days of arrival, formal PREA education will be conducted by assigned staff members to all offenders which will include a gender appropriate video on sexual abuse. Both the initial notification and the formal education will be documented in writing by signature of offender and placed in the offender's institutional file." (Page 18)</p> <p>Intake staff state, "We have a discussion the first day and they watch a PREA video. Orientation is done within seven days. COVID has, at times, pushed that to 14 days." Intake staff went on to say, "Every inmate goes through orientation; whether they leave and come back."</p> <p>All inmates interviewed reported receiving PREA information the first day they arrived at EWF. They also stated there is PREA information throughout the facility.</p> <p>GDC policy 208.06 also states, "In the case of Exigent Circumstances, such training may be delayed, but no more than 30 days. If the Exigent Circumstance extends beyond 30 days, justification and documentation must be placed in the offender's institutional file. Once the Exigent Circumstance no longer applies, such training must be provided immediately. This education is documented in the same manners as for offenders who participated during the regularly scheduled orientation." (Page 18)</p> <p>d) EWF provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills. This is done in accordance with this standard and to policy GDC 208.06.</p> <p>GDC policy 208.06 states, "The local PREA Compliance Manager shall ensure the appropriate resources are available to offenders with disabilities and those who are LEP so they understand the facility policies around reporting, preventing, detecting, and responding to sexual abuse and sexual harassment." (Page 11)</p> <p>The PREA Compliance Managers states, "In the event an inmate who has any of the following disabilities and is in need of assistance for a PREA incident, Emanuel Women's Facility has the following assistance in place: Deaf (Inmate will be able to read the materials); Visually Impaired (Staff Will Read to Inmate); Otherwise Disabled (Staff Will Read to Inmate); and Limited in Reading Skills (Staff Will Read to Inmate)."</p> <p>There were no inmates identified as visually impaired, hearing impaired or having a cognitive</p>

disability onsite during this portion of the audit. This was verified through interviews with staff and inmates.

The Auditor also reviewed EWF's PREA Brochure and Inmate Handbook. Both are provided in English and Spanish.

EWF has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects for the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. EWF also prohibits the use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety.

This can be found in GDC's policy 208.06. This policy contains the same language as the standard.

The PREA Compliance Manager states, "If an inmate is limited English proficient, we will use the Language Line. We also have one Spanish-Speaking staff member from another facility that has agreed to assist."

e) EWF maintains documentation of inmate participation in PREA education sessions. This is done in accordance with this statute and per GDC policy 208.06.

The Auditor reviewed 22 offender files and found signed "Offender Orientation Checklist," listing PREA Education in all files.

f) EWF ensures key information about agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. This is done in accordance to this standard and GDC policy.

GDC policy 208.06 states, "A poster reflecting the Department's zero tolerance for sexual abuse and sexual harassment, contact information and methods of offender reporting shall be posted in each housing unit and common area throughout the facility." (Page 19)

The Auditor observed PREA posters throughout the facility. PREA information is painted on the walls as well as on posters.

Based on documentation review, staff and inmate interviews EWF meets the standard of inmate education.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c) GDC/EFW policy requires that investigators be trained in conducting sexual abuse investigations in confinement settings.</p> <p>GDC policy 208.06 states, "All staff investigating sexual abuse/sexual harassment allegations must be specially trained in conducting sexual abuse/sexual harassment investigations in confinement settings. Specialized training shall 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 Department shall maintain documentation that agents and investigators, whether internal or external, have completed the required specialized training in conducting sexual abuse investigations." (Page 19 and 20)</p> <p>The Auditor interviewed one investigator and found they had received the required specialized training and received the required departmental PREA training. This investigator reported they received their specialized training through the National Institute of Corrections (NIC) online course on conducting sexual abuse investigations in a confinement setting.</p> <p>Based on documentation review and staff interviews, EWF met the standard of specialized training: investigations.</p>

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, c, d) GDC/EFW has policy related to the training of medical and mental health practitioners who work regularly in its facilities. This policy required specialized training as well as departmental required PREA training. This training is documented and kept on file at EWF.</p> <p>GDC policy 208.06 states, "GDC medical and mental health staff members and Georgia Correctional HealthCare (GCHC) staff members who have contact with offenders will be trained using the National Institute of Corrections (NIC) Specialized Training PREA Medical and MH Standards curriculum.</p> <p>Certificate of completion will be printed and maintained in the employee training file. In addition to the specialized training, these same employees are required to attend GDC's annual PREA in-service training." (Page 20)</p> <p>The Auditor reviewed 39 certificates showing medical and mental health practitioners completed the required NIC training and reviewed training records show these same staff completed the required annual PREA in-service training. Medical and mental health staff interviewed reported receiving this training and was able to discuss specific topics covered.</p> <p>b) This standard is not applicable as EWF medical staff do not conduct forensic exams.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of specialized training: medical and mental health care.</p>

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1396 403">a, b) GDC/EWF has policy requiring screening upon admission to EWF for risk of sexual abuse victimization or sexual abusiveness toward other inmates.</p> <p data-bbox="252 436 1460 560">GDC/EWF policy 208.06 states, "All offenders shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders." (Page 20)</p> <p data-bbox="252 593 1476 716">Staff who conduct the risk screen, "PREA Sexual Victim/Sexual Aggressor Classification Screening," within the first 24 hours of arriving at EWF. They state, "It's usually done the day they get off the bus."</p> <p data-bbox="252 750 1396 828">All inmates interviewed reported being asked "PREA questions" when they went through intake.</p> <p data-bbox="252 862 1452 940">The Auditor reviewed 22 offender files and found all initial risk assessments were completed on the date of admission to EWF.</p> <p data-bbox="252 974 1476 1276">c) GDC policy 208.06 states, "Counseling staff members will conduct a screening for risk of victimization and abusiveness, in SCRIBE, through use of Attachment 2, PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument. This screening will be conducted within 24 hours of arrival at the facility. Information from this assessment will be used to determine classification decisions with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexual abusive. NOTE: The risk assessment should not hinder classification opportunities." (Page 20)</p> <p data-bbox="252 1310 1476 1388">d, e) The PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument meets all the requirements listed in this standard.</p> <p data-bbox="252 1422 1476 1601">f, g, i) GDC/EWF policy requires EWF reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at EWF, based upon any additional, relevant information received by the EWF since the intake screening.</p> <p data-bbox="252 1635 1484 1892">GDC policy 208.06 states, "Offenders who risk screening indicates a risk for victimization or abusiveness shall be reassessed whenever warranted due to an incident, disclosure or allegation of sexual abuse or harassment and also for all offenders, within 30 days of arrival at the institution. A case note shall be entered in SCRIBE to indicate this review has been conducted. This case note is for the sole purpose of documenting the screening occurred and shall not include any confidential or clinical information." (Page 21)</p> <p data-bbox="252 1926 1444 2004">All inmates interviewed reported having the "PREA questions" asked again since their initial intake.</p> <p data-bbox="252 2038 1412 2116">GDC policy 208.06 also states, "NOTE: Any information related to sexual victimization or abusiveness, including the information entered into the comment section of the Intake</p>

Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions." (Page 21)

The PREA Coordinator states, "It is at the warden's discretion on who has access to the completed assessment. Mental health as access as they complete the assessment as well as the counselors."

