PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS

			Interi	m X Fina	al R	Report	
Auditor Informa	tion						
Auditor name:	Katherii	ne Brown					
Address:	12121 L	ittle Road Suite 28	6 Huc	dson, Florida	340	667	
Email:	kbrown	2828@yahoo.com					
Telephone numl	per:	727-470-4123					
Date of facility v	risit:	November 3, 201	5				
Date report sub	mitted:	November 5, 2015	5				
Facility Informa	tion						
Name of facility	' :	Appling Integrated	Γreatm	ent Facility			
Physical addres	s:	252 West Park Drive	Baxle	ey GA. 31513			
Telephone num	ber:	912-367-1761					
Appling Integra	ted	☐ Military] County		☐ Federal	
Treatment Facil	ity is:	☐ Private for profit] Municipal		X State	
		☐ Private not for pr	ofit				
Facility Type:		☐ Jail X	Prison	1			
Name of facility	's Chief E	xecutive Officer:	Jeffre	ey Pearce		Title:	Superintendent
Number of staff	assigned	to Appling Integra	ated T	reatment Fac	ilit	y in the last 12 months: 66	
Designed facility capacity: 204							
Current population of facility: 195							
Facility security levels/Detainees custody levels: I, II,III & IV							
Age range of the	e populat	ion: 18-69					
Name of PREA	Complian	ce Manager:	Tracy	Page		Title:	GP Counselor
Email address:			Tracy	.Page@gdc.ga.	.go	v Telephone #	912-367-1761
Agency Informa	ition						
Name of agency	/ :	Georgia Department	of Co	rrections			
Governing auth parent agency:	ority or	Georgia Department of Corrections					
Physical addres	s:	300 Patrol Road, Forsyth, GA 31029					
Mailing address	:	N/A					
Telephone num	ber:	478-992-5211					
Agency Chief Ex	ecutive (Officer					
Name:		Homer Bryson		Title:	Со	ommissioner	
Email address:	homer.	.bryson@gdc.ga.gov		Telephone number:	47	78-992-5211	
Agency-Wide Pl	REA Coor	dinator					
Name:		Sharon Shaver		Title:		Agency PREA Coordinator	
Email address:	Sharon.Sh	naver@gdc.ga.gov		Telephone #	:	678-628-3128	

AUDIT FINDINGS

NARRATIVE:

The audit of Appling Integrated Treatment Facility was conducted on November 3, 2015 by Katherine Brown, Certified PREA auditor. The areas toured were a total of four housing units. There are four general population units and there are 4 administrative detention/segregation cells plus the kitchen, laundry, programs area, and work areas.

An entrance meeting was held with facility staff. The following people were in attendance: Melvin Butts, Assistant State Wide PREA Coordinator; Victoria Gomez, Secretary; Jeff Pearce, Superintendent; Tracy Page, Counselor; Kendra Youmans, Counselor; Sharon Lord, Officer; Karen Bowem, Counselor; Rodney Black Lieutenant.

Following the entrance meeting I toured the Appling Integrated Treatment Facility from 12:45 – 1:15 pm. On the tour with me was, Melvin Butts, Assistant State Wide PREA Coordinator; Jeff Pearce, Superintendent and Rodney Black Lieutenant.

I asked for an alpha listing of all Detainees housed at Appling Integrated Treatment Facility and randomly selected two Detainees from each housing unit as well as any Detainees who were limited English speaking or had hearing/vision impairment to be interviewed. There were no hearing/vision impairment Detainees there, I did interview one limited English speaking Detainees. I also asked for any Detainees who was transgender/intersex, there were no transgender/intersex detainees I did interview one detainee that identified himself as gay. I also asked for a shift roster and randomly selected staff to interview. I interviewed all staff on day shift which consisted of 3 and 2 on evening shift.

There were 31 sexual assault/harassment allegation cases, all relatively recent (within the past year) 1 had been unfounded; 2 substantiated and 28 unsubstantiated.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Appling Integrated Treatment Facility is located at 252 Park Drive, Baxley GA 31513. The Warden at Ware State Prison is also responsible for Appling Integrated Treatment Facility. It is located approximately 75 miles west of Savannah. Appling Integrated Treatment Facility is a nine month program for detainees who have drug/alcohol and mental health problems. Spectrum provides extensive counseling services designed to help reintegrate these detainees back into society prior to their target release date. All the detainees are probationers who once complete this program are released to their probation Office. It consists of four dormitories with 57 beds each. There are four single cells used for isolation or segregation. There are prefab buildings in the back of the facility that are used for programs.

