

PREA Facility Audit Report: Final

Name of Facility: Bainbridge Residential Substance Abuse Treatment Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/02/2021

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"/>
Auditor Full Name as Signed: Mable P. Wheeler	Date of Signature: 12/02/2021

AUDITOR INFORMATION	
Auditor name:	Wheeler, Mable
Email:	wheeler5p@hotmail.com
Start Date of On-Site Audit:	10/06/2021
End Date of On-Site Audit:	10/07/2021

FACILITY INFORMATION	
Facility name:	Bainbridge Residential Substance Abuse Treatment Facility
Facility physical address:	235 State Hospital Road, Bainbridge, Georgia - 39817
Facility Phone:	
Facility mailing address:	

Primary Contact	
Name:	Carl Belin
Email Address:	carl.belin@gdc.ga.gov
Telephone Number:	12292436408

Warden/Jail Administrator/Sheriff/Director	
Name:	Moses James
Email Address:	Moses.James@gdc.ga.gov
Telephone Number:	(229) 248-2405

Facility PREA Compliance Manager	
Name:	Carl Belin
Email Address:	carl.belin@gdc.ga.gov
Telephone Number:	O: (229) 248-2463

Facility Characteristics	
Designed facility capacity:	394
Current population of facility:	313
Average daily population for the past 12 months:	250
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18 -69
Facility security levels/inmate custody levels:	Level 1 and Level 2
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	84
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	1

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

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

Agency-Wide PREA Coordinator Information

Name:	Grace Atchison	Email Address:	grace.atchison@gdc.ga.gov
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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.

Introduction

The Rape Elimination Act (PREA) audit onsite phase for Bainbridge RSAT was conducted October 6 - 7, 2021. The facility is located 235 State Hospital Road, Bainbridge, GA. 39817. The audit was conducted by Mable P. Wheeler from Macon, Georgia, who is a U. S. Department of Justice Certified PREA auditor for adults and juvenile facilities. The audit was assigned to Diversified Correctional Services LLC, as part of a contractual agreement with GDC. There are no known existing conflicts of interest or barriers to completing the audit. The facility was last audited April 30, 2019, with 100% compliance with the PREA Standards.

Mission

Bainbridge Probation Substance Abuse Treatment Center houses up 392 male offenders to ensure public safety and effectively house offenders while operating a safe and secure facility by housing medium security, general population inmates who may not be suitable for a county facility due to their offense or physical limitations. Bainbridge Probation Substance Abuse Treatment Center has 9 Priority One Posts that are manned by one correctional officer for 24 hours a day, 7 days a week.

Pre-Onsite Audit Phase

Prior to the onsite visit, the auditor contacted the PREA Compliance Manager to discuss the audit process and to set a tentative daily agenda and schedule for the onsite audit. The auditor requested the following information be provided the first day of the audit: daily population report, staff roster to include all departments; Resident roster by housing unit; listing of staff who perform risk assessments, list of medical staff; list of contractors and volunteers available during the audit; list of Residents with a PREA classification (identified through risk screening); list of lesbian, gay, bisexual, transgender, and intersex Residents; list of disabled (deaf, hard of hearing, blind, low vision, low cognitive skills) Residents, list of limited English proficient, Residents, list of allegations with investigation outcomes etc. This information was utilized to establish the interview schedules for the selection of Residents and staff to be interviewed random and specialized interviews.

Notice of Audit Posting and Timeline

The audit notice was posted September 28, 2021. The audit notice was posted in English and Spanish on colorful paper using a large font. The audit notices were placed throughout the facility, in places visible to all Residents, staff and visitors. Confirmation of revised audit notices was emailed to the auditor on September 28, 2021. Further verification of their placement was made through observations during the onsite review and conversations with Residents. The audit notices included a statement regarding confidentiality of Resident and staff correspondence with the auditor. No correspondences were received during this phase of the audit.

Pre-Audit Questionnaire (PAQ) and Supporting Documentation

The PAQ and supporting documentation was uploaded into the PREA Online Audit System. The auditor reviewed the PAQ, policy, procedures, and supporting documentation. Using the Auditor Compliance Tool and Checklist of Documentation, the auditor's initial analysis and review of the information, the auditor requested further documentation for clarification of several standards. Some of the information was provided electronically prior to the audit and the remaining documentation was provided during the on-site audit visit.

Requests of Facility Lists

Bainbridge RSAT provided the following information for interview selections and document sampling:

Complete Detainee Roster	An up-to-date roster was provided upon arrival.
Detainees with physical disabilities	0
Detainees with cognitive disabilities	0
Detainees who were LEP	0
Lesbian, Gay and Bisexual Detainees	0
Detainees in segregated housing	0
Detainees in isolation	0
Detainees who reported sexual abuse	0
Detainees who reported sexual victimization during risk screening	1
Complete Staff Roster	The staff roster and schedule was provided upon arrival to the facility.
Contractors	2
Volunteers	2
Grievances of sexual abuse and sexual harassment made during the 12 months preceding the audit.	0
Allegations of sexual abuse and sexual harassment made during the 12 months preceding the audit.	2
Detailed list of the number of sexual abuse/harassment allegations in the 12 months preceding the audit.	1 I/I Abuse (Unfounded) 1 I/I Harassment (Pending) 0 S/I Abuse 0 S/I Harassment
All hotline calls	0

External Contacts were made:

Just Detention International	Just Detention International reviewed their database for records and information reported and no information for the 12 months preceding the audit.
Community Based Organization	Lily Pad SANE Center 888.843.4565

Entrance briefing

On October 6, 2021 the entrance briefing was held with the Agency Assistant PREA Coordinator, Bennett Kight; Superintendent, Moses P. James; Assistant Superintendent, Carl Belin, (PREA Compliance Manager), Candice Brooken; Lead Nurse, Chistal Brown; LPC Holly Anne Wingate; Lead Counselor, Lachande Mackey; SGT, Sonya Sheffield; and Certified Auditor, Mable P. Wheeler. Introductions were made and the agenda for the onsite visit was discussed.

On October 6, 2021 the auditor conducted the site review accompanied by the Agency Assistant PREA Coordinator, and Assistant Superintendent (PREA Compliance Manager). After the site review, the auditor conducted staff and Resident interviews, all interviews were voluntary and conducted in privacy.

Site review

The auditor had access to, and observed, all areas of the facility. The auditor was provided a diagram of the physical plant during the pre-onsite phase of the audit and was thus familiar with the layout of the facility. The facility consists of nine (9) buildings which includes two (2) Resident housing units, zero (0) single housing units, zero (0) multiple occupancy cell housing units, eight (8) open bay dorm housing units, and eight (8) segregation/isolation cells. The facility designated capacity is (394). Population on the first of the on onsite audit was (300) for the center. The facility has a video monitoring system, responsible for security surveillance; cameras are strategically placed throughout the facility to provide security.

Processes and areas observed

The Auditor was not able to observe the intake process due to COVID 19 concerns and limited movement statewide. Grievance boxes are located on the housing unit. Grievance forms and writing utensils are available upon request.

The staff conducting the site review and auditor's discussion with Residents verified the privacy for showering, using toilet and changing clothes. Auditor was able to observe the locations of the video monitoring cameras. PREA posters with telephone numbers for reporting sexual abuse and sexual harassment are prominently placed in the housing units and common area. The auditor informally asked Residents about basic PREA facts during visit to housing units.

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Exit briefing

An exit briefing was held on October 7, 2021 with the Agency PREA Coordinator, Assistant PREA Coordinator, Superintendent, Assistant Superintendent, (PREA Compliance Manager), Lead Nurse, LPC, MHC, and the auditor to discuss audit findings.

Interviews Logistics Location and Privacy

All interviews were voluntary and privately conducted. Interviews were held in the conference room and offices within the Residents visitation area; these locations provided privacy and minimum disruption of daily activities and programming. The auditor received no communications from Residents or staff prior to onsite visit.

Selection Process

Twelve (12) direct care staff was interviewed using the random staff interview protocol. Twenty-six (26) random Residents were interviewed using the Residents interview questionnaire. There was one (0) Resident identified for targeted interview; zero (0) Residents with Cognitive Disabilities and zero (0) Residents with Physical Disabilities; zero (0) Residents who was Limited English Proficient; zero (0) Residents identified as transgender, two (2) Residents identified as gay/bisexual; one (1) Resident who disclosed prior sexual victimization during risk screening; and zero (0) Residents who reported sexual abuse; and zero (0) Residents in segregated housing.

Interviews Protocols:

Administrative and Agency Leadership	Number of Interviews
Agency Head	1 (prior interview)
Agency Statewide PREA Coordinator	1 (prior interview)
Agency Statewide Assistant PREA Coordinator	1 (prior interview)
Agency Contract Administrator	1 (prior interview)
SANE	1 (prior interview)
Specialized Staff	Number of Interviews
Superintendent	1
PREA Compliance Manager	1
Medical (contractor)	1
Mental Health (contractor)	1
Non-medical staff involved in Cross-Gender searches or Visual Body Searches	1
Human Resources	1
Intermediate or Higher-Level staff who conduct unannounced rounds	1
Staff who perform screening for Risk of Victimization and Abusiveness	1
Staff who supervise detainees in isolation	1
Retaliation Monitor	1
Investigator	1
Incident Review Team Member	1
Intake Staff	1
First Responder	1
Random Staff	12
Random Detainees	26
Targeted Detainee (Detainee who disclosed prior sexual victimization during risk screening).	1
Total Specialized Staff	
Total Random Staff	12
Total Random Detainees	26
Total Targeted Detainees	1
Total Interviews	

Records Review:

Type of Record	Number of Records Reviewed	
Personnel Files	25	
Volunteers Files	2	
Contractors Files	2	
Detainee Files	30	
Incidents Reports	2	
Investigation Files	2	
Inmate on Inmate Sexual Abuse	1	Pending
Inmate on Inmate Sexual Harassment	1	Unfounded
Staff on Inmate Sexual Abuse	0	NA
Staff on Inmate Sexual Harassment	0	NA

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.

Characteristics Related to PREA and Sexual Safety

Parent Agency	Georgia Department of Corrections
Facility Name	Bainbridge Residential Substance Abuse Treatment Facility
Facility Address	235 State Hospital Road, Bainbridge, GA 39817
Facility Designed Capacity	394
Population one day 1 of the audit	300
Average Daily Population	250
Age Range of Population	18-69
Average Length of Stay	9 Months
Security Level	Level I and Level II
Population Ethnicity	Multiethnic
Number of Staff	84
Number of Buildings	9
Multiple Detainee Living Units	2
Number of Open Bay/Dorms	8
Number of Segregation Cells	8
Video Monitoring System	Yes
Medical Onsite	Yes
Mental Health Onsite	Yes

Facility Operations

Physical Plant Description

The Bainbridge Residential Substance Abuse and Treatment Center (RSAT) is a substance abuse treatment facility housing up to 394 offenders who are 18 years old and above, sentenced by the State of Georgia to complete an in-house program. The program is a nine (9) month program that includes substance abuse counseling, substance abuse programming, mental health counseling, educational opportunities and case management counseling. Offenders assigned to this program have a history of substance abuse, factor resulting in their correctional supervision.

Residential Substance Abuse Programs were created to treat offenders who have a history of both substance abuse and mental health disorders. The agency has five (5) Residential Substance Abuse Treatment Programs throughout the state, one of which is in Southwest Georgia, Bainbridge.

This program is an intensive, highly structured residential therapeutic community comprised of peer groups and counselors. The community is responsible for helping offenders work together under the authority and supervision of staff. Programs incorporate process and psycho-educational groups, individual counseling, work details and vocational education. Offenders balance work with intensive individual and group counseling. Offenders are subject to random drug screening throughout the duration of the program.

Admission to the facility are under order of the court. They may have an assessed need as identified by the Need Generation Assessment or placement by professional override. They must have a minimum of 18-24 months left on their Tentative Parole Month, Parole Eligibility

Date, or probation supervision.

They will have unsuccessfully completed Aftercare or Day Reporting Center programs and may have been rearrested or reoffend associated with substance abuse after completing Aftercare or Day Reporting Programs.

Medical services at this program are provided through a contract with Augusta University. The clinic is open during normal duty hours; 6AM to 5:30PM, Monday through Thursday and on Friday from 6AM to 12 Noon. There is a medical doctor on call after regular working hours and security staff has complete authority to call 911 in case of emergency.

General Population Counselors provide case management for the offenders. There are General Population Counselors on duty Monday through Thursday 7AM to 5:30PM, excluding state holidays and one General Population Counselor Monday through Friday 8AM to 4:30 PM excluding state holidays. General population counselors conduct the victim/aggressor assessments when residents arrive at the facility.

There is one Mental Health Counselor available, Monday through Friday 8AM to 4:30PM and one available Monday through Friday 8AM to 4:30PM.

Educational services are provided by four (4) Teachers/Instructors. These services include GED, Adult Basic Education, and Literacy Remedial.

Housing:

Offenders are housed in E Building, consisting of four (4) open bay dorms. It is a general population dorm and houses 48 offenders in each dorm for a total capacity of 192 general population offenders. There is a control room capable of monitoring the E Building Dorms and controlling doors to the units. One officer is assigned to the control room, one officer for E-1 and E-2, and one officer for E-3, E-4 and E-5. E control is a non-gender specific priority one post, manned 24/7. The other two posts are priority one posts manned 24/7 as well to provide supervision of inmates. Cameras are in each of the four (4) dorms. E-5 serves as administrative segregation and has four administrative segregation beds.

F Building is a separate housing unit and consists of four (4) open bay dorms each with a capacity of 48 general population offenders. There are four (4) administrative segregation cells in F Building. Staffing is essentially the same in this building with one staff assigned to the control and two floor officers supervising the four dorms and four (4) administrative segregation beds. All posts are priority one posts meaning they must be manned 24/7. Video monitoring is in each of the four (4) dorms.

There are four (4) gender specific posts at the facility that are staffed by male staff only. Only two of these must be manned 24/7.

Site Review

The auditor, accompanied by the Assistant Superintendent and Assistant Statewide PREA Coordinator, conducted a complete site review of the entire facility and grounds. The facility is best described as a sprawling campus designed with 7 or 8 buildings spread apart from each other with grassy areas in the middle of the campus and on either side of the sidewalks leading to each building. The campus was previously a State Facility housing mental patients from Southwest Georgia and renovated to serve as a secure probation substance abuse center.

The administrative building houses offices for the Superintendent, Assistant Superintendent, other supportive functions offices and a large conference room. There are no cameras in the area. PREA Posters were posted throughout the administrative area. The Notice of PREA Audit was posted in the administrative building as well.

G Building is a large area housing facility programs staff and programs. G Building has no cameras. On entering the building one sees the Notice of PREA Audit and PREA Posters. The admin area of the building contains several offices with windows facilitating viewing inside the offices. The Spectrum File Room needs a mirror in the top right corner because the filing cabinets in the area block viewing and constitute a blind spot.

A long hall in G Building houses eight (8) offices, all with windows enabling viewing.

A Classroom door was observed with the door removed to provide complete viewing into the room from the hall.

G-140 is a classroom and a blind spot was observed. It is recommended that the facility install a mirror in the top right-hand corner of the room to cover the blind spot.

G building houses a huge auditorium used for graduations from the program. Both doors to the gym have windows enabling viewing inside the auditorium.

A hall on the left side contains offices contains office doors removed to enable viewing. Windows were observed in other offices.

There are two large building that serve as the living areas for four pods/dorms in one building and five (5) in the other building.

F Building is open bay dorm housing up to 48 detainees, double-bunked. On entering the building, the auditor observed a 360-degree mirror at the entrance. There is a DR Investigator's Office/Due Process, secretary's office, and chief of security office, all of which have windows in the doors to facilitate viewing. The building also houses a mechanical room, mop closet and barber shop. The mop closet has a solid door that remains locked. There are five dorms situated around a large control room. The position of the control room enables the

control room staff to view inside all the dorms. Inside F Dorm are four (4) segregation cells along a small hall and behind a solid door. The cells are single occupancy cells equipped with a toilet. The shower in this little unit has a small window in an otherwise solid door.

This area is staffed with one officer in the control room and one officer assigned to periodically monitor dorms F-1 and F-2 while the other officer is assigned to monitor F-3, F-4 and F-5.

Inside each open bay dorm there are four (4) single head showers separated by $\frac{3}{4}$ walls, each equipped with a shower curtain. There are also three (3) toilets, separated by $\frac{1}{2}$ walls for privacy.

PREA Posters and a Notice of PREA Audit were observed in the dorm.

There were three phones in the day room enabling inmates to anonymously contact the Georgia Department of Corrections PREA Unit to report sexual assault and sexual harassment.

An interviewed Correctional Office indicated they had received PREA Training each year during annual in-service training. Interviews with four (4) detainees confirmed they received PREA Information during intake and again during orientation and this information was given verbally, in writing and through the PREA Video. They also named multiple ways to report however they indicated they would probably just use the hotline to report.

F-2 Is configured the same as F-1. Four (4) detainees were informally interviewed. They indicated they had been trained in PREA, received information during intake and at orientation and they pointed out there were PREA Posters all over the building and campus.