This was also confirmed by the PREA Compliance Manager, who states, "Only certain people have access to the full assessment."

h) GDC policy prohibits disciplining inmates for refusing to answer or not disclosing complete information related to questions asked during the risk assessment.

GDC policy 208.06 states, "Offenders should be encouraged to disclose as much information as possible for the Department to provide the most protection possible under this policy. If an offender chooses not to respond to questions relating to his or her level of risk, he or she may not be disciplined." (Page 20)

Based on documentation review, staff and inmate interviews, EWF meets the standard of screening for risk of victimization and abusiveness.

115.42	<b>Use of screening information</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1485 488">a) EWF uses information from the risk screening required by 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive. This is done in accordance with this standard and GDC policy 208.06.</p> <p data-bbox="252 533 1437 607">The PREA Compliance Manager states, "We use this information to decide bed placement, programs and activities."</p> <p data-bbox="252 651 1469 1066">EWF management states per memo dated May 19, 2019, "During inmate intake process, offenders file will be reviewed to identify High- Risk Sexual Assault Victims or Aggressors. Classification Chairman and Mental Health Counselor will pull busing orders before inmate arrives to Emanuel Women's Facility and review PREA profiles. Mental Health Counselor will screen for risk of victimization and abusiveness file immediately upon arrival of the inmates to the facility and at the latest 24 hours. Classification Chairman will assign bed, work, and education and programs assignments based on risk screening. Within 30 days of arrival, inmate's dorm and detail assignment will be reassessed by Mental Health Counselor. Dorm C and B has been appointed as a safe unit for inmates. Inmate with PREA Aggressors profiles will be placed in Dorm F or H-6."</p> <p data-bbox="252 1111 1366 1184">Staff who are responsible for risk screening state, "We look to see if they profile as an aggressor. This will determine where they are housed."</p> <p data-bbox="252 1229 1485 1379">b) EWF makes individualized determinations about how to ensure the safety of each inmate. This is done in accordance with GDC policy 208.06. This policy states, "Offenders should be encouraged to disclosed as much information as possible for the Department to provide the most protection possible under this policy..." (Page 20)</p> <p data-bbox="252 1424 1461 1671">c, d, e, f, g) EWF makes housing and programming assignments for transgender or intersex inmates at EWF on a case-by-case basis. In addition, EWF reassesses at least twice a year program and placement assignments for each transgender or intersex inmate. These assessments consider their own view of their safety. If requested, all transgender and intersex inmates housed at EWF are giving the opportunity to shower separately from other inmates.</p> <p data-bbox="252 1715 1469 1962">GDC policy 220.09, "Classification and Management of Transgender and Intersex Offenders," dated July 26, 2019 states, "The Classification Committee will determine, on a case-by-case basis, the most appropriate classification assignments for each transgender offender; Transgender offenders must never be placed in dedicated units or housed only with other transgender offenders; and The offenders' own views with respect to their safety should be given serious consideration." (Page 6)</p> <p data-bbox="252 2007 1485 2157">This same policy also states, "In deciding whether to assign a transgender or intersex offender to a male or female facility, GDC shall consider on a case-by-case basis whether: Placement would ensure the offender's health and safety; and Whether the placement would present management or security problems. Transgender offenders may not be assigned to gender-</p>

specific facilities based solely on their external genital anatomy. The offender's documented choice of whether a male or female facility is safest for him or her (based on the SCC Referral Form); The offender's prior institutional history (to include incidents and grievances); The offender's prior violent or sexual crime history; The offender's designation on the PREA Sexual Victim/Sexual Aggressor. Classification Screening; The offender's physical appearance, age, and physical build; Any relevant information obtained about the offender from security staff or medical and mental health staff since arrival; The ability of security staff to house and supervise the offender to ensure his or her safety in each environment; Any management problems, including but not limited to disciplinary reports; and Any other relevant information about the offender's ability to positively or negatively manage him or herself in each type of environment. The decision about the type of facility (male or female) made by the committee will be documented on Attachment 1, SCC Referral Form and reviewed and approved by the Facilities Division Assistant Commissioner or designee." (Page 9 and 10)

In addition, this policy states, "The offender will be transferred to his or her assigned permanent facility after Diagnostics according to the decision of the SCC and will be housed via the standard classification and housing selection process of the facility's Classification Committee, with consideration given to the PREA Sexual Victim/Sexual Aggressor Classification information." (Page 11)

GDC policy 220.09 also states, "Transgender offenders shall be given the opportunity to shower separately from other offenders; This does not mean they are required to shower separately, but that the opportunity is afforded to them if they wish to do so. Separate means the following: Alone in a community shower at a separate time from other offenders; or Alone in a shower with separate and private walls or curtains if in a group." (Page 13)

There were no transgender or intersex inmates onsite during this portion of the audit to interview.

All staff interviewed reported transgender inmates can shower separately if they request.

The Auditor interviewed one female inmate who identified as lesbian. She stated she did not have special housing based on her sexual orientation and reports she is happy with her housing placement.

Based on documentation review and staff interviews, EWF meets the standard of use of screening information.

115.43	<b>Protective Custody</b>
	<p data-bbox="252 168 893 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 518 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1428 481">a) GDC/EFW has a policy prohibiting 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.</p> <p data-bbox="252 526 1452 683">GDC policy 208.06 states, "Offenders at high risk for sexual victimization or aggression shall not be placed in involuntary segregation based solely on that determination unless a determination has been made that there is available alternative means of separation from likely abusers..." (Page 21)</p> <p data-bbox="252 728 1484 840">In the past 12 months, EWF has placed zero inmates in involuntary segregation. On the day of the onsite portion of the audit, there were no inmates placed in segregated housing due to high risk for sexual victimization.</p> <p data-bbox="252 884 1380 963">The Warden Designee states, "We have not had to do that, we have enough space for alternative housing."</p> <p data-bbox="252 1008 1468 1120">b) If Inmates are placed in segregated housing due to high risk for victimization at EWF, they will have limited access to programs, privileges and work opportunities. The reasons for these limitations will be documented.</p> <p data-bbox="252 1164 1460 1366">GDC policy 208.06 states, "Offenders placed in segregation will receive services in accordance with SOP 209.06, Administrative Segregation...If offenders placed in segregated housing for this purpose have restricted access to programs, privileges, education, or work opportunities, then the facility shall document; the opportunities that have been limited; the duration of the limitations; and the reasons for such limitations." (Page 22)</p> <p data-bbox="252 1411 1412 1568">c, e) EWF assigns such inmates to involuntary segregated housing only until alternative means of separation from likely abusers can be arranged, and such assignment shall not ordinarily exceed a period of 30 days. This is done in accordance with this standard and GDC policy.</p> <p data-bbox="252 1612 1436 1724">GDC policy 208.06 states, "Every 30 days, the facility shall afford such offender a review to determine whether there is a continuing need for separation from the general population." (Page 22)</p> <p data-bbox="252 1769 1468 1881">d) If an inmate at EWF is placed in involuntary segregation, EWF documents the basis for the facility's concern for the inmate's safety and the reason why no alternative means of separation can be arranged.</p> <p data-bbox="252 1926 1484 2038">In the past 12 months, EWF has placed zero inmates in involuntary segregation. On the day of the onsite portion of the audit, there were no inmates placed in segregated housing due to high risk for sexual victimization.</p> <p data-bbox="252 2083 1380 2116">The Warden Designee states, "We have not had to do that, we have enough space for</p>

alternative housing."