Number of standards exceeded: 2 Number of standards met: 39 Number of standards not met: Number of standards not applicable: 2 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator §115.11 ☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) □ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV A.1; Georgia Organizational Chart and Facility Organizational Chart. Based on interviews with PREA Coordinator and PREA compliance manager. Georgia Department of Corrections has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlines Georgia Department of Corrections' approach to preventing, detecting, and responding to such conduct. Georgia Department of Corrections employs or designates an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. Georgia Department of Corrections operates more than one facility; each facility has designated a PREA compliance manager with sufficient time and authority to coordinate Appling Integrated Treatment Facility's efforts to comply with the PREA standards §115.12 **Contracting with other agencies for confinement of Detainees** ☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV A.2

SUMMARY OF AUDIT FINDINGS:

Based on interview with agency's contract compliance manager.

Appling Integrated Treatment Facility does not contract for confinement of their Detainees.

☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV A. 3;; SOP II. A. 07-0012; Staffing Plan; Annual Staffing Plan review; Staff attendance roster and logbooks. Based on interview with Superintendent: PREA Compliance Manager and PREA Coordinator. Georgia Department of Corrections has developed, documented, and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring, to protect Detainees against sexual abuse. In circumstances where the staffing plan was not complied with, Appling Integrated Treatment Facility documented and justified all deviations from the plan. Georgia Department of Corrections completes an annual review, in consultation with the PREA coordinator required by § 115.11, to assess, determine, and document whether adjustments are needed. **§115.14 Youthful Detainees** ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) X Not applicable Standard Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV A. 4. (a-c). Appling Integrated Treatment Facility does not house youthful offenders. **§115.15** Limits to cross gender viewing and searches ☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for

§115.13

Supervision and monitoring

the relevant review period)

Does	Not	Meet	Standard	۱ /	requires	corrective	action)
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Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV A. 5. (a-g) and SOP II. B. 01-0013; Lesson Plan and Sign in sheets.

Appling Integrated Treatment Facility does 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. In the event a cross gender search is done Appling Integrated Treatment Facility documents all cross-gender strip searches and cross-gender visual body cavity searches.

Appling Integrated Treatment Facility has policies and procedures that enable Detainees 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering a Detainees housing unit.

Appling Integrated Treatment Facility does not search or physically examine a transgender or intersex Detainees for the sole purpose of determining the Detainees' genital status. If the Detainees' genital status is unknown, it is determined during conversations with the Detainees, 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.

Georgia Department of Corrections trains security staff in how to conduct cross-gender patdown searches, and searches of transgender and intersex Detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

§115.16 Detainees with disabilities and limited English speaking

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV A. 6 (a & b); Language Line contract; PREA Training Acknowledgement Statement and PREA Pamphlet. Based on random Detainees and staff interviews and based on interview with limited English speaking Detainees.

Georgia Department of Corrections takes appropriate steps to ensure Detainees with disabilities (including, for example, Detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of Georgia Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. There is designated staff members assigned to interpret for screening, training and investigation purposes.

Georgia Department of Corrections does not rely on Detainees interpreters, Detainees readers, or other types of Detainees assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the Detainees' safety. None have been used or required.

§115.17 Hiring and promotion decisions

Χ	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard
fo	r the relevant review period)
	Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV A. 7 (a-d); SOP IV. O. 03-0012 and SOP IV. O. 05-0001; Acknowledgement Statement and Hiring and Promotional memo. Based on interview with Human Resource Director and review of personnel files at Ware State Prison.

Georgia Department of Corrections does not hire or promote anyone who may have contact with Detainees, and does not enlist the services of any contractor who may have contact with Detainees, who has engaged in sexual abuse in any criminal justice facility, 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 above.

Georgia Department of Corrections considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with Detainees.

Georgia Department of Corrections performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates performs a records check annually on all current employees and contractors who may have contact with inmates. Appling Integrated Facility even runs a criminal history on all vendors who come into the facility to work, even those under constant staff observation. No one is allowed entry to Appling Integrated Facility without a criminal history run. Based on this I find they exceed in this standard.

§115.18 Upgrades to facilities and technology

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV A. 8. Based on interview of agency head and Superintendent.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, Georgia Department of Corrections considers how such technology may enhance Georgia Department of Corrections' ability to protect Detainees from sexual abuse. There have been no substantial or modifications to existing facilities. Appling Integrated Treatment Facility has added camera's to the rear hallway and kitchen area.