F-3 Is configured the same as all the other dorms. An interview with seven (7) detainees confirmed they all knew how to report allegations of sexual assault and sexual harassment and that they would either to an officer or use the phone to call the PREA Unit (Hotline)

Five detainees were informally interviewed from F-4. F-4 is configured the same as the other dorms in this building. The detainees confirmed they were given PREA Information, including a PREA Pamphlet, during intake and a few days later, through an orientation conducted by the Assistant Superintendent. Detainees named ways to report allegations. They indicated they would report to staff, write a request, or call on the PREA Hotline.

E Building, in addition to housing a Sergeant's Office, houses a barbershop. E building is configured essentially the same as F except there is no half wall between the day room and the sleeping area. Showers and restroom as designed the same as those in F Building and each shower contained shower curtains. The segregation area was the same as

F Building. The auditor interviewed a detainee who was in segregation. The detainee was not in segregation as the result of being at risk of sexual abuse or as the result of sexual abuse. The detained explained he had been a fight. He understood PREA and had received that information during intake and orientation and said there were posters all over the unit and facility, The auditor visited each of the living units (dorms) and interviewed a total of fourteen (14) additional detainees, all of whom knew how to report sexual assaults and sexual harassment.

C Building houses a number of functions. The laundry is equipped with three commercial washers and four commercial dryers. Two mirrors were observed enabling viewing behind the washers. There was a blind spot in the corner between the washers and dryers. An office for the officer supervising the three inmates assigned to this detail, has windows to facilitate viewing in this relatively small area. One officer is assigned to the detail when the laundry is open.

Holding Cell/Intake – The ID Office has a window to facilitate viewing. The ID office has a counter for receiving detainees into the facility. Behind the counter and to the side is a huge board containing the IDs of each detainee assigned to each dorm. IDs are placed on hooks representing their dorm and bunk assignment. IDs have color codes to identify gang affiliation and designation as either a potential victim or potential aggressor. The auditor checked ten (10) beds to see if a potential victim was bunked in the double bunk with a potential aggressor. No victims were bunked with an aggressor. While detainees are waiting processing, they watch a streaming PREA Video that has closed captioning.

There is a shower in intake situated in such a manner that viewing cannot be seen because the shower head is around the corner out of view.

The barbershop in the ID area is simply a wide-open space with a barber chair.

A staff dining room is in this area as well. There is a window in the door to the dining room.

The clothing room, also in this area, has a blind spot around the corner and needs a mirror to cover the blind spot.

The C-2 Building has a mirror at the entrance. A number of functions occur in this area. This is the career center and staffed by a re-entry counselor who indicated her role is to provide information and classes on how to get a job and keep a job, work readiness and some computer skills. She indicated that detainees come to the career center the first three weeks before being placed on a detail at the facility.

There is a small library in the area which is wide open.

A warehouse containing property supplies has a mirror that enables viewing at a blind spot. There is also a window in the door.

The store has a window in the door. The store staff stated they carry a radio. There is no office assigned to this area and the store staff said she supervises three detainees on the AM and PM shifts. An informal interview the staff indicated she has received PREA Training twice in three months she has been employed.

The medical building houses all medical functions and a mental health staff office. All the multiple offices and rooms in this area had windows in them and the wide-open reception area has a moon mirror, facilitating viewing. The mental health office has a window as well.

B Building houses the dining room, with about 152 seats, is a large wide-open area supervised during "feed off" by several correctional officers, including the dorm officer and an officer assigned to the kitchen. The kitchen is typical of smaller There is a mirror at the serving line. The food service office has windows that also facilitate the staff viewing the detainees working in the kitchen. The Food Service Manager indicated there are about 13 detainees working on this detail on the two shifts. She indicated she and her staff are constantly moving around observing the work.

The facility was clean; buildings were configured with multiple halls going in several different directions. Offices consistently had windows in the doors to facilitate viewing. In some areas the doors to classes and storage rooms were removed to enable viewing. PREA Posters were observed in every area of this facility, including the front gate as were the Notices of PREA Audit.

The front gate staff and visitor's entrance contained a front control room/key issue room and reception area. Visitors must sign in and present a picture id and be cleared to enter the facility. A correctional officer is charged with searching visitor's belongings and having them go through a metal detector prior to be granted admission into the secured and fenced area of the campus. PREA Posters were observed in this area and the Notice of PREA Audit was also posted here.

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.

Number of standards exceeded:	2
Number of standards met:	43
Number of standards not met:	0

Standards Exceeded

Number of Standards Exceeded: 2

List of Standards Exceeded: 115.11; 115.87

Standards Met

Number of Standards Met: 43

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met:

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	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: Georgia Department of Corrections (GDC) Policy 208.6, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program; The Resident Handbook (PREA); PREA Pamphlets; PREA Acknowledgment Statements; Pre-Audit Questionnaire</p> <p>Interviews: Statewide PREA Coordinator; Assistant Statewide PREA Coordinator, PREA Compliance Manager</p> <p>Observations: Zero Tolerance Posters located throughout the facility; PREA Pamphlets posted throughout the facility. "See Something Say Something" Posters are also posted throughout the facility; Observation of intake Officer asked detainees what they knew about PREA after which she told the residents the following:</p> <p>Discussion of Policy and Documents Reviewed: Georgia Department of Corrections (GDC) Policy 208.6, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, is a comprehensive PREA Policy that not only details the agency's approach to prevention, detection, reporting and responding to allegations of sexual abuse and sexual harassment but also integrates this information in a manner that flows logically and is easily understood. The policy affirms that the Department will not tolerate any form of sexual abuse or sexual harassment of any offender. Policy states that the Department has a zero tolerance for all forms of sexual abuse, sexual harassment and sexual activity among inmates. It further indicates the purpose of the policy is to prevent all forms of sexual abuse, sexual harassment and sexual activity among inmates by implementing provisions of the PREA Standards to help prevent, detect and respond to sexual abuse in confinement facilities.</p> <p>It appears evident that the Georgia Department of Corrections takes sexual safety seriously. This is based on a number of factors. The GDC appointed a Director of Compliance who is ultimately responsible for the Department's compliance with the PREA Standards, the Americans with Disabilities Act and the American Correctional Association Standards.</p> <p>Additionally, the Department has appointed a statewide PREA Coordinator and an Assistant Agency PREA Coordinator with sufficient time and authority to develop, implement, and oversee the Department's efforts to comply with the PREA Standards in the GDC facilities. The Statewide PREA Coordinator has responsibility for the entire state. She is not just knowledgeable of PREA, but she brings to the table working experience.</p> <p>In adult facilities prior to her appointment. She has been responsible for ensuring that the prisons and facilities are in compliance with the PREA Standards and that they maintain compliance. The Coordinator serves as a resource for the GDC facilities and programs.</p> <p>Those visits are working visits during which she often sits with the facility's investigators and reviews each investigation of allegations of sexual abuse and sexual harassment. An interview with the PREA Coordinator confirmed that she has sufficient time with the assistance of her assistant PREA Coordinator, to perform her PREA related duties. The newly hired Assistant PREA Coordinator also has a number of years of experience of institutional work. An interview with the Assistant PREA Coordinator also indicated that he too is knowledgeable of PREA and having worked in a secure facility has a unique perspective of how to implement PREA in that setting.</p> <p>In addition to the Agency Compliance Director, Statewide PREA Coordinator and Assistant PREA Coordinator, who also has years of experience working in correctional facilities and who has an exceptional knowledge of PREA.</p> <p>The agency also has a PREA Analyst assigned to the PREA Unit. His job is to collect and analyze the data that is submitted to the PREA Unit, on a monthly basis, by each facility. This staff also receives the calls from inmates on the Department of Corrections PREA Hotline. He keeps excellent statistics for each facility and cumulatively for the agency that are used by the Department in analyzing issues related to PREA. The auditor relies on the PREA Analyst to provide reports on inmate/detainee calls to the PREA Hotline as well as reports on disabled inmates in facilities.</p> <p>Another indication of the Department's commitment to PREA was indicated in an interview with the Agency's Americans with Disabilities Act Coordinator. In an interview, she related the Department's efforts to provide inmates who are hearing impaired or limited English proficient with the tools they need to understand PREA. The Agency ADA Coordinator has had each facility identify a staff to be designated as the ADA Coordinator for their facility.</p> <p>This agency appears committed to sexual safety. Evidence to support that is their proactive approach described by the PREA Coordinator and the fact that they are working with Just Detention International and the Moss Group. The grant with Just Detention covers an array of services including seeing how offenders might be used to conduct PREA Classes; working with statewide advocate groups in recruiting advocates and through training the trainer; through trauma response training. The Moss Group reviewed the Agency PREA Policy provide.</p>

The agency appears to value training to assist in the agency's prevention efforts. The agency plans and provides additional training for Sexual Assault Response Team Members as well as ongoing training for PREA Compliance Managers. The Agency also requires all staff to complete, in addition to their regular PREA Training, the NIC Online Training Course, "Communicating Effectively with LGBTI Inmates." Sexual Assault Team Members attend training at least semi-annually and often complete the NIC on-line Specialized Training for Investigating Sexual Abuse in Confinement Settings, in addition to the specialized training for their respective fields; i.e., Medical and mental health. Healthcare staff attends training in Nursing Protocols.

This agency appears to be committed to sexual safety. Evidence of their proactive approach was described by the PREA Coordinator and included the fact that they have been working with Just Detention International on a variety of initiatives and projects. The agency provided documentation of their JDI PREA Demonstration Grant, including the Final Close-Out Report dated March 2, 2018. The grant included nine (9) GDC project pilot facilities. The initiatives included: 1) Promote broad-based culture shift within GDC through new staff training programs that comply with the PREA Standards and address each employee's role in preventing and responding to sexual abuse. This included assessing the cultures in the pilot facilities and then developing and providing training. 2) Develop a trauma-informed response to sexual assault; ensuring incarcerated survivors have access to the same quality of care that is available in the community. During this part of the project the JDI worked with the Georgia Network to End Sexual Assault GNESA in providing training to staff in providing trauma-informed response to inmates reporting sexual abuse, in building partnerships with community-based rape crisis centers and to provide training to the facility-based sexual assault response team members, ensuring a coordinated response to inmates reporting sexual abuse. This goal included objectives related to more training for staff and SARTs as well as securing written MOUs with rape crisis centers.

3) Develop PREA inmate education programs that address the needs of detainees with GDC's facilities. This included an assessment of existing inmate education curricula and materials, identifying inmate education delivery methods best suited for each of GDC's facility types and revising or developing new inmate education curricula and materials tailored to the needs of each facility type, and stabling a plan for delivering that education to new inmates and on an ongoing basis. 4) Enhance GDC's procedures regarding PREA standards and audit compliance.

Additionally, the Warden/Superintendent at each institution is charged with ensuring that all aspects of the agency's PREA Policy are implemented. To this end, they are required to develop a Local Procedure Directive for response to sexual allegations. The Directive reflects the institution's unique characteristics and specifies how each institution will respond to sexual allegations and the notification procedures followed for reports of sexual allegations. (Local Procedure Directive discussed in a later standard).

Wardens/Superintendents are also required to assign an Institutional PREA Compliance Manager, who also has sufficient time and authority to develop, implement and oversee the facility efforts to comply with the PREA Standards.

The PREA Compliance Manager is an experienced staff with multiple years with the Department, as well as a number of years of experience in the probation detention center. The Superintendent is an experienced corrections administrator who supports the compliance manager in implementing and maintaining the PREA standards and Georgia Department of Corrections PREA Standard Operating Procedures. His commitment to PREA and to Zero Tolerance was confirmed in interviews and reviewed memos to staff. In August 2017, the Superintendent, reminded all staff that Bainbridge RSAT has a zero tolerance toward all forms of sexual abuse, sexual harassment and any sex act among offenders.

All the prisons and community based correctional facilities have PREA Compliance Managers who relate to the PREA Coordinator. This is confirmed by interviews with the PREA Coordinator and the PREA Compliance Manager as well as reviewed Annual Reports and the Pre-Audit Questionnaire. The PREA Coordinator and Assistant PREA Coordinator provide training for the PREA Compliance Managers at least twice or more a year.

Zero Tolerance is reflected in multiple documents, including PREA Acknowledgment Statements for staff, contractors, volunteers and residents. Posters were observed in every area of the building, and in every living unit.

The Resident Handbook (PREA) asserts that the GDC fully supports the Prison Rape Elimination Act and is committed to a zero-tolerance policy against sexual violence.

Detainees, staff, contractors and volunteers are trained in the zero-tolerance policy. The facility provided Acknowledgment Statements confirming staff has been trained in PREA. The PREA Acknowledgment Statements for Employees and Unsupervised Contractors and Volunteers affirms that they have received training on the Department's Zero Tolerance Policy on Sexual Abuse and Sexual Harassment and that they have read to GDC Standard Operating Procedure 208.06, Sexually Abusive Behavior Prevention and Intervention Program. They also acknowledge that violation of the policy will result in disciplinary action, including termination or being banned from entering any correctional institution.

Discussion of Interviews: The PREA Compliance Manager is familiar with PREA and the PREA Standards. He easily described how he and the staff implement PREA and what actions they take to address any PREA related issues.

The interviewed Statewide PREA Coordinator and Assistant Statewide PREA Coordinator confirmed the Department's commitment to implementing PREA and improving the program on a continuous basis. Training for PREA compliance managers and Sexual Assault Response Teams were discussed as well. This training is provided and required several times a year or more.

The interviewed Agency ADA Coordinator related the Department's efforts to ensure detainees and inmates are provided PREA related information in a format they can understand and to enable disabled and limited English proficient detainees to report allegations of sexual abuse or sexual harassment.

Interviewed staff was aware of the zero-tolerance policy and agency's zero tolerance for any form of sexual abuse, sexual assault, sexual harassment or retaliation. All of them stated they are trained to and required to report all allegations of sexual abuse or sexual harassment suspicions. According to the interviewed staff, allegations and reports, regardless of the source, are required to be documented and investigated. They indicated they would have to document a verbal or anonymous report or a suspicion prior to the end of their shift and following a verbal report to their immediate supervisor.

Randomly selected interviewed detainees and targeted detainees indicated they have been trained and are aware the facility and GDC has a zero tolerance for all forms of sexual activity. They indicated that information is provided on intake and during orientation and is located on posters throughout the facility. They also indicated they have been provided that information in every facility they have been in. Detainees stated inmates have received PREA information every time they transfer from one facility to another. They also pointed out multiple posters located throughout the facility explaining zero tolerance and how to report.

This standard is rated "exceeds" because of the agency and this facility's commitment to zero tolerance and to PREA. The facility has had no allegations of either sexual abuse or sexual harassment during the past twelve months and this was confirmed by reviewing the monthly PREA Report sent to the Agency's PREA Unit, interviews with specialized and randomly selected staff, a "hotline" report documenting there was one call from this facility during the past 12 months, review of all the grievances filed during the past 12 months and all of the incident reports for the past 12 months.

The Department has designated a Statewide Compliance Director with overall responsibility for implementing PREA. Additionally, the Department has designated a Statewide PREA Coordinator to oversee the implementation of PREA in the GDC facilities. In addition to these proactive measures, yet another staff has been designated as the Agency's Assistant PREA Coordinator. Observations of the work the Statewide PREA Coordinator convinced the auditor that she is "hands on" and works with her facilities by monitoring and providing technical assistance. She was very knowledgeable of what was going on in her facilities. Too, either the PREA Coordinator or Assistant Statewide PREA Coordinator makes her/him available throughout the on-site audits to provide additional information and/or clarification when needed. GDC has also provided the PREA Unit the position of "analyst" who collects data from monthly reports sent to the PREA Unit. Additionally, he provides the auditor a report of every call to the hotline in the past 12 months as well as reports of inmates who are disabled and a report of how inmates identify and whether they report or disclosed prior victimization.