Based on documentation review and interviews, EWF meets the standard of protective custody.

115.51	<b>Inmate reporting</b>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1474 528">a, b) EWF has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. This is done in accordance with the standard and GDC policy 208.06.</p> <p data-bbox="252 573 1474 730">Inmates at EWF can report sexual abuse or sexual harassment by calling 7732 (PREA hotline from any inmate phone, directly report to any staff member, or writing the Statewide PREA Coordinator, Ombudsman in Forsyth, Georgia, or Director of Victim Services EWF and was also painted on multiple walls throughout the facility.</p> <p data-bbox="252 775 1422 887">All staff interviewed could tell the Auditor of at least two ways inmates could report sexual abuse or sexual harassment. Staff state inmates could report by telling staff or calling the PREA hotline.</p> <p data-bbox="252 931 1390 999">All inmates were able to discuss multiple ways they could report sexual abuse or sexual harassment. Many inmates reported this information is available all over the facility.</p> <p data-bbox="252 1043 1118 1077">EWF does not detain inmates solely for civil immigration purposes.</p> <p data-bbox="252 1122 1474 1234">c) EWF staff accept reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports. This is done in accordance with this standard and GDC policy 208.06.</p> <p data-bbox="252 1279 1485 1346">While most inmates report they are aware they can make a report in writing or have family and friends report on their behalf, they state they will just tell staff if something happens.</p> <p data-bbox="252 1391 1469 1458">All staff interviewed reported third party reports are treated the same as direct reports. They state all allegations are taken seriously and are reported to supervisors.</p> <p data-bbox="252 1503 1485 1704">d) GDC/EWF has provided methods for staff to privately report sexual abuse and sexual harassment of inmates. Staff may report allegations of sexual abuse or sexual harassment of inmates to the Statewide PREA Coordinator, the Ombudsman in Forsythe, Georgia or to the Director of Victim Services in Atlanta, Georgia. This information is provided in the "Staff Guide on the Prevention and Reporting of Sexual Misconduct with Offenders."</p> <p data-bbox="252 1749 1445 1861">All staff interviewed report they would have no problem reporting to their direct supervisor. However, they also report, if needed, they could contact the Ombudsman to make a report. Several staff also report they would use the PREA hotline to report sexual abuse of inmates.</p> <p data-bbox="252 1906 1382 1973">Based on documentation review and interviews, EWF exceeded the standard of inmate reporting,</p>

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>The PREA Compliance Manager states, "Any grievances related to allegation of Sexual abuse and Sexual Harassment should be forwarded to SART Team. Allegations of Sexual abuse and Sexual Harassment are not grievable issues. They should be processed in accordance with methods outlined in SOP 208.06 Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention And Intervention Program."</p> <p>b, c, d, e, f, g) This standard is not applicable as GDC/EWF is exempt from this standard.</p> <p>Based on documentation review, EWF meets the standard of exhaustion of administrative remedies.</p>

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c) EWF provides victim advocate services by a qualified facility staff member.</p> <p>The PCM states, "Emanuel Women's Facility has attempted to make an outside victim advocate available to offenders. Multiple Rape Crises Centers have been contacted to establish an MOU or other agreement to no avail. I document all efforts. If requested by the victim, a qualified staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews. They provide emotional support, crisis intervention, information, and referrals. Two staff members have completed The Georgia Network to END Sexual Assault (GNESA) training for Victim Advocacy."</p> <p>GDC Policy 208.06 states, "The Institution PREA Compliance Manager, under the direction of the Warden/Superintendent, shall attempt to enter into agreement, or Memorandum of Understanding (MOU), with a rape crises center to make available a victim advocate to offenders alleging sexual abuse/sexual harassment upon request. If the facility cannot do so, efforts must be documented, and local staff shall be identified and specially trained to provide this service. Documentation of training must be maintained by the employee's manager and made available to the local PREA Compliance Manager upon request." (Page 15)</p> <p>The Auditor reviewed documentation of attempts to enter a MOU with five (5) local rape crises centers. In addition, the Auditor also reviewed training certificates for the two qualified staff persons who offer victim advocate services to inmate victims upon request.</p> <p>While the facility identified one inmate who reported sexual abuse, the inmate would not confirm this report during her interview with the Auditor.</p> <p>The Auditor reviewed three investigative files of inmate-on-inmate sexual abuse and found signed documentation showing victim advocate services were offered to the victims and refused.</p> <p>EWF does not house inmates solely for immigration purposes.</p> <p>Based on documentation review and interviews, EWF meets the standard of inmate access to outside confidential support services.</p>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC/EFW provides a method to receive third-party reports of inmate sexual abuse or sexual harassment.</p> <p>Inmates at EWF can report sexual abuse or sexual harassment contact outside entities by writing the Statewide PREA Coordinator, Ombudsman in Forsyth, Georgia, or Director of Victim Services in Atlanta, Georgia. This information is provided in the PREA Brochure given to inmates at the time of intake, the Inmate Handbook and on GDC's website (<a href="http://www.dcor.state.ga.us/Divisions/ExecutiveOperations/PREA/How-to-report">http://www.dcor.state.ga.us/Divisions/ExecutiveOperations/PREA/How-to-report</a>).</p> <p>Based on documentation review and interviews, EWF meets the standard of third-party reporting.</p>