§115.21 Evidence protocol and forensic medical exams

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV B. 1 (a-f); SOP IK01-0006; SANE Callout; NIC Certificate for PREA-Behavioral Healthcare for Sexual Assault Victims in Confinement; Sexual Abuse Response Checklist; Procedure for SANE nurse Evaluation/Forensic Collection. Based on interview with SANE/SAFE staff and PREA compliance manager.

To the extent Appling Integrated Treatment Facility is responsible for investigating allegations of sexual abuse; Georgia Department of Corrections follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions

Appling Integrated Treatment Facility offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations are be performed by Sexual Assault Nurse Examiners (SANEs) from Satilla SANE Nurse Group.

Appling Integrated Treatment Facility makes available to the victim a staff victim advocate who has received training on line from NIC for Victim Assistance Advocacy services. The PREA compliance manager is attempting to obtain an MOU from a rape crisis center in Brunswick GA, Safe Harbor Children's Advocacy Center.

As requested by the victim a qualified agency staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and are provide emotional support, crisis intervention, information, and referrals.

To the extent Georgia Department of Corrections itself is not responsible for investigating allegations of sexual abuse, Georgia Department of Corrections requests that the investigating agency follow the requirements listed above.

§115.22 Policies to ensure referrals of allegations for investigations

☐ Exceeds Standard (substantially	exceeds r	requirement	of standard	d)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

	Does Not	Meet Sta	andard (i	requires	corrective	action)
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Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV B. 1 and SOP IK01-0005. Based on interview with agency head and investigative staff.

Georgia Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. All possible criminal investigations are conducted by Georgia Department of Corrections Internal Investigation Unit.

Georgia Department of Corrections has a policy that ensures 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. Georgia Department of Corrections publishes such policy on its website www.dcor.state.ga.us. Georgia Department of Corrections documents all such referrals.

§115.31 Employee training

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV C. 2; PREA Compliance Managers Training; In Service Training Records; Sexual Assault/Sexual Misconduct Acknowledgement Statement; PREA Staff Meeting; Training Roster — Sign in Sheet and Staff Guide on the Prevention and Reporting pamphlet. Based on interview with random staff

Georgia Department of Corrections trains all employees who have contact with Detainees on:

- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Detainees' right to be free from sexual abuse and sexual harassment;
- (4) The right of Detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;
- (6) The common reactions of sexual abuse and sexual harassment victims;
- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with Detainees;
- (9) How to communicate effectively and professionally with Detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming Detainees; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The training is tailored to the gender of the Detainees at Appling Integrated Treatment Facility. The employees receive additional training if the employee is reassigned from a facility that houses only male Detainees to a facility that houses only female Detainees, or vice versa.

Georgia Department of Corrections documents, through employee signature those employees understand the training they have received.

§115.32 Volunteer and contractors training

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV C. 3 (a-c); PREA Employee Training Curriculum from Moss Group and reviewed Sexual Assault/Sexual Misconduct Acknowledgement Statement for Supervised Visitors. Based on interview with volunteer and contractors.

Appling Integrated Treatment Facility ensures all volunteers and contractors who have contact with Detainees have been trained on their responsibilities under Georgia Department of Corrections' sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

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 Detainees, but all volunteers and contractors who have contact with Detainees are notified of Georgia Department of Corrections' zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Appling Integrated Treatment Facility has documentation confirming that volunteers and contractors understand the training they have received.

§115.33 Detainees education

☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV C.4; SOP II B18-0001; Sexual Abuse Review Checklist; PREA Sexual Victimization/Aggressor classification Screening; Sexual Abuse Review Checklist; Detainees Handbook and PREA Pamphlet. Based on interview with random Detainees and intake staff

During the intake process, Detainees receive information explaining Georgia Department of Corrections' zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Within 2 days of intake, Appling Integrated Treatment Facility provides a comprehensive education to Detainees through showing "Speak Up" video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

Georgia Department of Corrections provides Detainees education in formats accessible to all Detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to Detainees who have limited reading skills. There is documentation of Detainees participation in these education sessions.

Based on the fact that the comprehensive training is provided each Wednesday and the knowledge level of the detainees I find Appling Integrated Treatment Facility exceeds in this standard.