The American with Disabilities Coordinator indicated the agency is committed to providing translation services for disabled and limited English proficient detainees. The Superintendent demonstrated a commitment to PREA by designating an experienced staff person as PREA Compliance Manager. This staff has a position within the facility's management structure to ensure that PREA is implemented. He has the complete support of the Superintendent and the support of the PREA Coordinator and Assistant PREA Coordinator. Zero Tolerance PREA Related posters are posted throughout the facility. PREA Acknowledgement Forms reiterate zero tolerance. Detainees are informed of the Zero Tolerance policy during orientation and are provided brochures are also provided during intake.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Auditor Overall Determination: Meets Standard Auditor Discussion</p> <p>Policy and Document Review: Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 2; Two (2) Agency Contracts; Pre-Audi Questionnaire</p> <p>Interview: Agency Contractor Administrator</p> <p>Discussion of Policy and Documents Reviewed: Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 2, requires the Department to ensure that contracts for the confinement of its inmates with private agencies or other entities, including governmental agencies, includes in any new contract or contract renewal the entity's obligation to adopt and comply with the Any new contract or contract renewal shall provide for Department contract monitoring to ensure that the contractor is complying with the PREA Standards.</p> <p>The Bainbridge RSAT Probation Detention Center does not contract for the confinement of offenders. This was confirmed through interviews with the PREA Coordinator, Superintendent, PREA Compliance Manager, and the reviewed Pre-Audit Questionnaire.</p> <p>The Agency PREA Coordinator provided the auditor two contracts the agency promulgated for the confinement of inmates by a county prison and a private vendor. Both contracts contained requirements for the contactor to comply with PREA and to acknowledge that the Georgia GDC has the right to monitor for compliance.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: Bainbridge RSAT Probation Detention Center Pre-Audit Questionnaire; Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 3, Reviewed Comprehensive Staffing Plan for 2019 and 2020; Diagrams of the entire prison; Diagrams of camera locations; Log Book pages documenting unannounced rounds; Shift Rosters; Shift Reports</p> <p>Interviews: Superintendent, PREA Coordinator, PREA Compliance Manager</p> <p>Policy and Document Review: The reviewed Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 3, requires each facility to develop, 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 inmates against sexual abuse. Facilities are also required to document and justify all deviations on the Daily Post Roster.</p> <p>Annually, the facility, in consultation with the Department's PREA Coordinator, assesses, determines and documents whether adjustments are needed to the established staffing plan and deployment of video monitoring systems. .Additionally, policy requires unannounced rounds by supervisory staff with the intent of identifying and deterring sexual abuse and sexual harassment every week, including all shifts and of all areas. These rounds are documented in area logbooks and staff are prohibited from alerting other staff of the rounds. Duty Officers are required to conduct unannounced rounds and these rounds are required to be documented in the Duty Officer Logbook.</p> <p>Shift rosters confirmed the minimum staffing required. All priority one posts were staffed as required without deviations. Bainbridge PSATC has 6 "Priority One Post". The posts are manned by correctional officers twenty-four hours a day, seven days a week. Officers assigned will remain stationed at these posts until they are relieved by another officer or relieved by the immediate supervisor.</p> <p>The identified "Priority one posts at Bainbridge PSATC are OIC; 1 Supervisor Front Entry 1 Officer E- Building 2 Officer F-Building 2 Officer</p> <p>Staffing Plan Review: The staffing plan for the Bainbridge RSAT Probation Detention Center is addressed in their local operating procedure. PREA Standard 115.13, Staffing Plan. The staffing plan format provides a clear picture of the agencies staffing levels as well as the deployment of video monitoring to supplement staff supervision and unannounced PREA rounds to deter sexual activity. The staffing plan is predicated upon a maximum population of up to 394. There are eight housing units, designed in open bay style, with all of them configured in the same manner.</p> <p>The plan provides for a total of 100 total staff. Security Staff including the following:</p> <p>Georgia Department of Correction Staff Security Staff- 49 total</p> <p>1 Superintendent 1 Assistant Superintendent 1 Chief of Security/Lieutenant 5 Sergeants 41 Correctional Officers</p> <p>Administrative Staff-4 total 1 Admin Asst. Supervisor 1 Financial OPS 1 Operations Analyst 1 Proc, Supply, Warehouse Tech</p> <p>Food Service Staff- 4 total 1 Food Service Operation Spec 3 Food Service Operation Workers</p>

Education Staff- 2 total
2 Teaching & Inst Spec

Counseling Services - 4 total
1 Assistant Superintendent
2 Behavior Health Counselors
1 Clerks

Store Operations - 0 total
0 Supply/Inv./Warehouse Worker

Plant Operations Maintenance - 4 total
Bldg./Construction Trades Spec(Supervisor)
Bldg./Construction Trades Spec

Contract Employees-17 total
1. Spectrum Health Systems
1 Program Director
2 Clinical Supervisors
12 Substance Counselors
2 Administrative Assistants

Augusta University- 4 total
2 Registered Nurse
2 Licensed Practical Nurse

In consideration of the physical layout of the facility, the staffing plan provides for the following:

The Administrative Building consists of 12 offices, one Conference room and one Mailroom. These offices are non-relieved Monday through Friday 7:00am until 5:30pm. (excluding state Holidays). There are no cameras in this area; however, plans have been made to install cameras in the near future. Offenders are utilized as needed for janitorial duties and are under limited supervision.

Front Entry Building/Front Armory (Outside Perimeter): Highly restricted area with offender presence prohibited, requiring daily checks by Officer in Command. Staffed by 1 non gender specific Correctional Officer 24/7 requiring relief. Two cameras covering area monitored in Front Entry Officer 24/7.

I.D/Intake/Property: One Sergeant and one non gender specific Correctional Officer. The area is in operation Monday through Thursday from 7:00 am – 5:30pm and Friday 7:00am until 12:30pm. Intakes arrive on Mondays and Tuesdays as needed to maintain full capacity with staff being assigned to process the new intake. Additionally, the assigned correctional officer is responsible for the laundering and maintenance of detainee personal property upon intake and discharge of detainees to and from the program. Detainees are utilized to perform general cleaning details under limited supervision. There are no cameras in this area.

Mailroom: One non gender specific Correctional Officer. The area is in operation Monday through Thursday from 7:00 am – 5:30pm and Friday 7:00am until 12:30pm. Detainees are not allowed at any time in the detainee mailroom.

Laundry: One non relieved (non-gender specific) Priority Two (2) Post Correctional Officer assigned during Operation. The laundry is operated on Monday through Thursday from 6:00am until 4:30pm. The Offenders assigned to this detail are 2 to 4 and are under constant supervision. No camera coverage.

Each dorm houses 48 general population detainees for a total capacity of 192. There is a total of 4 Administrative/Segregation beds in F-Building (F-5) giving F-Building a maximum capacity of 196 detainees. There are three Priority One post assigned to F- building (F-Control Post, F-1 & F-2 Post, and F-3 & F-4 & F-5 Post).

F-Control is a non-gender specific, relieved Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor. Library/Detainee Store/Detainee Clothing (C-2 Building):

Library: The detainee Library is open for usage on an as needed basis and every Friday between the hours of 0900 hours- 1100 hours and from 1300 hours- 1500 hours. It is supervised by one Librarian and two Library aides. Security personnel are assigned as needed during library hours. No camera coverage.

Detainee Store: Two 29 hour/week, non-relieved, Part time Store Clerks work Monday through Thursday from 6:00am until 4:30pm. Offenders store is routinely processed Monday through Thursday between the hours of 8:00am and 4:00pm. The

offender details consists 2 morning aides and 2 evening aides and are under constant supervision by assigned staff. No camera monitoring available.

Detainee Clothing and Supply: 1 warehouse supervisor and three detainee warehouse aides work Monday through Thursday from 6:30am until 4:30pm. This detainee work detail works under constant and immediate supervised at all times while in this area. No camera coverage inside this warehouse.

Medical/Counseling (GP & MH) (C-3 Building):

Building houses all of the Medical and GDC Counseling needs of the Bainbridge PSATC facility. Detainees are utilized on a daily basis to perform general cleaning duties during the mornings and afternoons and are receive limited supervision during those times. There are currently no cameras in the Medical/Counseling (C-3 Building) area.

Medical: Medical Section is staffed by four (4) nurses (2 RN's and 2 LPN's) provide coverage for the facility from Monday through Thursday from 6:00am until 5:30pm (excluding state holidays) and on Friday from 6:00 am – 12:00 pm. There is an on-call doctor list to be contacted after regular working hours as situations arise that may need medical attention and Security Supervisors are granted the authority to call 911 in case of emergency.

General Population Counseling: Two (2) non-relieved General Population counselors Monday through Thursday from 7:00am until 5:30pm (excluding state holidays) and one non-relieved General Population Counselor Monday through Friday 8:00am until 4:30pm (excluding state holidays)

Mental Health: One non-relieved Mental Health counselor Monday through Thursday from 7:00am until 5:30pm (excluding state holidays) and one non-relieved Mental Health Counselor Monday through Friday 8:00am until 4:30pm (excluding state holidays)

6) Food Service/Education (B-Building):

A) Food Service:

One non relieved Food Service Manager will work Monday through Friday from 7:00am until 3:30pm (excluding holidays). Five (5) relieved Food Service Supervisors work seven days a week from 2:30 am until 1 pm and from 10:00 am until 8:30 pm. Operational hours are Sunday through Saturday from 5:00 AM until 8:30 PM (excluding state holidays. The detainee detail consists of 12 to 14 detainees working during hours of operations under constant supervision by assigned staff. There are no cameras in this area.

Food Service is a Priority 2 Post requiring one relieved gender specific correctional working in the area while offender meals are prepared and being served. Seven days a week Offenders are served breakfast daily at 5:00am, Lunch is served Monday through Thursday at 12:00pm (excluding state holidays). Dinner is served daily at 4:00pm. The dining halls will seat 120 Offenders and are under constant supervision.

Education Building: Four (4) non- relieved Teaching & Inst. Spec (excluding state holidays). The area routinely has an offender presence of 90-120 during the hours of operation under constant supervision by assigned staff, with the Correctional Officer making frequent rounds as needed. No camera coverage.

Visitation (Multipurpose): Visitation is in operation each Saturday, Sunday and all state holidays from 9:00am until 3:00pm. This is a non- gender specific. The visitation area is also utilized for programming and religious services Sunday through Sunday between the hours of 8:00am until 4:00pm. Camera coverage: two portable cameras are used to monitor visitation, but removed following visitation process.

E Building is a detainee housing unit which consists of 4 open bay dorms (E-1, E-2, E-3, and E-4) for general population detainees. Each dorm houses 48 general population detainees for a total capacity of 192 general population beds detainees. There is a total of 4 Administrative/Segregation beds in E-Building (E-5) giving E-Building a maximum capacity of 196 detainees. There are three Priority One post assigned to E- building (E-Control Post, E-1 & E-2 Post, and E-3 & E-4 & E-5 Post).

E-Control is a non-gender specific, relieved Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor.

E-1 and E-2 Post (covered by one correctional officer) is a relieved non gender specific Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor. The Officers assigned to this post are required to make frequent checks not to exceed 30 minute intervals.

E-3, E-4, and E-5 Post is a relieved gender specific Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor. The Officers assigned to this post are required to make frequent checks not to exceed 30-minute intervals.

There are two cameras in each of the four dorms for a total of 8 cameras in E-Building and are all monitored from the E-

Control room Officer. This camera system is currently inoperable and there is a current plan in place to replace the current camera monitoring system in this dormitory and to add additional monitoring capabilities. There are no cameras in E-5 (Administrative/Segregation).

F-Building is a detainee housing unit which consists of 4 open bay dorms (F-1, F-2, F-3, and F-4) for F-1 and F-2 Post (covered by one correctional officer) is a relieved non gender specific Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor. The Officers assigned to this post are required to make frequent checks not to exceed 30 minute intervals.

F-3, F-4, and F-5 Post is a relieved gender specific Priority One Post requiring 24/7 assignment. The officer assigned to this post will remain at this post until he/she is relieved or instructed to abandon the post by the immediate supervisor. The Officers assigned to this post are required to make frequent checks not to exceed 30 minute intervals.

There are two cameras in each of the four dorms for a total of 8 cameras in F-Building and are all monitored from the F-Control room Officer. This camera system is currently inoperable and there is a current plan in place to replace the current camera monitoring system in this dormitory and to add additional monitoring capabilities. There are no cameras in F-5 (Administrative/Segregation).

The Bainbridge PSATC Programs Building (G- Building) houses the Correctional recovery Academy. It is staffed by One Program Manager, 2 Clinical Supervisors, 15 Substance Abuse Counselors, and 2 Administrative Assistants. One relieved non gender specific Correctional Officer is assigned to this post. This is a Priority Two (2) security post requiring officer assignment from 7:30am – 3:30pm Monday – Thursday. The Officer is required to make frequent classroom checks not to exceed 30 minute intervals. The Programs Building carries a maximum capacity of 192 detainees in the mornings and 192 detainees in the afternoon hours.

One non-relieved Bldg./Const. Trades Spec (Supervisor) and three General Trades Craftsmen is assigned Monday through Thursday 6:30am until 5:00pm. The offender detail assigned to the maintenance detail consists of no fewer than 3 and no more than 4 Offenders per craftsman working as needed. The maintenance detail works throughout the institution and is under constant supervision by the General Trades staff member.

Unannounced PREA Rounds are discussed in the Staffing Plan. The plan asserts that all supervisory staff conducts unannounced PREA rounds. These include Sergeants, Chief of Security, Assistant Superintendent and Superintendent. The plan requires Sergeants to conduct three (3) unannounced PREA rounds and to document them in the area logbook. Duty officers are required to perform one unannounced PREA round. Additional PREA rounds are to be conducted weekly by the Superintendent, Assistant Superintendent, Duty Officers, and Chief of Security and to document them in the area logbooks.

Log books, document unannounced PREA rounds at the facility. These were also confirmed by interviews with staff.

Discussion of Interviews: Interviews with the PREA Compliance Manager confirmed the staffing plan is developed based on the staffing allocated by the State GDC. All the items required by the PREA Standards are considered. The staffing plan is developed based on a number of factors, including the PREA Standards. Consideration is made with regard to the detainee population, the priority one posts, consideration of posts that are gender specific. The PREA Compliance Manager stated priority one posts are covered 24/7. Interview with the Superintendent indicated he and his staff are committed to a safe environment. The facility attempts to remain fully staffed according to the Superintendent.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: Georgia Department of Corrections PREA Policy, Bainbridge RSAT Pre-Audit Questionnaire, GDC Website</p> <p>Interviews: Superintendent</p> <p>Policy Review: The Georgia Department of Corrections PREA Policy requires that youthful offenders are sight and sound separated from adults.</p> <p>Document Reviews: The Pre-Audit Questionnaire documented that youthful offenders are not housed at Bainbridge RSAT Facility. Information provided related to the Mission of Al Burrus Prison is included on their website.</p> <p>Discussion of Interviews: The Superintendent affirmed that the Bainbridge RSAT does not house youthful inmates.</p> <p>Observations: Youthful offenders were not observed during a tour of the entire facility. Nor were youthful offenders among the randomly selected inmates who were interviewed.</p>

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1474 365">Policies and Documents Reviewed: Georgia Department of Corrections (GDC) Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program; GDC Policy 226.01, Searches, 1.d; Training Module for In-Service Training for 2021; Pre-Audit Questionnaire; Reports from the PREA Analyst</p> <p data-bbox="244 396 852 423">Interviews: Random staff, Specialized Staff, Random Inmates</p> <p data-bbox="244 454 1461 580">Policy Review: Department of Corrections (DOC) Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, prohibits cross-gender strip or visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The reviewed Pre-Audit Questionnaire and interviews with staff and inmates confirmed that there have been no cross-gender strip or body cavity searches during the past twelve months.</p> <p data-bbox="244 611 1485 770">GDC Policy 226.01, Searches, 1.d., requires that strip search of females will be conducted by female correctional officers and that males will be strip searched by male correctional officers absent exigent circumstances (escapes, riot, etc.) and only if a same gender officer is not available. Cross gender searches in exigent circumstances are required to be conducted with dignity and professionalism. Search policy requires in the event of exigent circumstances searches of the opposite gender conducted under exigent circumstances must be documented on an incident report.</p> <p data-bbox="244 801 1477 927">Paragraph 2. Frisk or Pat Search, requires the pat search will be conducted, when possible, by an officer of the same sex. However, male offenders may be frisk or pat searched by both male and female security staff. Instructions for conducting pat searches, including using the back of the hand and edge of the hand. Although there are no females at this facility, policy prohibits male staff from conducting pat searches of female inmates absent exigent circumstances that are documented.</p> <p data-bbox="244 958 1437 1019">Policy prohibits staff from searching a transgender inmate for the sole purpose of determining the inmate's genital status. Staff are also required by policy to search transgender and intersex inmates in a professional and respectful manner.</p> <p data-bbox="244 1050 1474 1142">GDOC requires facilities to implement procedures enabling 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.</p> <p data-bbox="244 1173 1442 1234">Policy requires that inmates should shower, perform bodily functions and change clothing in designated areas. Interviews with staff confirmed residents can shower, perform bodily functions and change clothing without being viewed by staff.</p> <p data-bbox="244 1265 1485 1458">An additional measure required by policy is for staff of the opposite gender to announce their presence when entering an inmate housing unit. Notices are prominently posted advising inmates that female staff routinely work and visit inmate housing areas. Interviewed staff, randomly selected as well as specialized staff, affirmed that staff consistently announces their presence before entering the housing area. Signs are also located in each dorm and in other areas stating the male staff routinely works these areas and that video surveillance is occurring in each dorm. During the tour the auditor did not observe cameras in any restroom area or in any cell.</p> <p data-bbox="244 1489 1458 1615">Documents Review: The Pre-Audit Questionnaire documented that there has been no cross- gender searches, either strip, body cavity or pat searches during the reporting period. The reviewed training module reminds them that inmates are less resistant when staff treats them with dignity. Staff are trained to conduct cross-gender searches in exigent circumstances. This was confirmed by interviews with staff and the training officer.</p> <p data-bbox="244 1646 1477 1738">Discussion of Interviews: The Bainbridge RSAT houses only male detainees. Interviewed random staff confirmed that female staff are not permitted to conduct a strip search of a male detainee. All the staff indicated they have been trained to conduct cross-gender pat searches.</p> <p data-bbox="244 1769 1461 1861">Female staff may conduct a pat search only if a male is not available. Search training is conducted at the facility, at Basic Correctional Officer Training for all new employees and in annual in- service and during shift briefing. Staff also stated they have been trained to search a transgender and intersex inmate in a professional and respectful manner.</p> <p data-bbox="244 1892 1490 2051">Staff are trained to conduct searches in a manner designed to lessen the chances of the staff receiving an allegation from a resident. Interviewed staff reported they have been trained to conduct cross-gender pat searches. The reviewed training module for Annual In-Service, reminds staff that security staff must conduct searches in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. Staff are instructed that female staff may conduct strip and body cavity searches of male inmates only in exigent circumstances that are documented on an incident report.</p> <p data-bbox="244 2083 1469 2143">Staff indicated, in their interviews, that staff of the opposite gender consistently announces their presence when entering the living unit. The interviewed detainees stated that female staff announces their presence when entering the living unit.</p>

Interviewed residents confirmed that detainees have privacy while showering and that detainees are never naked in full view of staff while changing clothes, showering or using the restroom. Detainees stated they have shower curtains and are not viewed in the showers.