115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, e) GDC/EFW requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; any retaliation against inmates or staff who reported such incident; and any staff neglect of violation of responsibilities that may have contributed to an incident of retaliation. This is done in accordance with the standard and GDC policy 208.06.</p> <p>GDC policy 208.06 states, "Staff members shall accept reports made verbally, in writing, and from third parties and shall promptly document any verbal reports. Staff members shall forward all reports or suspicions of sexual abuse or sexual harassment to their immediate supervisor or the designated SART member promptly." (Page 23)</p> <p>EFW's Local PREA Procedure Directive and Coordinated Response Plan states, "Upon immediate notification of a sexual abuse, these actions should be taken in the order noted below. FIRST STEPS Notify your Shift OIC/Supervisor 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 any physical evidence. If known, instruct the alleged perpetrator to refrain from changing clothes, drinking, eating, brushing teeth, or any other activity that could destroy any physical evidence. Secure the crime scene if applicable to restrict access to the area and to prevent handling of evidence until an internal investigator arrives. Language Line Service are available to ensure communication for inmate with limited English Proficiency. Ensure the victim receives immediate medical attention if applicable ensure the escorting officer retrieves the rape kit or other physical evidence from medical personnel, document the contents, and store the evidence in a secure place until it can be turned over to an internal investigator; (Maintain a written chain of custody on the evidence at all times; Remember it is only necessary for one staff member to receive, transport, and secure the evidence. Implement Local PREA Notification Procedures to ensure all required personnel are notified that an incident has occurred. (Ex. Warden, Regional Director, Deputy Warden, SART Leader, Compliance Manager, Internal Investigations etc.) Ensure the incident report and supporting documentation has been completed before leaving the institution for the day. Ensure the victim receives a mental health evaluation promptly within 24 hours. Ensure the alleged victim is housed separately from the alleged perpetrator; inmate shall be placed in involuntary protective custody only after other alternatives have been exhausted to ensure the safety of the victim. If applicable, ensure the alleged perpetrator has been placed in administrative segregation. If the alleged perpetrator is a staff member, separate the staff member from the alleged victim pending further instructions from Warden/Superintendent. If applicable, consult with the S.A.R.T., the Field Operations Manager, and Internal Investigations within 72 hours of the reported incident to determine how long the alleged victim or perpetrator should remain segregated from the general population, and document the final decision in the inmate's file with specific reasons for returning the offenders to the general population or keeping the offenders segregated."</p> <p>All staff interviewed report they are mandated to report any knowledge or suspicion of sexual abuse or sexual harassment of an inmate. All report of severe consequences if they do not</p>

report this information. Many report they could lose their job or be charged with a crime for failing to report this type of information.

b) Apart from designated supervisors, officials or state or local service agencies, GDC/EWG policy prohibits staff from revealing any information related to sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

GDC policy 208.06 states, "All PREA information is confidential in nature and shall only be released on a need-to-know basis. Staff members who fail to comply with the reporting provisions of this policy may be banned from correctional facilities, or will be subject to disciplinary action, up to and including termination, whichever is applicable." (Page 14 and 15)

All staff interviewed state confidentiality is required in all PREA reports.

c) All medical and mental health practitioners are mandated to report sexual abuse of an inmate.

Medical staff state, "If it happened in the institution, we are required to report it.

d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, EWF will report the allegation to the designated State or local services agency under mandatory reporting laws.

The Statewide PREA Coordinator states, "We are mandated to report any allegation involving a juvenile or the elderly."

EWF does not house youthful offenders.

Based on documentation review and staff interviews, EWF meets the standard of staff and agency reporting duties.

115.62	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) When EWF learns an inmate is subject to substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate.</p> <p>The Warden Designee states, "I would expect staff to notify their supervisor immediately who will then notify the Chief. We can at that time make the necessary moves to keep that inmate safe.</p> <p>All staff report if they hear that an inmate is imminent danger of sexual abuse, they would pull the inmate to the side and notify their supervisor immediately.</p> <p>In the past 12 months, EWF has not had a report of an inmate being in substantial risk of imminent sexual abuse.</p> <p>Based on documentation review and staff interviews, EWF has met the standard of agency protection duties.</p>

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c, d) GDC/EFW has a policy requiring upon receiving an allegation that an inmate was sexually abused while confined at another facility, the warden or their designee will notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred.</p> <p>GDC policy 208.06 states, "In cases where there is an allegation that sexual abuse occurred at another Department facility, the Warden/Superintendent (or his/her designee) of the victim's current facility will provide notification to the Warden/Superintendent of the institution where the allegation allegedly occurred and the Department's PREA Coordinator. In cases alleging sexual abuse by staff at another institution, the Warden/Superintendent of the offender current facility refers the matter directly to the Regional SAC and the Department's PREA Coordinator. For non-Department facilities, the Warden/Superintendent will notify the appropriate office of the facility where the abuse allegedly occurred and the Department's PREA Coordinator." (Page 24)</p> <p>This same policy goes on to state, "Such notification shall be provided as soon as possible, but not later than 72 hours after receiving the allegation. The facility shall document that it has provided such notification. The facility head or Department office that receives such notification shall ensure that the allegation is investigated in accordance with these standards." (Page 24)</p> <p>In the past 12 months, EWF has not received or made such notifications.</p> <p>Based on documentation review, EWF meets the standard of reporting to other confinement facilities.</p>

115.64	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC/EFW has a first responder policy for allegations of sexual abuse.</p> <p>GDC policy 208.06 states, "Staff, First Responders, and Department reporting duties: Response protocols shall follow the guidelines outlined in Attachment 7, Local Procedure Directive and Coordinated Response plan. The PREA Unit will be notified, via PREAreport@gdc.ga.gov, of all allegations via Attachment 10, PREA Notification Form." (Page 23)</p> <p>EFW's Local PREA Procedure Directive and Coordinated Response Plan states, "Upon immediate notification of a sexual abuse, these actions should be taken in the order noted below. FIRST STEPS Notify your Shift OIC/Supervisor 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 any physical evidence. If known, instruct the alleged perpetrator to refrain from changing clothes, drinking, eating, brushing teeth, or any other activity that could destroy any physical evidence. Secure the crime scene if applicable to restrict access to the area and to prevent handling of evidence until an internal investigator arrives. Language Line Service are available to ensure communication for inmate with limited English Proficiency. Ensure the victim receives immediate medical attention if applicable ensure the escorting officer retrieves the rape kit or other physical evidence from medical personnel, document the contents, and store the evidence in a secure place until it can be turned over to an internal investigator; (Maintain a written chain of custody on the evidence at all times; Remember it is only necessary for one staff member to receive, transport, and secure the evidence. Implement Local PREA Notification Procedures to ensure all required personnel are notified that an incident has occurred. (Ex. Warden, Regional Director, Deputy Warden, SART Leader, Compliance Manager, Internal Investigations etc.) Ensure the incident report and supporting documentation has been completed before leaving the institution for the day. Ensure the victim receives a mental health evaluation promptly within 24 hours. Ensure the alleged victim is housed separately from the alleged perpetrator; inmate shall be placed in involuntary protective custody only after other alternatives have been exhausted to ensure the safety of the victim. If applicable, ensure the alleged perpetrator has been placed in administrative segregation. If the alleged perpetrator is a staff member, separate the staff member from the alleged victim pending further instructions from Warden/Superintendent. If applicable, consult with the S.A.R.T., the Field Operations Manager, and Internal Investigations within 72 hours of the reported incident to determine how long the alleged victim or perpetrator should remain segregated from the general population, and document the final decision in the inmate's file with specific reasons for returning the offenders to the general population or keeping the offenders segregated."</p> <p>All staff interviewed were able to discuss with the Auditor their responsibilities as a first responder.</p> <p>There were no inmates onsite who reported sexual abuse.</p> <p>In the past 12 months, there have been zero allegations sexual abuse at EFW.</p>

b) GDC/EFW policy requires if the first staff responder is not a security staff member, that responder shall be required to notify security staff.