§115.34	Specialized training: Investigators
	☐ Exceeds Standard (substantially exceeds requirement of standard)
	X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV C. 5; In Service Training Records; NIC Certificate; GDC Internal Investigations Unit; Compliance Manager Training and PowerPoint Lesson Plan. Based on interview with investigative staff.

In addition to the general training provided to all employees Georgia Department of Corrections ensures that the in house investigators have received training in conducting investigations in confinement settings.

Specialized training includes 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. Georgia Department of Corrections maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

§115.35 Specialized training: Medical and mental health care

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed NIC Certificate – PREA Medical Health Care for Sexual Assault Victims in a Confinement setting.

Georgia Department of Corrections ensures 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; preserve physical evidence of sexual abuse; respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Georgia Department of Corrections maintains documentation that medical and mental health practitioners have received the training.

Medical and mental health care practitioners also receive the training mandated for employees, contractors and volunteers.

§115.41 Screening for risk of victimization and abusiveness

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV D. 1 (a-h); Victim/Aggressor Classification Rating; PREA Sexual Victim/Sexual Aggressor Classification Screening and PREA Reassessment Classification screening. Based on interview with random Detainees and intake staff responsible for screening. Only limited staff has access to the risk screening form only Medical, Mental Health and Superintendent as well as PREA Manager.

All Detainees are assessed during an intake screening and upon transfer to another facility for risk of being sexually abused by other Detainees or sexually abusive toward other Detainees.

Intake screenings take place within 24 hours of arrival at Appling Integrated Treatment Facility.

Appling Integrated Treatment Facility uses an objective screening instrument.

The intake screening considers, at a minimum, the following criteria to assess Detainees for risk of sexual victimization:

- (1) Whether the Detainees has a mental, physical, or developmental disability;
- (2) The age of the Detainees;
- (3) The physical build of the Detainees;
- (4) Whether the Detainees has previously been incarcerated;
- (5) Whether the Detainees' criminal history is exclusively nonviolent;
- (6) Whether the Detainees has prior convictions for sex offenses against an adult or child;
- (7) Whether the Detainees is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (8) Whether the Detainees has previously experienced sexual victimization;
- (9) The Detainees' own perception of vulnerability; and
- (10) Whether the Detainees is detained solely for civil immigration purposes.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to Georgia Department of Corrections, in assessing Detainees for risk of being sexually abusive.

Within 30 days from the Detainees' arrival at Appling Integrated Treatment Facility, Appling Integrated Treatment Facility reassesses the Detainees' risk of victimization or abusiveness based upon any additional, relevant information received by Appling Integrated Treatment Facility since the intake screening.

A Detainees' risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the Detainees' risk of sexual victimization or abusiveness.

Detainees are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked.

Georgia Department of Corrections implements appropriate controls on the dissemination within Appling Integrated Treatment Facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the Detainees' detriment by staff or other Detainees.

§115.42 Use of screening information

Ш	Exceeds Standard (substantially exceeds requirement of standard)
Χ	Meets Standard (substantial compliance; complies in all material ways with the standard
fo	r the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV D. 2 (a-d); LOP 208.06 AITF A, also memo designating Dorms A&B as safe dorms and dorms C&D as aggressor dorms. Based on interview with PREA compliance manager and staff responsible for risk screening.

Georgia Department of Corrections uses information from the risk screening to decide housing, bed, work, education, and program assignments with the goal of keeping separate those Detainees at high risk of being sexually victimized from those at high risk of being sexually abusive. There is a memo designating Dorms a & B as Safe Units for victims and Dorms C & D as units identified as aggressors.

Georgia Department of Corrections makes individualized determinations about how to ensure the safety of each Detainees.

Appling Integrated Treatment Facility has not had a transgender/intersex detainee, however polices are in place that cover the following:

In deciding whether to assign a transgender or intersex Detainees to a facility for male or female Detainees, and in making other housing and programming assignments, Georgia Department of Corrections considers on a case-by-case basis whether a placement would ensure the Detainees' health and safety, and whether the placement would present management or security problems.

Placement and programming assignments for each transgender or intersex Detainees is reassessed at least twice each year to review any threats to safety experienced by the Detainees.

A transgender or intersex Detainees' own views with respect to his or her own safety are given serious consideration.

Transgender and intersex Detainees are given the opportunity to shower separately from other Detainees.

Georgia Department of Corrections does not place lesbian, gay, bisexual, transgender, or intersex Detainees in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such Detainees.