Observations: The auditor did not see any female staff conducting any form of search during the onsite portion of the audit.

115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 6; Contract with Language Line Solutions and Lionbridge; and PREA Brochures in English and Spanish; Instructions for Accessing Language Line Solutions and Lionbridge; Georgia Department of Administrative Services Statewide Contracts for Provision of American Sign Language Line Solutions and Lionbridge for Hearing; Training Rosters for Language Line Solutions and Lionbridge; Interpretive Services</p> <p>Interviews: Georgia Department of Corrections ADA Coordinator, Random Staff, Random Residents</p> <p>Observations: Posting of PREA Brochures in English and Spanish; Dialing instructions for Reporting</p> <p>Policy and Document Review: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 6, Inmates with disabilities and inmates who are limited English proficient, requires the local PREA Compliance Manager to ensure that appropriate resources are made available to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. It also prohibits the facility from relying on inmate interpreters, readers or other types of inmate assistants except in exigent circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first response duties or the investigation of the inmate's allegation.</p> <p>The facility has access to Language Line Solutions and Lionbridge via a contract through Georgia's Department of Administrative Services to provide interpretive services for disabled and limited English proficient residents in making an allegation of sexual abuse. The Agency provided Statewide Contracts (Georgia Department of Administrative Services) that provide access to interpreters for American Sign Language Line Solutions and Lionbridge. Instructions for accessing these services are included. The auditor reviewed the PREA Brochures in both Spanish and English. The PREA Video is also available in Spanish.</p> <p>The auditor reviewed a training roster documenting staff have been trained in how to access Language Line Solutions and Lionbridge.</p> <p>Discussion of Interviews: The auditor conducted a previous telephone interview with the Agency ADA Coordinator. According to the Coordinator if the facility had a limited English proficient Resident needing translation services the facility has access to Language Line Solutions and Lionbridge (866.874.3974), and if on-site interpreters were needed she would arrange that. She also affirmed the availability of translators or interpreters for the hearing impaired via statewide contracts and indicated she would, if called, make the contacts to provide signing and any other translation services needed.</p> <p>Interviews with staff stated they would not rely on another Resident to interpret for another Resident. A few mentioned they would use Language Line Solutions and Lionbridge. Most said they would rely on another staff to interpret in Spanish.</p> <p>There were no limited English proficient Residents at the facility during the onsite portion of the audit There were no Residents with limited reading skills or who were deaf or visually impaired. This was confirmed through interviews with staff and Residents.</p>

115.17	Hiring and promotion decisions
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1473 497">Policy and Documents Review: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 7, Hiring and Promotion Decisions; GDC Applicant Verification form; Form SOP IV00312, Attachment 1), to a Criminal Background Check and a Driver History Consent; "Georgia Department of Corrections, Professional Reference Check, IV003- 0001, Attachment 5; Georgia Department of Corrections Policy, 104.09, Filling A Vacancy; Reviewed Applicant Verification Forms; Reviewed Background checks for newly hired employees; promoted staff; Regular Employees Annual Background Checks; and contractors; Integrity Test Results</p> <p data-bbox="244 528 544 555">Interviews: Human Resources</p> <p data-bbox="244 586 759 613">Observations: None that applicable to this standard.</p> <p data-bbox="244 645 1473 1137">Policy Review: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 7, Hiring and Promotion Decisions, complies with the PREA Standards. DOC does not hire or promote anyone or contract for services with 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 defined in 42USC 1997; 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 who has been civilly or administratively adjudicated to have engaged in the activity described in the above. Too, policy requires the Department to consider 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 inmates. Prior to hiring someone, the PREA Questions, asking prospective applicants the three PREA Questions, is required. GDC Policy 104.09, Filling a Vacancy, Paragraph I. Hiring and Promotion, 3. Requires that before hiring anyone who may have contact with offenders, GDC will perform a criminal background check and 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 any allegation of sexual abuse. Verification of that check must be documented on the GDC Professional Reference Check.</p> <p data-bbox="244 1169 1485 1393">Criminal History Record Checks are conducted on all employees prior to hire and every 5 years. Officers must qualify with their weapons annually and prior to that annual qualification another background check is conducted. Criminal History Record Checks are conducted prior to enlisting the services of any contractor who may have contact with inmates. Staff also have an affirmative duty to report and disclose any such misconduct. GDC Policy 208.06 requires in Paragraph e. that material omissions regarding misconduct or the provision of materially false information will be grounds for termination. The agency's PREA Coordinator requested, as a best practice, that the facilities conduct annual background checks of all employees to ensure that a five-year check did not fall through the cracks.</p> <p data-bbox="244 1438 1473 1527">As part of the interview process potential employees and employees being promoted; applicants are asked about any prior histories that may have involved PREA related issues prior to hire and approval to provide services. Human Resources staff related that the PREA Questions are given to applicants and required to be completed.</p> <p data-bbox="244 1559 1473 1715">GDC requires applicants to disclose any disciplinary history involving substantiated allegations of sexual abuse and goes on to tell the applicant that GDC requires supporting documentation must be obtained prior to the applicant being hired. Applicants are told to inform the committee at this time if they "have anything against them." The Clerk II questions asks, "What is PREA?" and asks if the applicant has ever had a substantiated claim of sexual misconduct and asks if the applicant is aware they must disclose any substantiated claims about sexual misconduct.</p> <p data-bbox="244 1747 1409 1774">GDC policy requires applicants to disclose any disciplinary history involving substantiated allegations of sexual abuse.</p> <p data-bbox="244 1805 1082 1832">The hiring process at the Bainbridge RSAT is as follows (according to the HR staff):</p> <ul data-bbox="244 1863 1082 2123" style="list-style-type: none"> <li data-bbox="244 1863 624 1890">· Applicant is called in for an interview. <li data-bbox="244 1921 695 1948">· Committee selects the top three candidates. <li data-bbox="244 1980 1070 2007">· Background checks conducted on these prior to interview with the Superintendent. <li data-bbox="244 2038 751 2065">· Selected applicants take the on-line Integrity Test. <li data-bbox="244 2096 1050 2123">· A check of all social media associated with the potential employee is conducted.

- Applicant completes the Applicant Verification Form affirming the PREA related questions.
- Professional References are checked.
- Electronic Fingerprints are taken and submitted.

Note: The background check through the NCIC/GCIC has already been conducted.

For promotions, the HR staff stated the top three selected by the interview panel will have another background check completed and another Applicant Verification Form completed documenting their responses to the PREA related questions once again.

Background checks are conducted annually on all employees and contractors.

Volunteer background checks are completed at the state level and badges are issued from there. Volunteers with badges are admitted to the facility. Badges document the volunteer has completed all the background checks and training to be a volunteer.

100% of the reviewed new hire personnel files contained the following:

- PREA Acknowledgment Statement
- NCIC/GCIC Background Check
- Applicant Verification Forms
- Professional Reference Checks
- Integrity Test
- Social Media Check

Promoted staff personnel files contained the required background checks.

One hundred percent of the regular employee files contained the background checks and PREA Acknowledgment Statements.

One hundred percent of reviewed contractor files contained PREA Acknowledgement Statements and Background Checks.

Document Review: The auditor reviewed documentation to indicate that background checks were completed staff and contractors.

In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks: 12

In examining the personnel files for the newly hired staff, the auditor confirmed each file contained the PREA Questions asked of applicants, Professional References, when applicable, PREA Acknowledgment Statements, and background checks, including fingerprint checks and driver's history. The PREA Questions are documented on the GDC Form, Applicant Verification. The form affirms that the GDC must adhere to the United States Department of Justice Final Rule on the "National Standards to Prevent, Detect, and Respond to Prison Rape Under the Prison Rape Elimination Act Standards. It then asserts that GDC may not hire or promote anyone who may have contact with inmates, residents or offenders under supervision who answer "yes" to any of the PREA related questions. These questions were: 1) have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution? 2) Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse? And 3) Have you ever been civilly or adjudicated to have engaged in the activities described?

The GDOC Applicant Verification form contains an acknowledgement that the applicant understands that if they do become subject to those prohibitions in their current or subsequent positions involving contact with persons in confinement or under supervision, they have an affirmative duty to report that within 24 hours. They also are acknowledging that if they become involved in such activity, they are subject to termination and if they falsely certify their eligibility for employment, they are subject to termination or disqualification for employment for this falsification.

In addition to the PREA questions asked of applicants prior to hire and completed background checks, the Human Resource Staff attempt to secure information from former employees related to the applicant. The form entitled, "Georgia Department of Corrections, Professional Reference Check, IV003-0001, and Attachment 5. After advising the former employer about the requirements to conduct background checks, the employer is asked to answer the following:

- 1) Are you aware of your employee of being involved in any allegation of sexual abuse that was found to be true or resigning

during a pending investigation of any allegation of sexual abuse of sexual abuse before the investigation was finished?

Multiple Professional Reference

Checks were reviewed by the auditor confirming the attempt by the facility to inquire about an applicant's involvement in sexual abuse or resigning during a pending investigation.

The agency now requires prospective employees to take an on-line "Integrity Test" designed to determine a potential employee's responses to ethical and moral questions based on presented situations presented to the applicant. Additionally, a part of the hiring process includes "social media" checks as well.

Volunteers are processed through either the Agency headquarters or at one of the GDC Regional Offices. The volunteer is background checked there as well. Background Checks were documented, currently all Volunteer services have been restricted due to Covid 19 concerns.

GDC Policy 208.06, Paragraph d, requires that unless prohibited by law, the Department will 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

If the employee violates an agency policy related to PREA, the employee will be subject to termination and prosecution. The GDC maintains, in all its facilities, a bulletin board called the "Wall of Shame" and photos of former employees who were arrested and/or terminated for violating their oath of office, brought in contraband or who engaged in sexual misconduct with an inmate.

Discussion of Interviews: The Human Resources staff was very knowledgeable of the hiring and background check process and is organized and maintains the required documentation in an easily accessible manner. Interviews with the Human Resources staff indicated that all persons selected for employment or to provide services at the prison must consent in writing (Form SOP IV00312, Attachment 1), to a Criminal Background Check and a Driver History Consent to be conducted prior to officially hiring someone. The manager also stated that all newly hired staff have background checks that include Fingerprints. She also indicated these checks are conducted annually on all staff whether they are security officers or not.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: Pre-Audit Questionnaire; Department of Corrections Policy 208.6, Prisons Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A, Prevention Planning, Paragraph 8</p> <p>Interviews: Superintendent, PREA Compliance Manager, and Agency Head</p> <p>Observations: Viewed additional cameras during the onsite position of the audit.</p> <p>Policy Review: Department of Corrections Policy 208.6, Prisons Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A, Prevention Planning, Paragraph 8, requires all new or existing facility designs and modifications and upgrades of technology will include consideration of how it could enhance the Department's ability to protect inmates against sexual abuse. The PREA Coordinator must be consulted in the planning process. The Pre-Audit Questionnaire indicated there were no modifications to the existing facility. It did reflect there were additional cameras added to the facility during the past twelve months.</p> <p>Document Review: The Pre-Audit Questionnaire documented that there have been no modifications to the facility in the past twelve months or since the last PREA Audit however there were additional cameras added.</p> <p>Discussion of Interviews: An interview with the Superintendent and the PREA Compliance Manager confirmed that there were no expansions or modifications to the facility since the last PREA Audit. However, cameras have been added since the last PREA Audit.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: GDC Policy, 208.6, Prison Rape Elimination Act Sexually Abusive Behavior Prevention and Intervention Program, B. Responsive Planning; in Standard Operating Procedure 103.10 Evidence Handling and Crime Scene Processing and SOP 103.06, Investigations of Allegations of Sexual Contact, Sexual Abuse, Sexual Harassment of Offenders; GDC Policy VH07-001 Health Services, E., Medical Services Deemed Necessary Exempt from Fee; SANE Nurse Call Roster; Medical PREA Log; Memorandum of Understanding from the Augusta University (Georgia Correctional Health Care); Sexual Assault Nurse Examiner's; SANE Call Roster/List;.IK01-0005, MOU from Lily Pad SANE Center; Crime Scene Preservation</p> <p>Interviews: SANE; PREA Compliance Manager; Random Staff; Resident who Report Sexual Abuse - NA</p> <p>Observations: Review of SANE log onsite.</p> <p>Discussion of Policy and Document Review: DOC Policy, 208.6, Prison Rape Elimination Act Sexually Abusive Behavior Prevention and Intervention Program, B. Responsive Planning, describes the agency's expectations regarding the evidence protocols and forensic examinations. Facilities are required to follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. These procedures are covered, GDCs response to sexual assault follows the US Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" dated April 2013, or the most current version. The Department requires that upon receiving a report of a recent incident of sexual abuse, or a strong suspicion that a recent serious assault may have been sexual in nature, a physical exam of the alleged victim is performed, and the Sexual Assault Nurse Examiner's protocol initiated.</p> <p>The GDC Policy, IK-005, Crime Scene Preservation, establishes the agency's policy on evidence collections and protecting the crime scene. Policy requires that one of the first responsibilities at a crime scene is to prevent the destruction or contamination of evidence. Staff are required to initiate security measures to prevent unauthorized persons from entering the crime scene and not to touch anything or disturb anything. Instructions for maintaining the chain of possession of evidence is discussed GDC Policy VH07-001 Health Services, E., Medical Services Deemed Necessary Exempt from Fee, requires that medical care initiated by the facility is exempt from health care fees.</p> <p>The Department has promulgated a Local Procedure Directive encompassing the procedures related to responding to victims of sexual assault and the victim is provided the opportunity for a forensic exam as soon as possible. Forensic exams are provided at no cost to the victim.</p> <p>Investigations are initiated when the Sexual Assault Response Team Leader is notified of an actual or allegation of sexual assault/abuse or sexual harassment. The SART initially investigates to determine if the allegation is PREA related. If there is a sexual assault, the SART leader informs the Superintendent who (or his designee) contacts the Office of Professional Standards (OPS) Investigator who will respond to conduct the criminal investigation. OPS is the office with the legal authority and responsibility to conduct investigations of incidents the victim and requiring the alleged perpetrator not to take any actions that would degrade or eliminate potential evidence and securing the area or room where the alleged assault took place and maintaining the integrity of evidence until the OPS investigator arrived. The OPS investigator may order a forensic exam. If a forensic exam is ordered, the facility's nurse or Health Services Administrator/designee uses the Sexual Assault Nurse Examiner's List and contacts them to arrange the exam. The list, entitled, "SANE Nurse Call Roster" with contact information for SANE Nurse was posted, provided to the auditor and reviewed. Upon completion of the exam the "rape kit" would be turned over to the OPS investigator. If the OPS investigator has not arrived, the SART leader secures the rape kit and initiates the chain of custody following a forensic exam.</p> <p>The auditor reviewed the Medical PREA Log documenting actions taken when inmates alleged sexual abuse. The PREA Log documented, and the Health Services Administrator acknowledged there have been no cases involving the services of a sexual assault nurse examiner during the past twelve months.</p> <p>GDC Policy also requires the PREA Compliance Manager to attempt to enter into an agreement with a rape crisis center to make available a victim advocate to inmates being evaluated for the collection of forensic evidence. It also requires an administrative or criminal investigation of all allegations of sexual abuse and sexual harassment. Allegations involving potentially criminal behavior will be referred to the Office of Professional Standards (OPS).</p> <p>The facility has an agreement with the Lily Pad SANE Center to provide an Advocate. The agreement is in writing but has not yet been approved by the GDC legal office. The agreement outlines the services the center would provide for Residents who are victims of sexual abuse or who just want to talk with a victim advocate.</p>

The auditor interviewed the director of the Lily Pad SANE Center. The director described the multiple services her center is offering the residents of the Bainbridge RSAT. The facility provides 24-hour medical forensic exams by Nurse Examiners in a private facility for victims ages 13 and older. They also offer free, confidential counseling and support groups for victims and family members. Additionally, the MOA affirms the center will provide an advocate to accompany the resident throughout the investigative process, including interviews, the forensic exam process, crisis intervention, information and emotional support. The director affirmed residents may access the 24/7 hotline to talk with a victim advocate or to report sexual abuse.

The facility's Sexual Assault Response Team (SART) investigates allegations of sexual assault and sexual harassment. This team consists of an investigator, medical and the PREA Compliance Manager.

The number of forensic medical exams conducted during the past 12 months: 0

Reviewed documentation and interviews with the Superintendent, Assistant Superintendent, random and specialized staff as well as with Residents, confirmed the facility has not had any allegations of either sexual abuse or sexual harassment during the past twelve months.