The Georgia Department of Corrections Sexual Abuse/Sexual Harassment Prison Rape Elimination Act (PREA) Education Acknowledgement Statement for employees and contractors states, "...and to report to a nearby supervisor if I witness such conduct or if someone reports such conduct to me..."

Based on documentation review and staff interviews, EWF meets the standard of staff first responder duties.

115.65	<b>Coordinated response</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1445 450">a) EWF has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="252 488 1485 1720">EWF's Local PREA Procedure Directive and Coordinated Response Plan states, "Upon immediate notification of a sexual abuse, these actions should be taken in the order noted below. FIRST STEPS Notify your Shift OIC/Supervisor 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 any physical evidence. If known, instruct the alleged perpetrator to refrain from changing clothes, drinking, eating, brushing teeth, or any other activity that could destroy any physical evidence. Secure the crime scene if applicable to restrict access to the area and to prevent handling of evidence until an internal investigator arrives. Language Line Service are available to ensure communication for inmate with limited English Proficiency. Ensure the victim receives immediate medical attention if applicable ensure the escorting officer retrieves the rape kit or other physical evidence from medical personnel, document the contents, and store the evidence in a secure place until it can be turned over to an internal investigator; (Maintain a written chain of custody on the evidence at all times; Remember it is only necessary for one staff member to receive, transport, and secure the evidence. Implement Local PREA Notification Procedures to ensure all required personnel are notified that an incident has occurred. (Ex. Warden, Regional Director, Deputy Warden, SART Leader, Compliance Manager, Internal Investigations etc.) Ensure the incident report and supporting documentation has been completed before leaving the institution for the day. Ensure the victim receives a mental health evaluation promptly within 24 hours. Ensure the alleged victim is housed separately from the alleged perpetrator; inmate shall be placed in involuntary protective custody only after other alternatives have been exhausted to ensure the safety of the victim. If applicable, ensure the alleged perpetrator has been placed in administrative segregation. If the alleged perpetrator is a staff member, separate the staff member from the alleged victim pending further instructions from Warden/Superintendent. If applicable, consult with the S.A.R.T., the Field Operations Manager, and Internal Investigations within 72 hours of the reported incident to determine how long the alleged victim or perpetrator should remain segregated from the general population, and document the final decision in the inmate's file with specific reasons for returning the offenders to the general population or keeping the offenders segregated."</p> <p data-bbox="252 1760 1374 1834">All staff interviewed were able to discuss with the Auditor their responsibilities as a first responder.</p> <p data-bbox="252 1874 1469 1948">Based on documentation review and staff interviews, EWF meets the standard of coordinated response.</p>

115.66	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) Emanuel Women’s Facility is not responsible for collective bargaining on the agency's behalf and has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Based on documentation reviews, EWF meets the standard of preservation of ability to protect inmates from contact with abusers.</p>

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, e) GDC has 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.</p> <p>EWF has designated a staff person with monitoring for possible retaliation.</p> <p>GDC policy 208.06 states, "The Department shall protect offenders and staff members who report sexual abuse, or sexual harassment from retaliation. The Warden/Superintendent shall designate a staff member to serve as the facility Retaliation Monitor and identify them as such in the PREA Local Procedure Directive and Coordinated Response Plan (Attachment 7). Multiple protection measures include offender housing changes or transfers, removal of alleged staff members of offender abusers from contact with victims, and emotional support services for offenders or staff members who fear retaliation for reporting or for cooperating with investigations." (Page 25)</p> <p>The staff person assigned to monitor retaliation states, "I do random reviews of changes in housing, transfers and disciplinary reports. For staff, I look for change in posts, shifts and work reviews."</p> <p>This staff person reports they use the "Georgia Department of Corrections Retaliation Monitoring Checklist" to keep track of their checks.</p> <p>The Warden Designee states, "We monitor for disciplinary reports, movement, post changes and shift changes."</p> <p>There were no inmates onsite who reported sexual abuse. However, the Auditor did review three past investigative files. All three files contained a completed Retaliation Monitoring Checklist.</p> <p>c, d) GDC/EWF monitors the conduct and treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. This is done for a period of 90 days or longer if needed.</p> <p>GDC policy 208.06 states, "The designated Retaliation Monitor shall, for at least 90 days following a report of abuse, monitor the conduct and treatment of offenders or staff members who reported sexual abuse or who participated in an investigation, to see if there are any changes that may suggest possible retaliation, and will act promptly to remedy any such retaliation...Such monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The obligation for monitoring will terminate if the allegation is unfounded." (Page 25)</p> <p>The staff person designated to monitor retaliation state they initiate contact with the inmate or staff member and does status checks at 30, 60 and 90 days.</p>

Based on documentation review and staff interviews, EWF meets the standard of agency protection against retaliation.

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC/EFW has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made there is no available alternative means of separation from likely abusers.</p> <p>GDC policy 208.06 states, "Offenders at high risk for sexual victimization or aggression shall not be placed in involuntary segregation based solely on that determination unless a determination has been made that there is available alternative means of separation from likely abusers..." (Page 21)</p> <p>In the past 12 months, EWF has placed zero inmates in involuntary segregation. On the day of the onsite portion of the audit, there were no inmates placed in segregated housing due to high risk for sexual victimization.</p> <p>The Warden Designee states, "We have not had to do that, we have enough space for alternative housing."</p> <p>If Inmates are placed in segregated housing due to high risk for victimization at EWF, they will have limited access to programs, privileges and work opportunities. The reasons for these limitations will be documented.</p> <p>GDC policy 208.06 states, "Offenders placed in segregation will receive services in accordance with SOP 209.06, Administrative Segregation...If offenders placed in segregated housing for this purpose have restricted access to programs, privileges, education, or work opportunities, then the facility shall document; the opportunities that have been limited; the duration of the limitations and the reasons for such limitations." (Page 22)</p> <p>EFW assigns such inmates to involuntary segregated housing only until alternative means of separation from likely abusers can be arranged, and such assignment shall not ordinarily exceed a period of 30 days. This is done in accordance with this standard and GDC policy.</p> <p>GDC policy 208.06 states, "Every 30 days, the facility shall afford such offender a review to determine whether there is a continuing need for separation from the general population." (Page 22)</p> <p>Based on documentation review and interviews, EWF meets the standard of post allegation protective custody.</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, d, h) GDC/EFW has a policy related to criminal and administrative agency investigations.</p> <p>GDC policy 208.06 states, "All reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. The local SART is responsible for the administrative investigation of all allegations of sexual abuse or sexual harassment. Attachment 4, Sexual Allegation Response Checklist will be completed for all PREA allegations. In cases where allegations are made against staff members and the SART inquiry deems the allegation is unfounded or unsubstantiated by evidence, the case can be closed at the facility level. If the allegation is criminal in nature, an interview shall not be conducted, nor will a statement be collected from the accused perpetrator without first consulting the Regional SAC. Appointing authorities or their designee shall report all allegations of sexual assault with penetration and those with immediate and clear evidence of physical contact, to their Regional Director, Regional SAC and the Department's PREA Coordinator immediately upon receipt of the allegation...Substantiated allegations of conduct that is deemed criminal shall be referred for prosecution." (Page 25 and 26)</p> <p>b) GDC/EFW policy requires that investigators be trained in conducting sexual abuse investigations in confinement settings.</p> <p>GDC policy 208.06 states, "All staff investigating sexual abuse/sexual harassment allegations must be specially trained in conducting sexual abuse/sexual harassment investigations in confinement settings. Specialized training shall 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 Department shall maintain documentation that agents and investigators, whether internal or external, have completed the required specialized training in conducting sexual abuse investigations." (Page 19 and 20)</p> <p>The Auditor interviewed one investigator and found they had received the required specialized training and received the required departmental PREA training. This investigator reported they received their specialized training through the National Institute of Corrections (NIC) online course on conducting sexual abuse investigations in a confinement setting.</p> <p>c) GDC policy 208.06 states, "Agents and investigators shall gather and preserve direct and circumstantial evidence including any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspect perpetrator." (Page 26)</p> <p>The investigative staff report, "I always ask them if they feel safe. I try to build that rapport. I then have them write a statement. I make sure it has the who, what, when, and where. I then review any video and ask for witnesses."</p> <p>e) GDC policy 208.06 states, "The credibility of the victim, suspect, or witness shall be assessed on an individual basis and will not be determined by the person's status as offender or staff member. An offender who alleges sexual abuse shall not be required to submit to a</p>

polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation." (Page 26)

Investigative staff states, "I treat everything as true until I gather all of my information and find out otherwise."

There were no inmates onsite who reported sexual abuse.

f, g) GDC policy 208.06 states, "Administrative and criminal investigations shall include an effort to determine whether staff member actions or failures to act contributed to the abuse.

This shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind the credibility assessments, and investigative facts and findings." (Page 27)

Investigative staff report all investigations are documented.

i) OPS retains all written reports pertaining to administrative or criminal investigations of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. This is done in accordance with this standard and GDC policy 208.06.

j) GDC policy 208.06 states, "The departure of the alleged abuser and victim from the employment or control of the Department shall not provide a basis for terminating the investigation." (Page 27)

l) GDC policy 208.06 states, "Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements. When outside agencies investigate sexual abuse, the Department shall cooperate with the outside investigators and shall endeavor to remain informed about the progress of the investigations." (Page 27 and 28)

The Statewide PREA Coordinator and staff investigator both report there will be no outside agencies investigating sexual abuse allegations.

Based on documentation review and staff interviews, EWF meets the standard of criminal and administrative agency investigations.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<p data-bbox="252 170 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1473 450">a) GDC imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. This is done in accordance with this standard and GDC policy 208.06.</p> <p data-bbox="252 488 1246 521">Investigative staff states, "I use 51% as the preponderance of the evidence."</p> <p data-bbox="252 560 1393 638">Based on documentation review and interviews, EWF meets the standard of evidentiary standards for administrative investigations.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<p data-bbox="252 170 895 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1465 528">a, c, d, e) GDC/EFW has a policy requiring that any inmate who alleges that he or she suffered sexual abuse in an GDC facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by GDC/EFW. This is done in accordance with this standard and GDC policy 208.06.</p> <p data-bbox="252 573 1374 607">The Auditor reviewed three investigative files and found victim notifications in each file.</p> <p data-bbox="252 651 1007 685">There were no inmates onsite who reported sexual abuse.</p> <p data-bbox="252 730 1449 797">b) This standard is not applicable as GDC/EFW is responsible for conducting administrative and criminal investigations.</p> <p data-bbox="252 842 1465 909">Based on documentation review and staff interviews, EWF meets the standard of reporting to inmates.</p>

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c, d) Staff is subject to disciplinary sanctions up to and including termination for violating GDC sexual abuse or sexual harassment policies.</p> <p>GDC policy 208.06 states, "Staff members who engage in sexual abuse with an offender shall be banned from correctional institutions and subject to disciplinary action, with terminations being presumptive discipline, and may also be referred for criminal prosecution when appropriate. Disciplinary sanctions for violations of Department policy related to sexual harassment will 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 members with similar histories. All terminations for violations of the Department sexual abuse or sexual harassment policies, or resignations by staff members that would have been terminated if not for their resignation shall be reported to law enforcement agencies, unless the activity was clearly not criminal. These shall also be reported, as required to the Georgia Peace Officers Standards and Training Council (POST)." (Page 28 and 29)</p> <p>In the past 12 months there have been no staff disciplined for violating the GDC's sexual abuse or sexual harassment policy.</p> <p>Based on documentation review and staff interviews, EWF meets the standard for disciplinary sanctions for staff.</p>

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b) GDC policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>GDC policy 208.06 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, unless the activity was clearly not criminal and to relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with offenders, in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer." (Page 29)</p> <p>There have been no volunteers or contractors disciplined for violating GDC's sexual abuse or sexual harassment policy.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of corrective action for contractors and volunteers.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a b, c, d, e, f, g) Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse.</p> <p>GDC policy 208.06 states, "The Department prohibits all consensual sexual activity between offenders, and offenders may be subject to disciplinary action for such activity. Consensual (non-coerced) sexual activity between offenders does not constitute sexual abuse, but is considered a disciplinary issue. All instances of sexual contact between offenders will be treated as non-consensual unless proved otherwise during the course of an investigation. Offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or a criminal finding of guilt for offender-on-offender sexual abuse. These sanctions shall be imposed in accordance with SOP 209.01, Offender Discipline." (Page 29)</p> <p>This same policy also states, "Offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual harassment. These sanctions shall be imposed in accordance with SOP 208.01, Offender Discipline." (Page 29)</p> <p>In addition, it states, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process shall consider whether the offender's mental disabilities or mental illness contributed to behavior when determining what type of sanction, if any, will be imposed. See SOP 508.18 MH/MR Discipline Procedures. If the facility offers therapy, counseling, or other interventions to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer or require the perpetrator to participate in such interactions as a condition of access to programming or other benefits. Any offender may be disciplined for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact." (Page 30)</p> <p>GDC policy 208.06 states, "For the purpose of a disciplinary action, a report of sexual abuse made in good faith upon reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish sufficient evidence to substantiate the allegation." (Page 30)</p> <p>There have been no inmates disciplined for inmate-on-inmate sexual abuse.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of disciplinary sanctions for inmates.</p>

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b) All inmates at EWF who have disclosed any prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioner. These meetings are done withing 14 days of the intake screening.</p> <p>GDC policy 208.06 states, "Offenders whose screenings indicate they have experienced prior sexual victimization or have a history of sexually assaultive behavior must be offered a follow-up meeting with medical and mental health counseling within 14 days of screening." (Page 21)</p> <p>Staff who are responsible for risk screening state, "Both are referred to the psychologist. We also let the PCM know. The psychologist will see them at the first available appointment. He comes to our facility once a week."</p> <p>The Auditor reviewed 19 Medical and Mental Health Referral Forms of inmates who have experience prior sexual victimization or who perpetrated sexual assaultive behavior. These forms document referrals were offered and whether the inmate refused the referral.</p> <p>c) This standard is not applicable as EWF is not a jail.</p> <p>d) Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.</p> <p>e) Medical and mental health practitioners at EWF 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.</p> <p>EWF medical and mental health practitioners use the Georgia Department of Corrections Mental Health Services Authorization to Release Information form.</p> <p>EWF does not house youthful offenders.</p> <p>Medical staff report they always obtain informed consent.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of medical and mental health screenings; history of sexual abuse.</p>