§115.43 Protective custody

□ Exceeds Standard (substantial)	ally exceeds requirement of stand	dard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV D. 3. (a-d). Based on interview with Superintendent

No Detainees have been placed in involuntary segregation housing.

Detainees at high risk for sexual victimization are not placed 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.

Detainees placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If Appling Integrated Treatment Facility restricts access to programs, privileges, education, or work opportunities, Appling Integrated Treatment Facility documents the opportunities that have been limited, the duration of the limitation; and the reasons for such limitations.

Appling Integrated Treatment Facility assigns such Detainees to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment does not ordinarily exceed a period of 30 days. If involuntary segregated housing assignment is made Appling Integrated Treatment Facility clearly documents the basis for Appling Integrated Treatment Facility's concern for the Detainees' safety; and the reason why no alternative means of separation can be arranged. Every 30 days a review is performed to determine whether there is a continuing need for separation from the general population.

§115.51 Detainees reporting

	ПI	Exceeds Standard	(substantially	/ exceeds	s reauiremen	t of	stand	arc	ľ
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV E. 1. (a-e); written Institutional Plan; Detainees Handbook and Staff PREA Information Pamphlet. Based on interviews with random staff and Detainees.

Georgia Department of Corrections provides multiple internal ways for Detainees to privately report sexual abuse and sexual harassment, retaliation by other Detainees or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Detainees can call the PREA hotline at *7732; they can write the Ombudsmen office or the Office of Parole and Pardons.

Georgia Department of Corrections provides at least one way for Detainees to report abuse or harassment to a public office that is not part of Georgia Department of Corrections, and that is able to receive and immediately forward Detainees reports of sexual abuse and sexual harassment to agency officials, allowing the Detainees to remain anonymous upon request.

Staff accepts reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports.

Georgia Department of Corrections provides a method for staff to privately report sexual abuse and sexual harassment of Detainees.

§115.52 Exhaustion of administrative remedies

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDC 208.06 IV. E. 1.2.; SOP IIB02-0001 and SOP IIB05-0001.

Georgia Department of Corrections does not impose a time limit on when an Detainees may submit a grievance regarding an allegation of sexual abuse.

Georgia Department of Corrections does not require a Detainee to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

Georgia Department of Corrections ensures that Detainees who allege sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint.

Georgia Department of Corrections issues 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.

Third parties, including fellow Detainees, staff members, family members, attorneys, and outside advocates, are permitted to assist Detainees in filing requests for administrative remedies relating to allegations of sexual abuse, and are also be permitted to file such requests on behalf of Detainees.

Georgia Department of Corrections has established procedures for the filing of an emergency grievance when the Detainees is subject to a substantial risk of imminent sexual abuse.

After receiving an emergency grievance alleging a substantial risk of imminent sexual abuse, Georgia Department of Corrections immediately forwards 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 is taken, and provides an initial response within 48 hours, and issues a final agency decision within 5 calendar days. The initial response and final agency decision documents Georgia Department of Corrections' determination whether the Detainees is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Georgia Department of Corrections may discipline a Detainees for filing a grievance related to alleged sexual abuse only where Georgia Department of Corrections demonstrates that the Detainees filed the grievance in bad faith.

§115.53 Detainees access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on interview with random Detainees.

Appling Integrated Treatment Facility provides Detainees with access to a staff victim advocates for emotional support for services related to sexual abuse.

Appling Integrated Treatment Facility informs Detainees, 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.

Appling Integrated Treatment Facility is attempting to obtain memoranda of understanding with Safe Harbor Children Advocacy Center.

§115.54 Third party reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV E. 4.

Georgia Department of Corrections has a method to receive third-party reports of sexual abuse/harassment and distributes publicly, information on how to report sexual abuse and sexual harassment on behalf of a Detainees. Visitors can go to www.dcor.state.ga.us

Staff and agency reporting duties

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Reviewed GDOC SOP 208.06 IV F. 1. (g-i); PREA brochure; lesson plan and email alert of hotline call. Based on interviews with random staff; Superintendent and medical/mental health staff.

Georgia Department of Corrections requires 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 Georgia Department of Corrections; retaliation against Detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Apart from reporting to designated supervisors or officials, staff does not reveal 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.

If the alleged victim is considered a vulnerable adult under a State or local vulnerable person's statute, Georgia Department of Corrections reports the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Appling Integrated Treatment Facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to Appling Integrated Treatment Facility's designated investigators.