Discussion of Interviews: The sexual assault response team conducts the initial investigation

into allegations of sexual abuse or sexual assault. In conducting those investigations, they utilize the Coordinated Response Plan. Interviews with members of the SART indicated that the SART facility- based investigator would initiate an investigation as soon as they received notification of an allegation of sexual abuse and within 24 hours if the allegation was sexual harassment. A previous interview with a SANE who is contracted to perform Sexual Assault Forensic Exams for the Georgia Department of Corrections, confirmed the process for conducting a forensic exam. She indicated she often brings a male nurse with her who also serves as an advocate for the inmate undergoing the exam. She follows a uniform protocol for conducting those exams. An interview with a staff from Lily Pad SANE Center confirmed the services her agency will provide victims of sexual assault. An interview with a Special Agent confirmed the investigative process when an incident at the facility appears to be criminal. Special Agents, he indicated, complete 600 hours of training by the Georgia Bureau of Investigation.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 1476 430">Policy and Documents Review: GDC Policy, 208.6, Prison Rape Elimination Act; GDC Standard Operating Procedure, IK01-0006, Investigation of Allegations of Sexual Contact, Sexual Abuse and Sexual Harassment; IK01-005, Crime Scene Preservation Document Review: Pre-Audit Questionnaire; PREA Investigation Summary; Notification of Results of Investigation; Initial Notification Form; GDC 90 Day Offender Sexual Abuse Review Checklist; GDC Incident Report; NIC Certificates (National Institute of Corrections: Investigating Sexual Abuse in Confinement Settings)</p> <p data-bbox="242 461 919 488">Interviews: Facility-Based Investigator; Special Agent; Agency Head</p> <p data-bbox="242 519 1476 981">Discussion of Policy and Documents Reviewed: GDC Policy, 208.6, Prison Rape Elimination Act, requires that an administrative or criminal investigation is to be completed for all allegations of sexual abuse and sexual harassment. Allegations that involve potentially criminal behavior will be referred for investigation to the Office of Professional Standards. If an investigation was referred to an outside entity that entity is required to have in place a policy governing the conduct of such investigations. The local Sexual Assault Response Team is responsible for the initial inquiry and subsequent administrative investigation of all allegations of sexual abuse or sexual harassment with limitations. In cases where allegations are made against staff members and the SART inquiry deems the allegation is unfounded or unsubstantiated by evidence of facility documentation, video monitoring systems, witness statement or other investigative means, the case can be closed at the facility level. No interviews may be conducted with a staff member nor a statement collected from the accused staff without first consulting the Regional SAC. All allegations with penetration and those with immediate and clear evidence of physical contact are required to be reported to the Regional SAC and the Department's PREA Coordinator immediately upon receipt of the allegations. If a sexual assault is alleged and cannot be cleared at the local level, the Regional SAC determines the appropriate response upon notification. If the response is to open an official investigation, the Regional SC will dispatch an agent or investigator who has received special training in sexual abuse investigations.</p> <p data-bbox="242 1012 1476 1240">Evidence, direct and circumstantial, will be collected and preserved. Evidence includes any electronic monitoring data; interviews with witnesses; prior complaints and reports of sexual abuse involving the suspected perpetrator. When the criminal investigation pertaining to an employee is over it is turned over to the Office of Professional Standards to conduct any necessary compelled administrative interviews. The credibility of a victim, suspect or witness is to be assessed on an individual basis and not determined by the person's status as offender or staff member. Offenders alleging sexual abuse will not be required to submit to a polygraph or other truth telling device as a condition for proceeding with the investigation of the allegation. After each SART investigation all SART investigations are referred to the OPS for an administrative review.</p> <p data-bbox="242 1272 1476 1630">GDC Standard Operating Procedure, IK01-0006, Investigation of Allegations of Sexual Contact, Sexual Abuse and Sexual Harassment, thoroughly describes the expectations for reporting allegations including initial notifications, general guidelines for investigations and investigative reports. This policy asserts that allegations of sexual contact, sexual abuse and sexual harassment filed by sentenced offenders against departmental employees, contractors, vendors or volunteers be reported, fully investigated and otherwise treated in a confidential and serious manner. Staff are required to cooperate with the investigation and GDC policy is to ensure that investigations are conducted in such a manner as to avoid threats, intimidation or future misconduct. Policy requires "as soon as an incident of, sexual contact, sexual abuse or sexual harassment (including rumors, inmate talk, kissing etc.) comes to the attention of a staff member, the staff member is required to immediately inform the Warden/Superintendent, and/or the Institutional Duty Officer, and/or the Office of Professional Standards Unit verbally and follow up with a written report. Failure to report allegations of sexual contact, sexual abuse or sexual harassment may result in disciplinary action, up to and including dismissal.</p> <p data-bbox="242 1662 1476 1787">This policy also affirms the Office of Professional Standards will investigate allegations of sexual contact, sexual abuse and sexual harassment by employees, contractors, volunteers, or vendors. The investigations may include video or audio recorded interviews and written statements from victims, alleged perpetrator and any witnesses as well as all other parties with knowledge of any alleged incident; as well as known documents, photos or physical evidence.</p> <p data-bbox="242 1818 1476 1912">Policy requires investigations to continue whether the alleged victim refuses to cooperate with the investigator and whether another investigation is being conducted and even if the employee resigns during an investigation. The time limit for completing investigations is 45 days from the assignment of the case.</p> <p data-bbox="242 1944 1476 2136">The auditor conducted previous interviews with one Office of Professional Standards (OPS) investigator as well as an interview with an OPS Special Agent and with the on-site facility based Sexual Assault Response Team Investigator. The Special Agent stated investigators must complete 600 hours of training provided by the Georgia Bureau of Investigations. The Office of Professional Standards investigators have arrest powers and handle those cases that appear to be criminal in nature. The agent related that once an allegation is made, the Regional Office Staff is notified, after which it goes to the Special Agent in Charge who assigns the case to a Special Agent and notifies OPS Investigations. He described his role in</p>

ensuring the scene is secured, interviewing the victim, staff, and witnesses, reviewing videos and getting medical records. He related if an employee involved in an allegation of sexual abuse resigned or terminated his/her employment prior to the conclusion of an investigation, the investigation would continue. Too, if an inmate who is an alleged abuser is transferred to another facility or terminated or otherwise discharged from the program, the investigation, according to the investigators would continue.

Facility-based investigations are conducted by a team of staff including a staff whose primary responsibility is to investigate, a staff whose primary role is mental health to serve as an advocate, if needed, and medical staff. Upon receiving the complaint, the investigator initiates the investigation process.

An interview with the facility-based investigator confirmed she has completed the on-line NIC Specialized Training: PREA: Conducting Sexual Abuse Investigations in Confinement Settings as well as training from the PREA Compliance Manager. She described the investigative process and the evidence she would be collecting, including witness statements, reviewing any available camera footage, and physical evidence as applicable.

If, upon receiving an allegation or report of sexual abuse, the preliminary evidence indicates, or it is obvious that a criminal act is likely to have occurred, the investigator contacts the Office of Professional Standards who will dispatch an OPS PREA Investigator or another OPS Investigator who is available. The role of the facility-based investigator then is to support the OPS investigator in any way possible.

There has been one allegation of sexual abuse or sexual harassment during the past twelve months requiring administrative investigations. This was confirmed through a variety of sources including the Pre-Audit Questionnaire and the PREA report to the Agency's PREA Unit; Reviewed Compstat Reports; a report from the PREA Unit PREA Analyst.

The agency's investigation policy is provided via the agency website and provides information on how to report any PREA related allegation or complaint on line. Third parties may also report via the Fraud and Abuse Hotline, with contact information provided on the website as well.

In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 1

In the past 12 months, the number of allegations resulting in an administrative investigation: 1

In the past 12 months, the number of allegations referred for criminal investigation: 0

Discussion of Interviews: Randomly selected staff interviewed during the site review stated they were required to report all allegations of sexual abuse or sexual harassment, including suspicions, reports, knowledge or allegations. They are required to report immediately to their immediate supervisor and document the report with a written statement prior to the end of their shift. Also, when asked, they confirmed they also would accept any report from any source and treat it seriously, reporting it just as any other report or allegation. Most of the staff stated the Sexual Assault Response Team is responsible for conducting sexual abuse investigations. Most of them could name the members. An interview with the SART Leader confirmed they are very knowledgeable of the investigation process. Interviewed Residents during the site review knew ways to report sexual abuse and sexual harassment.

115.31	Employee training
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Policy and Document Review: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education; Reviewed Training Rosters documenting Day 1 of Annual In-Service Training, Certificates documenting completion of the on-line course from the National Institute of Corrections, Communicating Effectively and Professionally with LGBTI Offenders; PREA Acknowledgment Statements; Reviewed personnel files containing PREA Acknowledgment Statements</p> <p>Interviews: Random Staff</p> <p>Observations: None applicable for this audit.</p> <p>Discussion of Policies and Documents: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, requires annual training that includes the following: The Department's zero- tolerance policy, how to fulfill their responsibilities under the sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures, inmate's right to be free from sexual abuse and sexual harassment, the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment, the dynamics of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual transgender, intersex or gender non-conforming inmates ; how to avoid inappropriate relationships with inmates and how to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment. New employees receive PREA Training during Pre-Service Orientation. Staff also receives annual in-service training that includes a segment on PREA. In-service training considers the gender of the inmate population.</p> <p>The facility provided the training curriculum covering the topics required by the PREA Standards and more.</p> <p>The auditor reviewed training rosters documenting 2020 Annual In-Service, Day 1, PREA training staff. Reviewed personnel files representing newly hired staff all contained PREA Acknowledgment Statements indicating staff are PREA Trained. The auditor reviewed PREA Acknowledgment Statements in personnel files. An additional PREA Acknowledgment Statements uploaded into the PAQ documenting PREA training. Staff had a complete understanding of the agency's zero tolerance policy of the Department's Zero Tolerance Policy on Sexual Abuse and Sexual Harassment and that they have read the GDC Standard Operating Procedure 208.06, Sexually Abusive Behavior Prevention and Intervention Program. They also affirm they understand that any violation of the policy will result in disciplinary action, including termination, or that they will be banned from entering any GDC institution. Penalties for engaging in sexual contact with an offender commit sexual assault, which is a felony punishable by imprisonment of not less than one or more, than 25 years, a fine of \$100,000 or both.</p> <p>Staff are required to have attended Communicating Effectively and Professionally with LGBTI Inmates. One hundred percent of the interviewed random staff confirmed they completed the online NIC PREA Training, Communicating Professionally with LGBTI Inmates. The auditor also sampled Certificates, documenting staff having completed the NIC on-line training, "Communicating Effectively and Professionally with LGBTI Offenders".</p> <p>Six staff at the facility have completed the NIC on-line training, PREA: Conducting Sexual Abuse Investigations in Confinement Settings. The facility-based staff advocate provided documentation to confirm two-day training conducted by the Georgia Network to End Sexual Assault. Four certificates were reviewed that documented staff having completed the NIC online training, "Your Role in Responding to Sexual Abuse."</p> <p>PREA Compliance Managers attend training at least twice a year.</p> <p>The Sexual Assault Response Team receives training at least semi-annually on their roles in responding to allegations of sexual abuse. Specialized training is completed by SART members and medical staff.</p> <p>PREA Related posters are prolific and posted in numerous locations throughout this facility and in this facility the posters and notices are placed neatly and conspicuously in frames and on neatly maintained bulletin boards.</p> <p>The investigator on the SART completed the specialized training for investigators through the National Institute of Corrections. Additionally, the SART receives training in their roles in response to a sexual assault at least semi-annually. The auditor reviewed multiple certificates confirming the specialized training.</p> <p>Discussion of Interviews: Interviews with random staff, confirmed they receive PREA Training annually during annual in-service training on Day 1. Staff, indicated, in their interviews, that they receive PREA training as newly hired employees both</p>	

at the facility and at the academy (BCOT). They stated they then receive PREA Training during annual in- service and that sometimes that training is in a class and sometimes on-line.

Staff stated they receive annual training in PREA and that that training is either in a class or online depending on the year. This year they received Day 1 In-Service Training that was conducted in a class setting. Day 1 training includes PREA. Staff indicated, as well, in their interviews, that they were trained in each of the topics required by the PREA Standard and the GDC Policy.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 3, Volunteers and Contractors Training; PREA Acknowledgement Statements</p> <p>Interview: Contractor</p> <p>The number of volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response: 1</p> <p>Observations: There were no volunteer activities during the on-site audit period due to Covid concerns.</p> <p>Discussion of Policies and Documents that were reviewed: DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 3, Volunteer and Contractor Training, requires all volunteers and contractors who have contact with inmates to be trained on their responsibilities under the Department's PREA policies and procedures. This training is based on the services being provided and the level of contact with inmates, however all volunteers and contractors are required to be notified of the Department's zero- tolerance policy and informed how to report such incidents. Participation must be documented and indicates understanding the training they received. Regional training is provided now for volunteers and contractors. Everything, according to staff, is done at the Regional Office and upon a successful background check and completed training requirements; the Regional Office issues a Contractor or Volunteer Badge. The agency volunteers often volunteer in multiple prisons and that is the reason for the regional training. Too it provides consistency in the training provided. Once the regional office issues a "Badge" the volunteer or contractor is authorized to enter a facility. The badge is required to be renewed annually.</p> <p>A memo from the GDC Transitional Services Coordinator explained to Wardens that volunteers who participate in the volunteer training at Tift receive initial PREA training and have a background check completed. Documentation of the training previously was submitted to the facility. In the training, the Coordinator, asserted volunteer training includes: 1) zero-tolerance for sexual abuse and sexual harassment; 2) How to fulfill their responsibilities under agency sexual and sexual harassment prevention, detection, reporting and response policies and procedures; 3) Inmate's right to be free from sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement; 4) The right of inmates 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 inmates; and 9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. The trainer indicated they use the Power Point presentation provided by the agency PREA Coordinator. Regional Training is now being provided. 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 the residents. All volunteers and contractors who have contact with offenders are notified of the Department's Zero Tolerance policy regarding sexual abuse and sexual harassment and informed on how to report such incidents. Documentation of that training is on the Contractor/Volunteer Acknowledgment Statement.</p> <p>The auditor reviewed PREA Acknowledgement Statement for a contractor. The GDC Acknowledgment Statements are for supervised visitors/contractors/volunteers. It acknowledges that they understand the agency has a zero-tolerance policy prohibiting visitors, contractors, and volunteers from having sexual contact of any nature with offenders. They agree not to engage in sexual contact with any offender while visiting a correctional institution and if they witnessed another having sexual contact with an offender or if someone reported it to the contractor/volunteer he/she agrees to report it to a corrections employee. They acknowledge, as well, the disciplinary action, including the possibility for criminal prosecution, if they violate the agreement. The Acknowledgment Statement for Unsupervised Contractors and Volunteers acknowledges training on the zero-tolerance policy and that they have read the agency's PREA Policy (208.06). They acknowledge they are not to engage in any behavior of a sexual nature with an offender and to report to a nearby supervisor if they witness such contact or if someone reports such conduct. They acknowledge the potential disciplinary actions and/or consequences for violating policy.</p> <p>Volunteers complete an orientation that includes the following:</p> <ul style="list-style-type: none"> · NCIC Consent Form (for conducting the required background checks) · Sexual Assault/Sexual Misconduct Acknowledgment Statement for Supervised Visitors/Contractors/Volunteers – acknowledging zero tolerance, duty to report, and an acknowledgment that entry into the facility is based on the volunteer's agreement not to engage in any sexual conduct of any nature with any offender and to report such conduct when learned. The Volunteer acknowledges that the consequences for failing to report or violating the agreement will result in being

permanently banned for entering all GDC facilities and that GDC may pursue criminal prosecution.