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crises intervention services. The nature and scope of these services are determined by medical and mental health practitioners according to their professional judgment.</p> <p>Medical and mental health staff document their services on the following: Sexual Allegation Notification and Evaluation Log, Refusal/Recantment Medical Log, GDC Mental Health Initial Sexual Allegation Evaluation, GDC Mental Health Services, GDC Mental Health Sexual Allegation Follow-up Report and GDC Nursing Assessment Form for Alleged Sexual Assault.</p> <p>b) If no qualified medical or mental health practitioners are on duty at the time of a report, EWF staff take preliminary steps to protect the victim pursuant to 115.62 and immediately notify the appropriate medical and mental health practitioners.</p> <p>There were no inmates onsite who reported sexual abuse.</p> <p>c) Inmate victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, and where medically appropriate.</p> <p>Medical staff state, "We provide emergency contraception and prophylaxis as part of our follow up care. This happens after the see the doctor. Victims are immediately referred to mental health."</p> <p>d) Medical and mental health treatment services are provided to the Sexual Abuse victims at EWF without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of access to emergency medical and mental health services.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>a, b) EWF offers 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.</p> <p>GDC policy 208.06 states, "The Department shall provide prompt and appropriate medical and mental health services in compliance with 28 CFR 115 and in accordance with the Department SOP's regarding medical and mental health care." (Page 31)</p> <p>Health Services -- Physical Health, VH81-0001, dated December 1, 1996 states, "In all cases where allegations of sexual contact, sexual abuse, or sexual harassment have been made and the nature of the incident involves no physical contact (e.g., verbal comments, physical gestures toward the patient), no medical evaluation may be indicated; however, counseling services in accordance with the SOP regarding Psychological Counseling for Sexual Abuse will be discussed with the patient and a referral made, if desired. Any incident involving sexual abuse that may result in injury, pregnancy, sexually transmitted infection, or other health implications will result in a medical evaluation with the consent of the patient." (Page 3 and 4)</p> <p>There were no inmates onsite who reported sexual abuse.</p> <p>c) EWF provides victims with medical and mental health services consistent with the community level of care.</p> <p>Medical staff report, "The standard of care they receive here is higher than in the community."</p> <p>d, f) VH81-0001 states, "When an allegation of sexual abuse has been made, arrangements will be made for a medical evaluation to determine the extent of physical injuries, evaluation for sexually transmitted infections and possible pregnancy...A follow up appointment will be made for the patient in two weeks to repeat the pregnancy test and in one month to repeat syphilis serology..." (Page 6 and 7)</p> <p>e) VH81-0001 states, "If pregnancy occurs, the patient will be counseled regarding the effects of any medications she has received on the fetus and her reproductive options. If termination of the pregnancy is desired, arrangements will be made for an abortion according to SOP VH50-0001." (Page 7)</p> <p>g) Medical and mental health treatment services are provided to the Sexual Abuse victims at EWF without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>h) GDC 508.22, "Mental Health Management of Suspected Sexual Abuse or Sexual Harassment," dated May 3, 2018 states, "Specific Procedures for Substantiated Offender-on-Offender Abusers: Mental health staff will evaluate all substantiated offender-on-offender abusers within sixty (60) days from date of substantiation and offer mental health treatment when deemed appropriate." (Page 8)</p>

Based on documentation review and staff interviews, EWF meets the standard of ongoing medical and mental health care for sexual abuse victims and abusers.

115.86	<b>Sexual abuse incident reviews</b>
	<p data-bbox="248 168 898 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="248 248 523 284"><b>Auditor Discussion</b></p> <p data-bbox="248 329 1425 443">a) EWF conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded.</p> <p data-bbox="248 488 1474 947">GDC policy 208.06 states, “Monthly Sexual Abuse Program Review. The facility SAIRT shall conduct a sexual abuse incident review at the conclusion of every substantiated and unsubstantiated sexual abuse investigation to review and assess the facility’s PREA prevention, detection, and response efforts as stipulated in Attachment 9, Sexual Abuse Incident Review Checklist. Reviews are not necessary for incidents with a disposition of unfounded. Each facility shall submit a report to the Department’s PREA Analyst each month using the electronic spreadsheet provided from the PREA Coordinator’s office. This form shall be submitted by e-mail no later than the fifth calendar day of the month following the reporting month. All allegations investigated within the month shall be included on this report along with the appropriate disposition. The monthly report shall be completed in accordance with the Facility PREA Log User Guide.” (Page 31)</p> <p data-bbox="248 992 1458 1061">The Auditor reviewed three investigative files and found each filed contained a Sexual Abuse Incident Review Checklist.</p> <p data-bbox="248 1106 1469 1220">b) These reviews are conducted within 30 days of the conclusion of the criminal or administrative sexual abuse investigations. This is done in accordance with this standard and GDC policy 208.06.</p> <p data-bbox="248 1265 1453 1335">In the three investigative reviewed, all three Sexual Abuse Incident Reviews were completed within the required timeframe.</p> <p data-bbox="248 1379 1461 1449">c) EWF’s review team consists of upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.</p> <p data-bbox="248 1494 1453 1570">The Warden Designee states, “Our review team consists of the entire SART team along with the captain and our PREA Compliance Manger.”</p> <p data-bbox="248 1615 1461 1684">The PREA Compliance Manager reports they are involved in the review team process and all final reports are secured in their office.</p> <p data-bbox="248 1729 1466 1843">d) EWF review team prepares a report of its findings from sexual abuse incident reviews and any recommendations for improvement and submits such report to the facility and PREA Compliance Manager.</p> <p data-bbox="248 1888 1442 1957">The Warden Designee states, “We look for areas of vulnerability, areas of improvement like adjusting mirrors, increasing rounds and signage.”</p> <p data-bbox="248 2002 1409 2072">The PREA Compliance Manager states, “We look at everything. We then make a plan to correct any deficiencies that are found.”</p> <p data-bbox="248 2116 1398 2152">Based on documentation review and staff interviews, EWF meets the standard of sexual</p>