§115.62 Agency protection duties

	Exceeds	Standard	(su	bstantially	exceed	s requi	rement o	of st	and	ard))
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

GDOC 208.06 IV.F.2 Based on interviews with random staff, and Superintendent.

Immediate action is taken to protect Detainees when Georgia Department of Corrections learns that a Detainees is subject to a substantial risk of imminent sexual abuse.

§115.63 Reporting to other confinement facilities

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV F. 3 (a-d); case notes regarding notifying a county facility of alleged abuse at that facility (information received during intake screening) and incident report. Based on interview with agency head and Superintendent.

Upon receiving an allegation that a Detainees was sexually abused while confined at another facility, the head of Appling Integrated Treatment Facility that received the allegation notifies the head of the facility or appropriate office of Georgia Department of Corrections where the alleged abuse occurred. Such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented.

§115.64 Staff first responder duties

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV F. 4; Coordinated Response Plan and First Responder Certificate. Based on interview with security staff who are first responders and random staff.

Upon learning of an allegation that an Detainees was sexually abused, the first security staff member to respond separates the alleged victim and abuser; preserves and protects any crime scene until appropriate steps can be taken to collect any evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, 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; and if the abuse occurred within a time period that still allows for the collection of physical evidence, 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 first staff responder is not a security staff member, the responder request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV F.5. and Coordinated Institutional Response Plan. Based on interview with Superintendent. Appling Integrated Treatment Facility has 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. **§115.66** Preservation of ability to protect Detainees from contact with abusers ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) X Not applicable standard Auditor comments, including corrective actions needed if does not meet standard GDC does not have Collective Bargaining §115.67 Agency protection against retaliation ☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV F. 6 (a-e); memo assigning staff member as Retaliation Monitor; 90 day offender Sexual Abuse Review Checklist and 90 day Staff Sexual Abuse Review

§115.65

Coordinated response

Georgia Department of Corrections has a policy to protect all Detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment

Checklist and Offender Right to Know. Based on interview with agency head, Superintendent,

designated staff member with monitoring retaliation.

investigations from retaliation by other Detainees or staff, and designate which staff members or departments are charged with monitoring retaliation.

Georgia Department of Corrections has multiple protection measures, such as housing changes or transfers for Detainees victims or abusers, removal of alleged staff or Detainees abusers from contact with victims, and emotional support services for Detainees or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, Georgia Department of Corrections monitors the conduct and treatment of Detainees or staff who reported the sexual abuse and of Detainees who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by Detainees or staff, and act promptly to remedy any such retaliation. There is periodic status checks performed. Items Georgia Department of Corrections should monitor include any Detainees disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Georgia Department of Corrections continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

If any other individual who cooperates with an investigation expresses a fear of retaliation, Georgia Department of Corrections takes appropriate measures to protect that individual against retaliation.

§115.68 Post allegation protective custody

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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV F. 2 and LOP 208.06 AITF A. Based on interview with Superintendent.

Any use of segregated housing to protect a Detainees who is alleged to have suffered sexual abuse receives all the same rights and privileges as general population Detainees.

§115.71 Criminal and administrative agency investigation

	Exceeds	Standard	(substantially	exceeds	s requirement	of	stand	ard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV G. 3; Staff Training Roster; NIC Certificate and In Service Training Record. Based on interview with investigative staff.

When Georgia Department of Corrections conducts its own investigations into allegations of sexual abuse and sexual harassment, it does so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Where sexual abuse is alleged, Georgia Department of Corrections uses investigators who have received special training in sexual abuse investigations.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, Georgia Department of Corrections conducts compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person's status as Detainees or staff. No agency requires a Detainees who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that contain a thorough description of physical, testimonial, and documentary evidence, the reasoning behind credibility assessments, and investigative facts and findings, and attaches copies of all documentary evidence where feasible.

Substantiated allegations of conduct that appears to be criminal are referred for prosecution.

Georgia Department of Corrections retains all written reports for as long as the alleged abuser is incarcerated or employed by Georgia Department of Corrections, plus five years.

The departure of the alleged abuser or victim from the employment or control of Appling Integrated Treatment Facility or agency does not provide a basis for terminating an **investigation.**

§115.72 Evidentiary standard for administrative investigation

□ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV G. 14. Based on interview with investigative staff.

Georgia Department of Corrections imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.76 Disciplinary sanctions for staff

□ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV H. Reviewed Sexual Assault/Sexual Misconduct Acknowledgment Statement.

Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.

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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

§115.77 Corrective action for contractors and volunteers

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV H. 2; Sexual Assault/ sexual Misconduct Acknowledgement Statement for Visitors/Contractors/Volunteers. Based on interview with Superintendent.

Any contractor or volunteer who engages in sexual abuse is prohibited from contact with Detainees and are reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Appling Integrated Treatment Facility takes appropriate remedial measures, and considers whether to prohibit further contact with Detainees, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

§115.78 Disciplinary sanctions for Detainees

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV H.3.; SOP II. B 02-0001 and reviewed Disciplinary Report. Based on interview with medical/mental health staff.

Detainees are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the Detainees engaged in Detainees-on-Detainees sexual abuse or following a criminal finding of guilt for Detainees-on-Detainees sexual abuse.

Sanctions are commensurate with the nature and circumstances of the abuse committed, the Detainees' disciplinary history, and the sanctions imposed for comparable offenses by other Detainees with similar histories.

The disciplinary process considers whether a Detainees' mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.

All mental health services are provided at Valdosta State Prison either by taking the inmate there or through the use of Tele med.

Georgia Department of Corrections disciplines a Detainees for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Georgia Department of Corrections prohibits all sexual activity between Detainees and may discipline Detainees for such activity.

§115.81 Medical and Mental health screening; history of sexual abuse

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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDC 208.06 IV. D; SOP VG30-0001; Medical and Mental Health Referral Form; Medical Screening Form; 90 day Offender Sexual Abuse Review Checklist; Diagnostic Referral Log and MH/MR Services Consent to Evaluation. Based on interview with staff responsible for risk screening and medical/mental health staff

If the screening indicates that an Detainees has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure that the Detainees is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. All mental health services related to PREA are handled either via tele med or at Valdosta State Prison.

If the screening indicates that an Detainees has previously perpetrated sexual abuse/prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure that the Detainees is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Medical and mental health practitioners obtain informed consent from Detainees before reporting information about prior sexual victimization that did not occur in an institutional setting.

§115.82 Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement of standard)

X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed SOP IIA21-0001. Reviewed SANE nurse Call Roster and PREA Medical log. Based on interview with medical and mental health staff.

Detainee's 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.

If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health practitioners.

Detainee's victims of sexual abuse while incarcerated are 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.

Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

§115.83 ongoing medical and mental health care for sexual abuse victims

☐ Exceeds Standard	(substantially	exceeds	requirement	: of	standa	rd)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDC 208.06 IV. I and SOP VH81-0001 and Medical PREA Log. Based on interview with medical/mental health staff.

Appling Integrated Treatment Facility offers medical and mental health evaluation and, as appropriate, treatment to all Detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. All mental health services are provided through Valdosta State Prison via Tele Med or in person.

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.

Appling Integrated Treatment Facility provides such victims with medical and mental health services consistent with the community level of care.

Detainee's victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

§115.86 Sexual abuse incident reviews

☐ Exceeds Standard	(substantiall [,]	y exceeds rec	quirement of	f standar	(t
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X meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDOC SOP 208.06 IV J.; Sexual Abuse Incident Review Meeting and PREA Incident Review Checklist. Based on interview with Superintendent, PREA compliance manager; incident review team.

Appling Integrated Treatment Facility conducts 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. This review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at Appling Integrated Treatment Facility; and they examine the area in Appling Integrated Treatment Facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

§115.87 Data collection

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Georgia Department of Corrections collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually.

The incident-based data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Georgia Department of Corrections maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Georgia Department of Corrections obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its Detainees.

Upon request, Georgia Department of Corrections provides all such data from the previous calendar year to the Department of Justice no later than June 30.

§115.88 Data review for corrective action

☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standar for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on interview with PREA coordinator.

Georgia Department of Corrections reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as Georgia Department of Corrections as a whole.

Such reports includes a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of Georgia Department of Corrections' progress in addressing sexual abuse.

Georgia Department of Corrections' report is approved by Georgia Department of Corrections head and made readily available to the public through its website www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2014.pdf

§115.89 Data storage, publication and destruction
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Georgia Department of Corrections makes 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 www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2014.pdf
All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires.
AUDITOR CERTIFICATION:
The auditor certifies that the contents of the report are accurate to the best of her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of Georgia Department of Corrections under review.
Katherine Brown November 5, 2015

Auditor Signature

Date