- Code of Ethics

Discussion of Interview: A Contractor related during an interview she completes the same training that staff are required to complete.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 1468 394">Policy and Documents Reviewed: DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 4, Offender Education; GDC PREA pamphlet; Issuance of Resident Handbook/Completion of Handbook Orientation and Video Acknowledgment Statements, Intake PERA Education Training Roster</p> <p data-bbox="244 427 876 456">Interviews: Intake Staff; PREA Compliance Manager; Residents</p> <p data-bbox="244 490 1477 645">Discussion of Policy and Documents: Reviewed: DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 4, Offender Education, requires notification of the GDC Zero-Tolerance Policy for Sexual Abuse and Harassment and information on how to report an allegation at the receiving facility. This is required to be provided to every resident upon arrival at the facility. It also requires that in addition to verbal notification, offenders are required to be provided a GDC PREA pamphlet.</p> <p data-bbox="244 678 1473 768">Within 15 days of arrival, the policy requires inmates receive PREA education. The education must be conducted by assigned staff members to all inmates and includes the gender appropriate "Speaking Up" video on sexual abuse. The initial notification and the education are documented in writing by signature of the inmate.</p> <p data-bbox="244 801 1468 891">In the case of exigent circumstances, the training may be delayed, but no more than 30 days, until such time is appropriate for delivery (i.e. Tier Program, medical issues etc.). This education is documented in the same manner as for offenders who participated during the regularly scheduled orientation.</p> <p data-bbox="244 925 1477 1079">The PREA Education must include: 1) The Department's zero-tolerance of sexual abuse and sexual harassment; 2) Definitions of sexually abusive behavior and sexual harassment; 3) Prevention strategies the offender can take to minimize his/her risk of sexual victimization while in Department Custody; 4) Methods of reporting; 5) Treatment options and programs available to offender victims of sexual abuse and sexual harassment; 6) Monitoring, discipline, and prosecution of sexual perpetrators; 7) Notice that male and female routinely work and visit housing area.</p> <p data-bbox="244 1113 1445 1173">PREA Education is required to be provided in formats, accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as those with limited reading skills.</p> <p data-bbox="244 1207 1473 1330">Education, according to GDC policy requires the facility to maintain documentation of offender participation in education sessions in the offender's institutional file. In each housing unit, policy requires that the following are posted in each housing unit: a) Notice of Male and Female Staff routinely working and visiting housing areas; b) A poster reflecting the Department's zero-tolerance (must be posted in common areas, as well, throughout the facility, including entry, visitation, and staff areas.</p> <p data-bbox="244 1364 823 1393">Residents confirm their orientation on several documents:</p> <ol data-bbox="244 1426 1422 1547" style="list-style-type: none"> <li data-bbox="244 1426 1422 1487">1) Acknowledgment of having received the PREA Orientation (to include the PREA Video on sexual assault and sexual harassment. <li data-bbox="244 1520 1331 1547">2) Offender Orientation Checklist (documenting Sexual Abuse and Harassment and Viewed the PREA Video). <p data-bbox="244 1581 1473 1736">If an inmate is non-English speaking, the Language Line Solutions and Lionbridge is available. If an inmate has a disability, appropriate staff are to be used to ensure that the inmate understands the PREA policy. If a Resident requires signing (hearing impaired) the agency's ADA Coordinator is called and provides the necessary translation services (according to an interview with the ADA Coordinator). The State Department of Administrative Services has multiple contracts with translation services. These may be accessed through the Agency ADA Coordinator.</p> <p data-bbox="244 1769 1434 1830">At intake, Residents are given a PREA Pamphlet and the basic information in the pamphlet is discussed giving incoming Residents information on Zero Tolerance and how to report allegations of sexual abuse.</p> <p data-bbox="244 1863 1468 1953">During the random Residents interviews the intake process was discussed in detail. Staff discusses PREA during the intake process as well as orientation. Residents receive a brochure, view a video and participate in a discussion. An acknowledgement form is signed. PREA information is also found posted through- out each housing unit.</p> <p data-bbox="244 1986 1468 2110">The reviewed Resident Handbook addresses the agency/facility's Zero Tolerance for any form of sexual activity, how to avoid sexual abuse; what to do if one becomes a victim; and how to report, including ways to report to outside entities and that they can remain anonymous. The address to the Ombudsman is included. Residents are advised they have the right to be free from sexual abuse and sexual harassment, that they have the right to be free from retaliation.</p>

The auditor reviewed PREA Acknowledgements.

Posters containing PREA related information, including Zero Tolerance, See Something Say Something, and how to report, with contact information provided.

The number of inmates admitted during past 12 months who were given this information at intake: 230

The percentage of inmates admitted during past 12 months who were given this information at intake: 100%

The facility has PREA videos in English, Spanish and close captioned. Training logs for Residents were provided for review by the auditor.

Discussion of Interviews: The staff member providing PREA related information at intake was very knowledgeable of PREA and presented that information to newly arriving Residents in an effective and professional manner.

An interview with a staff responsible for conducting orientation was interviewed and indicated that orientation is conducted not later than the day following intake. The staff responsible for conducting orientation is a Counselor, the PREA Compliance Manager. In addition to describing a thorough process for informing Residents about PREA the auditor observed that process and it appeared to be thorough and effective.

Interviewed Residents stated they received PREA information at intake. They said they had received oral information as well as the PREA brochure. They also said they received that information upon admission and the next day they received a more in-depth orientation and watched the PREA Video. Residents were knowledgeable about PREA, zero tolerance and their rights related to PREA. They also were informed about multiple ways to report. There were no hearing impaired, visually impaired or disabled Residents.

115.34	Specialized training: Investigations
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1445 398">Policy and Documents Reviewed: DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 5. Specialized Training Investigations; Certificates documenting specialized training provided by the National Institute of Corrections: Investigating Sexual Abuse in Confinement Settings</p> <p data-bbox="244 434 1414 492">Interviews: Superintendent; Agency PREA Coordinator; PREA Compliance Manager; Office of Professional Standards Investigator, Special Agent; Facility-Based Investigator; SART Members</p> <p data-bbox="244 528 1461 645">Discussion of Policies and Documents: DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 5. Specialized Training Investigations requires the Office of Professional Standards to ensure all investigators are appropriately trained in conducting investigations in confinement settings.</p> <p data-bbox="244 680 1469 770">That 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. The Department is required to maintain documentation of that training.</p> <p data-bbox="244 801 1474 896">In GDC Facilities, the Sexual Assault Response Team is charged with conducting the initial investigation into issues related to PREA. Their role is to determine if the allegation is indeed PREA related. If the allegation appears to be criminal in nature, the Office of Professional Standards investigators will conduct the investigation with support from the SART.</p> <p data-bbox="244 927 1461 1048">Staff at the facility have completed the online NIC course: PREA: Investigating Sexual Abuse in Confinement Settings. This was confirmed by reviewing the Certificates documenting the specialized training and through interviews with the investigators. Sexual Assault Response Team members are provided training conducted by the GDC PREA Unit at least twice a year.</p> <p data-bbox="244 1079 1485 1375">Discussion of interviews: The auditor interviewed an Office of Professional Standards, Special Agent, from the Regional Office. The agent articulated the investigative process and the role of the Special Agent in investigating PREA related allegations. He indicated he or other agents would be dispatched by the Regional Office in the event of a sexual assault. He also related that in addition to the NIC Specialized Training taken on-line, (PREA: Investigating Sexual Abuse in Confinement Settings) he attended 600 hours of training provided by the Georgia Bureau of Investigation to become a Special Agent with arrest powers. The facility-based investigator confirmed receiving the NIC training, SART Training and the training provided by the Georgia Network to End Sexual Violence, "Advanced Sexual Abuse Investigations." Certificates were provided documenting other SART members completing the NIC specialized training. Additionally, he related Sexual Assault Response Team training is held a couple of times a year.</p>

115.35	Specialized training: Medical and mental health care
	<p data-bbox="240 145 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 1485 398">Policy and Documents Reviewed: Pre-Audit Questionnaire, Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 6, Specialized Training: Medical and Mental Health Care; National Institute of Corrections Certificates documenting specialized training: Medical Health Care for Sexual Assault Victims in Confinement Settings</p> <p data-bbox="240 427 491 456">Interviews: Medical Staff</p> <p data-bbox="240 486 831 515">Observations: None applicable at this time to this standard.</p> <p data-bbox="240 544 1493 739">Discussions of Policy and Documents: The Pre-Audit Questionnaire documented one hundred percent of medical staff completing the required specialized training. Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 6, Specialized Training: Medical and Mental Health Care, requires the GDC medical and mental health staff and GCHG staff are trained using the NIC Specialized Training PREA Medical and MH Standards curriculum. Certificates of Completion are required to be printed and maintained in the employee training file. Staff also must complete GDC's annual PREA in-service training.</p> <p data-bbox="240 768 1449 831">The number of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 4</p> <p data-bbox="240 860 1417 922">The percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy: 100%</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Policy and Documents Reviewed: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, Paragraph 1. Screening for victimization and abusiveness, Victim/Aggressor Classification Instrument; Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program in paragraph 9; Victim/Aggressor Assessments- PREA Sexual Victim/Sexual Aggressor Classification Screening; Victim/Aggressor Reassessments; Case History Notes documenting assessment and then reassessments</p> <p>Interviews: Counselors who conduct victim/aggressor assessments</p> <p>Discussion of Policy and Documents: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, Paragraph 1. Screening for victimization and abusiveness, requires all inmates be assessed during intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p>This instrument, the Victim/Aggressor Classification Instrument, is administered by a counselor, within 72 hours of arrival at the facility. Information from the screening will be used to inform housing, bed assignment, work, education and program assignments. Policy requires that outcome of the screening is documented in SCRIBE.</p> <p>The Offender PREA Classification Details considers all the following sexual victim factors:</p> <ul style="list-style-type: none"> · Offender is a former victim of institutional rape or sexual assault. · Offender is 25 years old or younger or 60 years or older. · Offender is small in physical stature. · Offender has a developmental disability/mental illness/physical disability. · Offender's first incarceration. · Offender is perceived to be gay/lesbian/bisexual transgender/intersex or gender non- conforming. · Offender has a history of prior sexual victimization. · Offender's own perception is that of being vulnerable. · Offender has a criminal history that is exclusively non-violent. · Offender has a conviction(s) for sex offense against adult and/or child? <p>If question #1 is answered yes, the offender will be classified as a Victim regardless of the other questions. This generates the PREA Victim icon on the SCRIBE Offender Page. If three (3) or more of questions (2-10) are checked, the offender will be classified as a Potential Victim. This will generate the PREA Potential Victim icon on the SCRIBE offender page.</p> <p>The Offender PREA Classification Detail considers the following Sexual Aggressor Factors:</p> <ul style="list-style-type: none"> · Offender has a past history of institutional (prison or jail) sexually aggressive behavior. · Offender has a history of sexual abuse or sexual assault toward others (adult or child). · Offender's current offense is sexual abuse/sexual assault toward others (adult or child). · Offender has a prior conviction(s) for violent offenses. <p>If question #1 is answered yes, the inmate will be classified as a Sexual Aggressor regardless of the other questions. This will generate the PREA Aggressor icon on the SCRIBE Offender page. If two (2) or more of questions (2-4) are checked, the offender will be classified as a Potential Aggressor. This will generate the PREA Potential Aggressor icon on the SCRIBE Offender page.</p> <p>GDC Policy 208.06, Attachment 4 also states in situations where the instrument classifies the offender as both Victim and Aggressor counselors are instructed to thoroughly review the offender's history to determine which rating will drive the offender's housing, programming, etc. This also is required to be documented in the offender SCRIBE case notes, with an</p>

alert note indicating which the controlling rating.

Staff are required to encourage residents to respond to the questions to better protect them, but staff are prohibited from disciplining them for not answering any of the questions. The screening process considers minimally, the following criteria to assess inmate's risk of sexual victimization: Whether the inmate has a mental, physical, or developmental disability; the age of the inmate; the physical build of the inmate; whether the inmate has been previously incarcerated; whether the inmate's criminal history is exclusively nonviolent; whether the inmate has prior conviction for sex offenses against an adult or child; whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; whether the inmate has previously experienced sexual victimization; the inmate's own perception of vulnerability and whether the inmate is detained solely for civil immigration purposes. It also considers prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse, as known by the Department, Other factors considered are: physical appearance, demeanor, special situations or special needs, social inadequacy and developmental disabilities.

Policy requires offenders whose risk screening indicates a risk for victimization or abusiveness is required to be reassessed when warranted and within 30 days of arrival at the facility based up on any additional information and when warranted due to a referral, report or incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Policy requires that any information related to sexual victimization or abusiveness, including the information entered into the comment section of the Intake Screening Form, is limited to a need-to- know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education and programming assignments.

The information from the risk screening is required to be used to determine housing, bed, work, education and program assignments with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive.

Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program in paragraph 9, requires the Warden to designate a safe dorm or safe beds for offenders identified as highly vulnerable to sexual abuse. The location of these safe beds must be identified in the Local Procedure Directive, Attachment 9 and the Staffing Plan. The facility has designated a dorm to serve as a safe dorm, housing potential or actual victim of sexual assault. The

Bainbridge RSAT will make individualized determinations about how to ensure the safety of each resident.

In making housing assignments for transgender or intersex offenders, the Department will consider on a case-by -case basis, whether a placement would ensure the offender's health and safety and whether the placement would present management or security problems. Also, in compliance with the PREA Standards, placement and programming assignments for each transgender or intersex offender will be reassessed at least twice a year to review any threats to safety experienced by the offender.

Policy also requires that offenders who are at high risk for sexual victimization will not be placed in involuntary segregation unless an assessment of all available alternatives have been made, and determination has been made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the offender may be held in involuntary segregation no more than 24 hours while completing the assessment. The placement, including the concern for the offender's safety must be noted in SCRIBE case notes documenting the concern for the offender's safety and the reason why no alternative means of separation can be arranged. Inmates would receive services in accordance with SOP 209-06, Administrative Segregation. The facility will assign residents to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged. The assignment will not ordinarily exceed thirty days.

The auditor reviewed case notes at the times of the initial assessment and the reassessment. Case notes at the time of the initial assessments consistently documented PREA Orientation/Training as required. The notes also documented the resident having watched the PREA Video and being informed of the zero-tolerance policy and that retaliation will not be tolerated.

Discussion of Interviews: An interview with a counselor conducting the victim/aggressor assessment indicated that residents are assessed during admission. The assessment is conducted in private behind closed door. The screening/assessment is conducted after telling the resident who the assessor is and the purpose of asking the questions. The screening is done on the computer in SCRIBE using the Departments victim/aggressor assessment instrument. Factors considered in the assessment include:

- Age

- Size
- Whether they have been in prison or jail before.
- Prior victimization either within a facility or outside a facility.
- Crimes of violence or nonviolence.
- Identity (how they identify).
- Whether they are a sex offender or not.
- Vulnerability

Reassessments are done within 30 days following the initial assessment, if the resident leaves the facility and is gone overnight, and if there is an incident, including a PREA incident.

Discussion of Interviews: Interviews with residents confirmed that one hundred percent said they remember being asked the questions on the assessment either the same day or not later than two days.