<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a, b, c, d, f) GDC/EFW collects accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The standardized instrument includes, 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. This data aggregated annually.</p> <p>GDC policy 208.06 states, “The Department shall review data collected and aggregated of all sexual abuse allegations in order to improve staff performance, identify problem areas, and improved facility operations and offender sexual safety. The Department shall publish the data in an annual report, comparing each year’s data, and provide an assessment of progress in address offender sexual abuse. It shall make this publicly available on its website.” (Page 31)</p> <p>GDC/EFW annual reports are published on its website:  <a href="http://www.dcor.state.ga.us/Research/Reports">http://www.dcor.state.ga.us/Research/Reports</a>.</p> <p>e) This standard is not applicable as EWF does not contract for the confinement of its inmates.</p> <p>Based on documentation review, EWF meets the standard of data collection.</p>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC reviews 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, and training, including: identifying problem areas; taking corrective action on an ongoing basis; and preparing annual report of its findings from its data review and any corrective actions for each facility, as well as the agency.</p> <p>GDC policy 208.06 states, “The Department shall review data collected and aggregated of all sexual abuse allegations in order to improve staff performance, identify problem areas, and improved facility operations and offender sexual safety. The Department shall publish the data in an annual report, comparing each year’s data, and provide an assessment of progress in address offender sexual abuse. It shall make this publicly available on its website.” (Page 31)</p> <p>The Statewide PREA Coordinator states, “We have dedicated PREA analyst who works on our annual report, our monthly report and pulls data from our investigations.”</p> <p>The PREA Compliance Manager reports they are responsible for getting monthly data together and forwarding it on to the PREA Coordinator.</p> <p>b) GDC’s annual report includes a comparison of the current year’s data and corrective actions with those from prior years. These reports can be located on GDC’s website: <a href="http://www.dcor.state.ga.us/Research/Reports">http://www.dcor.state.ga.us/Research/Reports</a>. GDC website also includes annual reports from private facilities in which GDC contract with for placement of inmates. This is done in accordance with this standard and GDC policy 208.06.</p> <p>The Auditor reviewed reports from calendar years 2012 to 2019. These reports are approved by the agency ahead and meet the requirements of this standard.</p> <p>Based on the documentation review and staff interviews, EWF meets the standard of data review for corrective action.</p>

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) GDC/EFW ensures incident-based and aggregated data are securely retained. All EWF PREA related data and reports are secured in the PREA Compliance Manager's office.</p> <p>b) All aggregated sexual abuse data is made available on GDC's website:  <a href="http://www.dcor.state.ga.us/Research/Reports">http://www.dcor.state.ga.us/Research/Reports</a>.</p> <p>c) The Auditor found no reports with personal identifiers.</p> <p>d) GDC/EFW maintains sexual abuse data collected pursuant to 115.87 for at least ten years after the date of initial collection.</p> <p>Based on documentation review and staff interviews, EWF meets the standard of data storage, publication, and destruction.</p>

115.401	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>a) During the prior three-year audit period, GDC ensured each of their facilities was audited at least once.</p> <p>b) While this audit was scheduled for the second year of the current audit cycle, COVID-19 pushed this audit to the third year of the current audit cycle.</p> <p>h) The Auditor had access to, and the ability to observe, all areas of EWF.</p> <p>i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information) needed to complete the audit.</p> <p>m) The Auditor was permitted to conduct private interviews with inmates and staff.</p> <p>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 received no letters from EWF inmates.</p> <p>Based on evidence provided through policy, staff and inmate interviews, and documentation review, EWF is found to have met the standard for frequency and scope of audit.</p>

115.403	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>EWF believes incarcerated individuals have the right to be free from sexual abuse and sexual harassment. This zero-tolerance culture is evident in the policies of the agency, the actions of EWF leadership as well as the knowledge the staff demonstrated of PREA. Staff was able to articulate the agencies coordinated response to sexual abuse and harassment.</p> <p>The overall theme of the interviews with inmates included feeling safe at the facility and the belief that staff takes reports of sexual abuse seriously. The inmates were able to explain how to report incidents of sexual abuse and harassment and were able to discuss how they were exposed to PREA education upon intake. While some stated they could not remember the PREA video in its entirety, they did remember viewing it. All inmates reported they knew that opposite gender staff announced themselves before entering the dorms.</p> <p>Staff knew their responsibilities to prevent, detect, and respond to incidents of sexual abuse and harassment. Staff was able to articulate the coordinated response to sexual abuse and harassment. They knew to separate the victim from the alleged perpetrator, secure the scene and to contact their supervisor. They stated that all reports would be documented by the end of shift. They also stated that if they received knowledge of someone being in imminent danger, they would immediately secure the safety of that individual. There is a zero – tolerance culture at EWF.</p> <p>Interviews with specialized staff were completed and the results were positive and supported the zero-tolerance culture. Each knew their role and responsibilities as it pertains to PREA compliance and documentation. They articulated the coordinated response and the expectations that staff would follow all policies. Administrative staff was open to any suggestions the Auditor presented during the tour and the exit meeting.</p> <p>Documentation provided in the pre-audit questionnaire was well organized and easy to read. EWF was found to be in compliance with all PREA standards and was determined to have exceeded four of them.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</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.)	na
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for	yes

	adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
	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
	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
	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
	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
	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
	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
	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
	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
	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
	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
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

<b>115.13 (b)</b>	<b>Supervision and monitoring</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
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
	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
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	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
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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).)	na

<b>115.14 (b)</b>	<b>Youthful inmates</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).)	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).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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).)	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).)	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).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</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
	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
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
	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
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
	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
<b>115.16 (a)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
	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	yes

	abuse and sexual harassment, including: inmates who are blind or have low vision?	
	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
	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
	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
	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
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	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
	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
	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
	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

<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</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
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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

<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	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
	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
	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 two bullets immediately above?	yes
	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
	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
	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 two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</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
	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

<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	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
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
	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
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</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.)	na
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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

<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</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
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	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
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	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 always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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 always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</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
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	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
	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
	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
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	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
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	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
	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

<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	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
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</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
	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
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</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
	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
	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
	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
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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

<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
	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
	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
	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
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</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.)	na
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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

<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
	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
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	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
	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
	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
	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
	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
	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
	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
	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
	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
	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

<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
	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
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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
	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
	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
	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
	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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	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
	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

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	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
	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
	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

<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
	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
<b>115.43 (b)</b>	<b>Protective Custody</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
	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
	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
	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
	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
	If the facility restricts 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
	If the facility restricts 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

<b>115.43 (c)</b>	<b>Protective Custody</b>	
	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
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	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
	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
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	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
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	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
	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

<b>115.51 (b)</b>	<b>Inmate reporting</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
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	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.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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

<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</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.)	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.)	na
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	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.)	na
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	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.)	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.)	na

115.52 (e)	Exhaustion of administrative remedies	
	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.)	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.)	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.)	na

<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	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.)	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.)	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.)	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.)	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.)	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.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	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
	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.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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
	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
	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
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
	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
	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
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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 limit 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?	no

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</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

<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	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
	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
	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
	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
	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
	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
	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
	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
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	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
	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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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).)	na

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (b)</b>	<b>Reporting to inmates</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.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, 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 resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	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
	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
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
	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

<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</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
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
	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
	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
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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

<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	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
	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
	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
<b>115.88 (b)</b>	<b>Data review for corrective action</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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	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
	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.)	na
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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, there has never been a Final Audit Report issued.)	yes