115.42	Use of screening information
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1465 362">Policy and Documents Reviewed: DOC Policy 208.6, D. Screening for Risk of Victimization and Abusiveness, Paragraph 2. Use of Screening Information; Staffing Plan Designating Safe Housing; memo from the Superintendent; Reviewed Assessments; Reviewed Re- Assessments</p> <p data-bbox="244 398 887 425">Interviews: Superintendent; Staff Responsible for Risk Screening</p> <p data-bbox="244 461 1477 748">Discussion of Policies and Documents: DOC Policy 208.6, D. Screening for Risk of Victimization and Abusiveness, Paragraph 2. Use of Screening Information, requires that information from the risk screening is used to inform housing, bed, work, education and program assignments, the goal of which is to keep separate those inmates at high risk of being sexually victimized from those at high risk for being sexually abusive. Wardens and Superintendents are required to designate a safe dorm (s) for those inmates (residents) identified as vulnerable to sexual abuse. Facilities will make individualized determinations about how to ensure the safety of each inmate. In the event the facility had a transgender inmate, the Department requires the facility to consider on a case-by-case basis whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems. Placement and program assignments for each transgender or intersex inmate are to be reassessed at least twice a year.</p> <p data-bbox="244 784 1469 1003">Policy also requires that inmates at high risk for sexual victimization will not be placed in involuntary segregated housing unless an assessment of all available alternatives have been made and there is no alternative means of separation from likely abusers. If an assessment cannot be made immediately the offender may be held in involuntary segregation for no more than 24 hours while completing the assessment. The placement and justifications for placement in involuntary segregation must be noted in SCRIBE. While in any involuntary segregation, the offender will have access to programs as described in GDC SOP 209.06, Administrative Segregation which also provides for reassessments as well and the offender will be kept in involuntary segregated housing for protection only until a suitable and safe alternative is identified.</p> <p data-bbox="244 1039 1481 1128">The facility's living units are all open bay style. Residents are assigned initially based on their program status and in their unit based on their victim/aggressor results. Safe beds are designated in dorms and there are generally the closest to view from the Control Room and closest to camera view.</p> <p data-bbox="244 1164 1461 1254">Intake officers initially assign the dorm and bed. Typically, according to staff, they await the results of the victim/aggressor assessment. The classification committee meets and considers the available information on the Resident to determine the best housing assignment, as well as program and detail assignments, if any.</p> <p data-bbox="244 1290 1461 1447">Discussion of Interviews: Interviews with staff indicated residents are assessed for potential to be a victim or an aggressor during the admission process. Residents are assigned to an open bay dorm depending on the victim/aggressor rating but also based on the Residents' court orders as either sentenced to the RSAT or to complete the program. Intake staff makes the initial housing assignment. Staff stated if the resident was a potential victim he, would be placed in a safe bed in the dorm. The safe bed is usually a bed closest to the Control Room and in view of a camera.</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1353 331">Policy and Document Review: Pre-Audit Questionnaire; Georgia GDC Policy, 208.06, IV.d.3 (a-d) Administrative Segregation; Coordinated Response Plan</p> <p data-bbox="244 360 810 387">Interviews: Superintendent; Staff supervising segregation</p> <p data-bbox="244 418 1485 577">Discussion of Policy and Documents: The Pre-Audit Questionnaire documented the facility did not place any inmate in involuntary segregation/protective custody during the past twelve months. The Pre-Audit Questionnaire documented that there were no inmates at risk of sexual victimization who were assigned to involuntary segregated housing at all; none held for 24 hours awaiting assessment and none in the past 12 months for longer than 30 days while awaiting alternate placement. Staff were aware of the requirements of GDC policy which is consistent with the PREA Standards.</p> <p data-bbox="244 609 1485 869">The Georgia GDC Policy, 208.06, IV.d.3 (a-d) Administrative Segregation, requires that offenders 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. If an assessment cannot be conducted immediately, the offender may be held in involuntary segregation no more than 24 hours while completing the assessment. This placement, including the concern for the inmate's safety is noted in SCRIBE case notes documenting the concern for the offender's safety and the reason why no alternative means of separation can be arranged. The inmate will be assigned to involuntary segregated housing only until an alternative means of separation can be arranged. Assignment does not ordinarily exceed a period of 30 days.</p> <p data-bbox="244 900 1465 992">When possible, the Resident would be placed in a safe bed in a different dorm and placed in segregation as a last resort. Safe beds in this facility, according to a staff conducting victim/aggressor screenings, are in each dorm and generally would be the top bunk in a bed closest to the control room and in view of camera.</p> <p data-bbox="244 1023 1481 1182">If Residents are assigned to involuntary segregated housing it is 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 the facility uses involuntary segregation to keep an inmate safe, the facility documents the basis for their concerns for the inmate's safety and the reason why no alternative means of separation can be arranged. Reviews are conducted every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p data-bbox="244 1214 1477 1274">The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0</p> <p data-bbox="244 1305 1469 1464">Discussion of Interviews: Interviews indicated there have been no cases in which a Resident was involuntarily placed in segregation or protective custody during the past 12 months however the Superintendent indicated he would place a Resident in involuntary Protective Custody if warranted to keep the Resident safe. None of the interviewed Residents stated they had reported a PREA allegation and stated they have never been placed in involuntary segregated housing as a result of threats of or actual sexual abuse.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1477 396">The Georgia Department of Corrections provides Residents multiple ways to report sexual abuse and sexual harassment privately. To make a report outside the facility Residents can call the PREA Hotline; write the Ombudsman (phone number provided); write the State Board of Pardons and Parole Victim Services (contact information provided); call the GDC Tip Line (and remain anonymous); write or call the GDC PREA Coordinator.</p> <p data-bbox="244 427 1461 651">Policy and Documents Reviewed: Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, E. Reporting, 1. Inmate Reporting; The GDC policy (208.06, 2. Offender Grievances); Standard Operating Procedure 227.02, Statewide Grievance Procedures; brochure entitled, "Sexual Assault, Sexual Harassment, Prison Rape Elimination Act (PREA), Reporting is the First Step; PREA related posters; "Sexual Assault and Sexual Harassment Prison Rape Elimination Act (PREA) How to Prevent it; How to report it"; GDC Policy IIA23-0001, Consular Notification; Email from the GDC PREA Unit PREA Analyst documenting that there were no PREA calls to the hotline from this facility in the past 12 months; Review of the Georgia Department of Corrections Website – Reporting Sexual Abuse.</p> <p data-bbox="244 683 900 710">Interviews: PREA Compliance Manager, Residents, Random Staff</p> <p data-bbox="244 741 1469 801">Observations: Phones in each dorm with dialing instructions; the auditor observed the Intake Process and orientation where PREA information was given to the Residents.</p> <p data-bbox="244 833 1477 1057">Discussion of Policy and Documents: Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, E. Reporting, 1. Inmate Reporting, provides multiple ways for inmates to report. These include making reports in writing, verbally, through the inmate PREA Hotline and by mail to the Department Ombudsman Office. Inmates are encouraged to report allegations immediately and directly to staff at all levels. Reports are required to be promptly documented. The Department has provided inmates a sexual abuse hotline enabling inmates to report via telephone without the use of the inmate's pin number. If an inmate wishes to remain anonymous or report to an outside entity, he may do so in writing to the State Board of Pardons and Paroles, Office of Victim Services (address provided).</p> <p data-bbox="244 1066 1477 1191">Additionally, the resident is provided contract information, including dialing instructions for reporting via the GDC Tip Line. The instructions tell the resident the Tip Line is for anonymous reporting of staff and inmate suspicions and illegal activity. This information is posted next the phones providing dialing instructions. The auditor observed the dialing instructions next to the phone for reporting sexual abuse.</p> <p data-bbox="244 1223 1477 1447">Staff have been instructed and trained to accept reports made both verbally and in writing from third parties and promptly document them. Inmates may file grievances as well. Once a grievance is received and determined to be PREA related, the grievance process ceases, and an investigation begins. Third Party reports may be made to the Ombudsman's Office or in writing to the State Board of Pardons and Paroles, Office of Victim Services (address provided). Interviews with staff, both random and specialized confirmed staff are required and trained to accept all reports, regardless of how they are made and regardless of the source, to notify their supervisor and write either an incident report or a statement as directed by the supervisor to document receipt of verbal reports, third party reports, anonymous reports etc.</p> <p data-bbox="244 1478 1445 1641">The GDC policy (208.06, 2. Offender Grievances), requires that the facility allow offenders a full and fair opportunity to file grievances regarding sexual abuse to as to preserve their ability to seek judicial redress after exhausting administrative remedies. The procedures governing grievances are addressed in Standard Operating Procedure 227.02, Statewide Grievance Procedures. All grievances received are to be forwarded to the local SART for handling in accordance with the local response protocol.</p> <p data-bbox="244 1673 1477 1798">Inmates also have access to outside confidential support services including those identified in the PREA Brochure given to inmates during the admission process and posted throughout the prison. The following ways to report are provided: Call PREA, 7732; to any staff member; to the Statewide PREA Coordinator, to the Ombudsman (phone number provided), to the Director of Victim Services (mailing address provided).</p> <p data-bbox="244 1830 1477 2054">GDC Policy IIA23-0001, Consular Notification affirms it is the policy of GDC that the Consulate General of an inmate's native country is kept informed as the inmate's custody status or occurrences to the Vienna Convention on Consular Relations. Inmates will be provided information on how to access Foreign Consular Offices in the United States. This information is available for download at http://www.state.gov/s/cpr/ris/fco This policy prescribes the GDC's responsibility for notification and that the inmate is informed of such notification. Foreign National inmates are allowed visitation with representatives from the Consulate General of his/her native country. The visit must be scheduled at least 24 hours in advance unless the Warden approves a shorter time period.</p> <p data-bbox="244 2085 1477 2145">Residents may call anyone on their approved call list. They may also call their attorney's if they have one. Emergency phone calls may be made through the Resident's counselor.</p>

The reviewed Resident's Handbook mentions multiple ways to report sexual abuse and sexual harassment, tell a staff member; call the PREA Hotline; through the Office of Victim Services; the Ombudsman; call any of the numbers on the PREA flyer, and outside victim advocacy support services agency, the Lily Pad SANE Center.

Inmates have multiple ways to report allegations of sexual abuse or sexual harassment internally and externally. They may report by calling the PREA Hotline, write the Ombudsman, write the State Board of Pardons and Parole, Victim Services, report to the Agency's PREA Coordinator, write staff, friends, family and inmates, report via the grievance process, the GDC Tip Line, to the outside Rape Crisis Center/Outside Advocacy Organization, the Director of Victim Services and by telling a trusted staff. Residents may report to family via phone, during visitation, and via mail. They may report to their attorney's either via mail, phone or through visits with them.

Discussion of Observation: Phones were observed on the walls of each dorm. Posted at the phones were instructions for dialing the PREA Hotline. The auditor also viewed and reviewed the agency's website providing information on how to report allegations of sexual abuse.

Multiple PREA related posters were observed posted throughout the facility keeping PREA information continuously available to inmates. Zero Tolerance Posters, located throughout the facility, as well as other PREA related posters, explain that residents have the right to report, stressing the facility wants to keep the resident safe and that an investigation will be conducted for reported incidents and the perpetrator will be held accountable. Multiple ways to report are listed on the poster. These include:

- Call the PREA Hotline 7732.
- Report to any staff, volunteer, contractor or medical staff.
- Submit a grievance or sick call slip.
- Report to the PREA Coordinator or PREA Compliance Manager.
- Tell a family member, friend, legal counsel or anyone else outside the facility.
- Submit a report on someone else's behalf or someone at the facility can report for you (the resident).
- Victim Support Services for emotional support and to report (contact information provided).

Residents are provided the brochure entitled, "Sexual Assault and Sexual Harassment Prison Rape Elimination Act (PREA) How to Prevent it; How to report it". This brochure advises inmates that reporting is the first step. The hotline number is provided. The brochure tells Residents they may report allegations to any staff member or write to any of the following: Statewide PREA Coordinator (Address provided); the Ombudsman (Address and phone number provided) or to the Director of Victim's Services (Address provided).

One sign says to report sexual assaults to a staff member as soon as possible it then list the ways Residents may report. These include the PREA Hotline; in writing anonymously to the State Board of Pardons and Parole, Office of Victim Services; Emotional Support Services and Victim Advocacy through the Lily Pad SANE Center (phone and address provided); and through Third Party Reports by calling the Ombudsman's Office (number provided).

Discussion of Interviews: Interviews with Residents confirmed that they understand and are aware of how to report sexual assault/abuse or sexual harassment. Analysis of the responses to the question of how Residents would report, most often responses were report to an officer and using the hotline and tell a relative or another Resident who could report for them.

115.52	Exhaustion of administrative remedies
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1477 398">Policy and Documents Reviewed: The Bainbridge RSAT Pre-Audit Questionnaire; GDC Policy, 227.02, Statewide Grievance Process; Page 5 of the Statewide Grievance Policy, Paragraph 4.; Paragraph F. Emergency Grievances Procedure; DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, F. Reporting, Paragraph 2</p> <p data-bbox="244 434 1267 461">Interviews: Randomly Staff; PREA Compliance Manager Observations: Not applicable for this standard.</p> <p data-bbox="244 497 1477 685">Discussion of Policies and Documents: The Pre-Audit Questionnaire documented there were no grievances alleging sexual harassment during the past twelve (12) months; therefore, there were no grievances requiring a final decision within 90 days (115.52 (d)-3 nor were there any grievances involving extensions because a decision was not reached within 90 days. If a grievance alleged sexual abuse or sexual harassment it is turned over to the Sexual Assault Response Team for investigation and ceases being processed as a grievance. This was also confirmed through interviews with the grievance officer, interviews with the PREA Compliance Manager and reviewed grievances.</p> <p data-bbox="244 721 1477 801">GDC Policy explains the agency and facility grievance process. Upon entering the GDC, each offender is required to receive an oral explanation of the grievance procedure and receive a copy of the Resident Handbook, which includes instructions about the procedure.</p> <p data-bbox="244 837 1477 963">GDC Policy, 227.02, Statewide Grievance Process, specifies the areas where grievance forms may be accessed. It also affirms that offenders are not prohibited from assisting other offenders from filling out any forms related to the process. Policy provides that an offender may file a grievance on behalf of another inmate if the allegation involves sexual abuse. The Policy and local operating procedures allow another inmate to file a grievance on behalf of another inmate.</p> <p data-bbox="244 999 1477 1285">Too, the following procedures pertain to reporting allegations of sexual abuse or sexual harassment via the grievance process: 1) Page 5 of the Statewide Grievance Policy, Paragraph 4., Asserts that the offender is not required to attempt an informal resolution before filing a grievance; 2) Inmates may submit the grievance without having to submit it to the staff who is the subject of the complaint 3) Inmates may seek assistance from third parties and third parties can file grievances on behalf of the inmate 4) If a third party files a request on behalf of an inmate, the victim must agree to have the request filed 5) If the inmate declines to have the request processed on his behalf, GDC will document the inmate's decision as part of the SART or Internal Investigation report. Staff will also assist offenders who need special help (because of such things as Language Line Solutions and Lionbridge barriers, illiteracy, or physical or mental disability) filling out the grievance forms if requested by the inmate.</p> <p data-bbox="244 1321 1477 1581">Emergency Grievance procedures, as discussed in, requires that emergency grievances must be immediately referred to the Grievance Coordinator (or Duty Officer if after hours), such as allegations of sexual abuse and other PREA Concerns. The Grievance Officer/Duty Officer must determine if the Grievance fits the definition of an emergency grievance. If it does, the Grievance Officer/Duty Officer must immediately take whatever action necessary to protect the health, safety or welfare of the offender, and provide an initial response within 48 hours. This information is required to be documented and DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, F. Reporting, Paragraph 2, Inmate Grievances, requires the facility to allow inmates a full and fair opportunity to file grievances regarding sexual abuse to preserve their ability to seek judicial redress after exhausting administrative remedies.</p> <p data-bbox="244 1617 1477 1697">In situations where an inmate uses the grievance process to report an allegation of sexual abuse, the Department does not require the inmate to attempt to resolve the incident informally before filing a grievance the offender must be given a written response to his Emergency Grievance within 5 calendar days.</p> <p data-bbox="244 1733 1054 1760">In the past 12 months, the number of grievances filed that alleged sexual abuse: 0</p> <p data-bbox="244 1796 1477 1877">Discussion of Interviews: Interviews with staff indicated if a Resident filed a grievance that reported sexual abuse, sexual harassment or retaliation; the grievance would be turned over to the SART for investigation. Interviewed Residents named multiple ways to report sexual abuse and sexual harassment.</p>

115.53	<p>Inmate access to outside confidential support services</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy and Documents Reviewed: GDC Policy 208.6, PREA, MOU between the Bainbridge RSAT and the Lily Pad SANE Center; Bainbridge RSAT Pre-Audit Questionnaire; GDC Policy IIA234-0001, Consular Notification; PREA Related Posters; Training Certificate: Georgia Network to End Sexual Violence</p> <p>Interviews: Residents who reported Sexual Abuse - NA</p> <p>Discussion of Policies and Documents Review: GDC Procedures require the facility attempt to enter into an agreement with a rape crisis center to make available a victim advocate to inmates being evaluated for the collection of forensic evidence. Victim advocates from the community used by the facility will be pre-approved through the appropriate screening process and subject to the same requirements of contractors and volunteer who have contact with inmates. Advocates serve as emotional and general support, navigating the inmate through the treatment and evidence collection process.</p> <p>The agency provided a Memorandum of Understanding between the Bainbridge RSAT and Lily Pad SANE Center. In the MOU, the executive director of Lily Pad SANE Center agreed to provide victim advocacy services to facility's Residents in the event of a PREA incident. If requested by a victim, a qualified Lily Pad SANE Center Victim Advocate will be provided. The advocate will accompany and support the victim throughout the investigative process to include interviews, forensic exams, crisis intervention, and information and emotional support.</p> <p>Residents also have access to the GDC Ombudsman and GDC Tip Line. Contact information, including phone numbers and mailing addresses are provided, posted and accessible to inmates.</p> <p>GDC Policy IIA23-0001, Consular Notification; affirms it is the policy of GDC that the Consulate General of an inmate's native country be kept informed as the inmate's custody status or occurrences to the Vienna Convention on Consular Relations. Inmates will be provided information on how to access Foreign Consular Offices in the United States. This information is available for download at http://www.state.gov/s/cpr/ris/fco This policy prescribes the GDC's responsibility for notification and that the inmate is informed of such notification. Foreign National inmates are allowed visitation with representatives from the Consulate General of his/her native country.</p> <p>Discussion of Interviews: The PREA Compliance Manager confirmed the facility has entered into a MOU with the local rape crisis center, Lily Pad SANE Center. An interview with the executive director confirmed the agency will provide services to the facility's Residents. Services include providing an advocate to accompany a Resident victim of sexual abuse during the forensic exam and any other interviews if the Resident requested it. She confirmed that they operate a 24/7 hotline for Residents to call for counseling or to report an allegation of sexual abuse.</p>
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115.54	Third-party reporting
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1477 461">Policy and Documents Reviewed: Georgia Department of Corrections Policy, 208.6, PREA; The Bainbridge RSAT Pre-Audit Questionnaire; GDC Policy, 227.02, Statewide Grievance Process; The Department’s Website contains a section entitled: “How do I report sexual abuse or sexual harassment?”; One (1) Reviewed Investigation Package; The brochure entitled, “Sexual Assault, Sexual Harassment, Prison Rape Elimination Act – How to Prevent It and How to Report It”; Reviewed PREA Related Brochures (An Overview for Offenders – Do You Know Your Rights and Responsibilities?); PREA Related Posters</p> <p data-bbox="244 497 1225 524">Interviews: Residents, PREA Compliance Manager Observations: Review of the Agency’s Website.</p> <p data-bbox="244 560 1477 882">Discussion of Policy and Documents: The Georgia Department of Corrections and the Bainbridge RSAT provide multiple ways for inmates to access third parties who may make reports on behalf of an inmate. GDC provides contact information enabling Third Party reports may be made to the GDC Ombudsman’s Office, to the GDC TIP Line and to the agency’s PREA Coordinator. Information is provided to inmates that allow them to call or write the Ombudsman’s Office. They are also informed they may report in writing to the State Board of Pardons and Paroles, Office of Victim Services. This information is provided in the brochure given to inmates during admissions/orientation. The brochure entitled, “Sexual Assault, Sexual Harassment, Prison Rape Elimination Act – How to Prevent It and How to Report It” provides the phone number and mailing address for the Ombudsman and the mailing address for reporting to the Director of Victim Services. A PREA hotline is also available for third party reports and an inmate’s pin is not required to place a call using the “hotline”. The auditor tested a phone and found it operational. Dialing instructions are posted at the phone.</p> <p data-bbox="244 918 1477 1106">The Department’s Website contains a section entitled: “How do I report sexual abuse or sexual harassment?” These are provided as ways to make third party reports: Call the PREA Confidential Reporting Line (1-888-992-7849); email PREA.report@gdc.gov; Send correspondence to the Georgia DOC, Office of Professional Standards/PREA Unit; contact the Ombudsman and Inmate Affairs Office (numbers and email provided and Contact the Office of Victim Services phone number and email address provided). Anyone wishing to make a report can do so anonymously however there is a request that as much detail as possible be provided. The agency also has a TIP Line accessible to third parties.</p> <p data-bbox="244 1142 1426 1227">The PREA brochure, An Overview for Offenders, Do You Know Your Rights and Responsibilities? Provides contact information for the GDC Sexual Assault Hotline, PREA Coordinator, State Board of Pardons and Parole Office of Victim Services, and through the Ombudsman’s Office.</p> <p data-bbox="244 1240 1461 1326">Another poster provides the following information regarding reporting to outside entities: Resident Hotline; State Board of Pardons and Parole, Office of Victim Services, Lily Pad SANE Center (for emotional support services and victim advocacy) and the Ombudsman’s Office. Contact information is provided for each of those entities.</p> <p data-bbox="244 1361 1433 1420">Others, including family members, friends and other residents, may make a report for a resident. They may also assist a resident in filing a grievance or file one for him.</p> <p data-bbox="244 1456 1461 1576">Discussion of Interviews: Staff when asked to name the ways inmates could report allegations of sexual abuse consistently named third parties as a way, Residents, could report. Staff related that they would accept a report through or from any source and that they would report it immediately to their supervisor and follow-up with a written report before the end of the shift.</p> <p data-bbox="244 1612 1461 1702">When Residents were asked to name multiple ways to report internally and externally, one of the ways they mentioned was through third parties. They did not all refer to them as third parties but most mentioned that family members or relatives as well as other Residents could report for them.</p>

115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy and Document Review: Department of Corrections Policy, 208.6, Sexually Abusive Behavior Prevention and Intervention Program, F. Official Response Following and Inmate Report, 1. Staff and Department Reporting Duties; the reviewed Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement; and one (1) investigation report for 2020 through 2021</p> <p>Interviews: Superintendent, PREA Coordinator; PREA Compliance Manager; SART Leader</p> <p>Discussion of Policy and Documents Reviewed: Department of Corrections Policy, 208.6, Sexually Abusive Behavior Prevention and Intervention Program, F. Official Response Following and Inmate Report, 1. Staff and Department Reporting Duties, requires staff who witness or receive a report of sexual assault, sexual harassment, or who learn of rumors or allegations of such conduct, must report information concerning incidents or possible incidents of sexual abuse or sexual harassment to the supervisor on duty and write a statement, in accordance with the Employee Standards of Conduct.</p> <p>The highest-ranking supervisor on duty who receives a report of sexual assault or sexual harassment, is required to report it to the appointing authority or his/her designee immediately. The supervisor in charge is required to notify the PREA Compliance Manager and/or SART Leader as designated by the Local Procedure Directive. Appointing authorities or his/her designee may make an initial inquiry to determine if a report of sexual assault, sexual harassment, is a rumor or an allegation.</p> <p>Allegations of sexual assault and sexual harassment are major incidents and are required to be reported in compliance with policy. Once reported, an evaluation by the SART Leader/Team of whether a full response protocol is needed will be made. Appointing authorities or designee(s) are required to report all allegations of sexual assault with penetration to the Office of Professional Standards (OPS) Special Agent In-Charge and the Department's PREA Coordinator immediately upon receipt of the allegation. OPS will determine the appropriate response.</p> <p>Staff, failing to comply with the reporting requirements of DOC Policy, may be banned from correctional facilities or will be subject to disciplinary action, up to and including termination. If an alleged victim is under the age of 18, the Department reports the allegation to the Department of Family and Children Services, Child Protection Services Section. Staff are not to disclose any information concerning sexual abuse, sexual harassment or sexual misconduct of an offender, including the names of the alleged victims or perpetrators, except to report the information as required by policy, or the law, or to discuss such information as a necessary part of performing their job.</p> <p>This facility does not house youthful offenders; however, policy requires if the victim was under the age of 18, the Field Operations Manager, in conjunction with the Director of Investigations, or designee, is required to report the allegation to the Department of Family and Children Services, Child Protective Services Section. Also, if the victim is considered a vulnerable adult under Georgia Law, the Director of Investigations or designee, will make notification to the appropriate outside law enforcement agency.</p> <p>Multiple examples of staff acknowledgement statements were provided.</p> <p>Policy requires that staff be aware of and attempt to detect to attempt to prevent sexual abuse, sexual harassment or sexual misconduct, through offender communications, comments to staff members, offender interactions, changes in offender behavior, and isolated or vulnerable areas of the institution.</p> <p>There was one allegation of sexual abuse/sexual harassment made during the past 12 months.</p> <p>Discussion of Interviews: Random Staff named multiple ways Residents could report. When Residents were asked specifically about the ways they could report, Residents typically said to a staff or using the hotline. When asked if inmates could report anonymously or through third parties, staff consistently reported they would take a report from any source and they would take all allegations seriously and report it. All staff stated they would complete a statement before the end of their shift.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy and Documents Reviewed: GDC Policy 208.06, Prison Rape Elimination Act- PREA, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph 2, Facility Protection Duties; SOP 209.06, Administrative Segregation; the Pre-Audit Questionnaire</p> <p>Interview: Agency Head, Superintendent</p> <p>Discussion of Policy and Documents: GDC Policy 208.06, Prison Rape Elimination Act- PREA, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph 2., Facility Protection Duties, requires that upon learning of a sexual abuse, staff are to separate the alleged victim and abuser and ensure the alleged victim has been placed in safe housing which may be protective custody in accordance with SOP 209.06, Administrative Segregation. If the inmate victim is placed in administrative segregation, a note is placed in SCRIBE indicating the reason for the placement. If the offender remains in Administrative Segregation for 72 hours, ensure that the Sexual Assault Response Team has again evaluated the victim within 72 hours. Again, a note is to be entered SCRIBE indicating the reason for continued placement. The care and treatment member of SART is responsible for documenting the reasons in SCRIBE. If the alleged perpetrator is an offender and if the alleged perpetrator has been placed in Administrative Segregation in accordance with SOP 209.06, Administrative Segregation, again, a case note documenting the reason for placement is completed and documented in SCRIBE. If the offender remains in Administrative Segregation for 72 hours, the SART evaluates the offender again within 72 hours and if continued placement is required, the reasons are documented in SCRIBE. The care and treatment staff from the SART is responsible for the documentation.</p> <p>If the alleged perpetrator is a staff member, the staff member and alleged victim are separated during the investigation period. The staff member may be reassigned to other duties or other work area; transferred to another institution, suspended with pay pending investigation or temporarily banning the individual from the institution, whichever option the appointing authority deems appropriate. Staff are instructed, if applicable, they are to consult with the SART, Regional Director, the Department's PREA Coordinator or the Regional SAC 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 offender's file with specific reasons for returning the offenders to the general population or keeping the offenders segregated and ensure the SART has evaluated the victim within 24 hours of the report. Once a determination has been made that there is sufficient evidence of sexual assault, staff ensures closure of the matter by serving notice of adverse action or banning the staff member, making housing and classification changes if the perpetrator is an offender, and updates the victim's offender file with incident information.</p> <p>Residents identified as at risk, according to staff, will be placed in the bunks that are closest to the control room where they can be more easily monitored. The Superintendent has designated E Dorm as a "safe" dorm for residents whose screening identifies the residents as potential victims of sexual assault.</p> <p>The Pre-Audit Questionnaire documented there have been no incidents in which an inmate was at substantial risk of imminent sexual abuse during the past twelve months.</p> <p>Discussion of Interviews: Interviews with the Agency Head and Superintendent, reviewed incident reports for the past 12 months, confirmed there were no residents at risk of imminent sexual abuse in the past 12 months.</p> <p>Upon learning that a Resident is at risk of imminent sexual abuse, the interviewed staff said they would notify their immediate supervisor and remove the Resident from the potential threat or aggressor. It was a mixed bag about where to put him. About fifty percent of the staff said they'd place the resident in a "holding cell" or protective custody immediately to protect him until the administration made a decision about where to house him. All of them said they would take immediate action.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1473 331">Policy and Documents Reviewed: DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, 3. Reporting to other Confinement Facilities; Pre-Audit Questionnaire; Reviewed Incident Reports</p> <p data-bbox="244 360 659 387">Interviews: Superintendent; Agency Head</p> <p data-bbox="244 416 1485 779">Discussion of Policy and Reviewed Documents: DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, 3. Reporting to other Confinement Facilities, requires that in cases where there is an allegation that sexually abusive behavior occurred at another Department facility, the Warden/designee of the victim's current facility is required to provide notification to the Warden of the identified institution and the Department's PREA Coordinator. In cases alleging sexual abuse by staff at another institution, the Warden of the inmate's current facility refers the matter directly to the Office of Professional Standards Special Agent In-Charge. For the non- Department secure facilities, the Warden/Superintendent will notify the appropriate office of the facility where the abuse allegedly occurred. For non- Department facilities, the Warden/designee(s) contacts the appropriate office of that correctional Department. This notification must be provided as soon as possible but not later than 72 hours after receiving the allegation. Notification is documented. The facility head or Department office receiving the notification is required to ensure that the allegation is investigated in accordance with the PREA Standards.</p> <p data-bbox="244 808 1469 936">The Pre-Audit Questionnaire documented that there have been no allegations received from another facility reporting that a Resident reported to another facility that he was sexual abused while at Bainbridge RSAT and no reports of a Resident at this facility reporting having been abused at another facility. This was confirmed through reviewed incident reports alleging sexual abuse/sexual harassment, incident reports for the past 12 months.</p> <p data-bbox="244 965 1469 1093">Discussion of Interviews: Interviews with the Agency Head and Superintendent confirmed they are aware of the policy requiring reporting to other facilities upon receiving an allegation of sexual abuse that occurred in another facility. Interviews indicated the SART at Bainbridge would cooperate with the investigation and if the inmate at Bainbridge reported sexual abuse at another facility, Bainbridge RSAT would initiate an immediate investigation.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1422 360">Policy and Documents Review: Georgia DOC Policy, 208.6; local protocol, "PREA Reporting Process"; Pre-Audit Questionnaire; SANE's List; PREA Medical Log; Bainbridge RSAT PDC PREA Local Procedure Directive; SART Team Member List; PREA Employee Checklist</p> <p data-bbox="244 394 1353 421">Interviews: Security Staff and Non-Security Staff First Responders, Inmates who Reported a Sexual Abuse - NA</p> <p data-bbox="244 454 1485 846">Discussion of Policy and Documents: Georgia DOC Policy, 208.6, describes, in detail, actions to take upon learning that a resident has been the victim of sexual abuse. Actions described included the expectations for non-security first responders. Policy and local operating procedures require that upon learning of an allegation that an inmate was sexually abused, the first security staff to respond to the report is to respond in the following manner: 1) Separate the alleged victim and abuser 2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, in compliance with SOP IK01-0005, Crime Scene Preservation; 3) If the abuse occurred within 72 hours 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; 4) If the abuse occurred within 72 hours ensure that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking or eating; 5) If the first responder is not a security staff, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, and notify security staff immediately.</p> <p data-bbox="244 880 1477 969">The Sexual Assault Response Team will be notified and will implement the local protocol. The facility has a Local Procedure Directive and Coordinated Response Plan designating the members of SART team. They included security, mental health, medical and retaliation monitor.</p> <p data-bbox="244 1003 1485 1126">The local protocol, PREA Employee Checklist, identifies actions to take upon a receiving a report of sexual abuse. A general statement affirms and requires that staff will be required to assume all reports of sexual victimization, regardless of the source of the report, are credible and respond accordingly First Responders are charged with the following responsibilities, as described in the Coordinated Response Plan:</p> <p data-bbox="244 1160 1190 1187">SECURITY STAFF FIRST RESPONDERS: Intervene in any in-progress assaults and separate:</p> <ul data-bbox="244 1220 1453 1776" style="list-style-type: none"> <li data-bbox="244 1220 564 1247">· The alleged victim and abuser. <li data-bbox="244 1281 443 1308">· Detain the abuser. <li data-bbox="244 1341 823 1368">· Call for emergency medical care for the victim, if needed. <li data-bbox="244 1402 1273 1429">· Immediately notify the shift supervisor and remain on the scene until relieved by responding personnel. <li data-bbox="244 1462 644 1489">· Preserve and protect the crime scene. <li data-bbox="244 1523 1018 1550">· Request the victim not take any actions that could destroy physical evidence. <li data-bbox="244 1583 1139 1610">· Ensure that the alleged abuser not take any actions that could destroy physical evidence. <li data-bbox="244 1644 1410 1697">· Do not reveal any information related to the incident to anyone other than staff involved with investigating the alleged incident. <li data-bbox="244 1731 1453 1785">· Document a detailed description of the Victim and abuser locations, affect; wounds and where they are, and anything the victim or abuser report to you. <p data-bbox="244 1821 647 1848">NON-SECURITY FIRST RESPONDERS:</p> <ul data-bbox="244 1881 1453 2134" style="list-style-type: none"> <li data-bbox="244 1881 1098 1908">· Request the alleged victim not take any actions that could destroy physical evidence. <li data-bbox="244 1942 1107 1968">· Request the alleged abuser not take any actions that could destroy physical evidence. <li data-bbox="244 2002 593 2029">· Report to designated supervisors. <li data-bbox="244 2063 1410 2116">· Do not reveal any information related to the incident to anyone other than staff involved with investigating the alleged incident. <li data-bbox="244 2150 1453 2177">· Document a detailed description of the Victim and abuser locations, affect; wounds and where they are, and anything the

victim or abuser report to you.

Coordinated actions are described in the same document and will be discussed in Standard 115.65, Coordinated Response.

In the past 12 months, the number of allegations that an inmate was sexually abused: 0

Discussion of Interviews: Interviews with staff confirmed they are knowledgeable of their roles as first responders. One hundred percent of the staff stated the steps they would take as first responders. They stated they would separate the alleged victim and aggressor, call the shift supervisor, tell the alleged victim and abuser not to change clothes, shower, brush their teeth or take any actions that might interfere or destroy potential evidence, secure the crime scene and document anyone going in or out of the scene. Most staff included taking the alleged victim to medical. Non-security staff articulated the same steps, including separating the victim and abuser and securing the crime scene.

The facility has a Local Procedure Directive and Coordinated Response Plan designating the members of SART team. They included security, mental health, medical and retaliation monitor. Contact information for all members is provided on the Coordinated Response plan to include, the Superintendent.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 1474 365">Policy and Documents Reviewed: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph 5, Coordinated Response; local protocol, "PREA Reporting Process"; GDC Sexual Abuse Response Checklist (GDC 208.06, Attachment 6); PREA Employee Checklist</p> <p data-bbox="240 394 692 421">Interviews: Superintendent, First Responders</p> <p data-bbox="240 450 1485 645">Discussion of Policies and Documents: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph 5, Coordinated Response, requires each facility to develop 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. The plan must be kept current and include names and phone numbers of coordinating parties. The facility provided the Coordinated Response Plan in a document entitled: PREA Employee Checklist.</p> <p data-bbox="240 674 1458 801">The local Coordinated Response Plan is detailed in the Facility's PREA Employee Checklist. In addition to the duties of the first responders, both security and non-security, the plan describes the responsibilities of the shift supervisor, including the required notifications; Sexual Assault Response Team Leader responsible for conducting sexual abuse and sexual harassment investigations.</p> <p data-bbox="240 831 1469 893">There has been one (1) incident or allegations of sexual harassment in the past twelve months. This was confirmed through the reviewed Pre-Audit Questionnaire and investigations reports reviewed.</p> <p data-bbox="240 922 1382 949">Discussion of Interviews: All interviewed staff articulated their roles in responding to an allegation of sexual assault.</p> <p data-bbox="240 978 1485 1075">The facility has a Local Procedure Directive and Coordinated Response Plan designating the members of SART team. They included the PREA Compliance Manager, security, mental health, medical and retaliation monitor. Contact information for all members is provided on the Coordinated Response plan to include, the Superintendent.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 1417 331">The State of Georgia is a right to work state. The Georgia Department of Corrections employees are not members of a union. The Department is not involved in any form of collective bargaining.</p> <p data-bbox="242 360 1406 421">Interviews: Superintendent; Statewide PREA Coordinator; Statewide Assistant PREA Coordinator; PREA Compliance Manager; PREA Coordinator as Agency Head Designee (previously).</p> <p data-bbox="242 450 1477 611">Discussion of interviews: Interviews with the Statewide PREA Coordinator, Assistant Statewide PREA Coordinator, Superintendent; PREA Compliance Manager and previous interviews with the PREA Coordinator serving as the Agency Head's Designee confirmed that Georgia is a Right to Work State and employees are all non-union and none involved in any form of collective bargaining. The Warden can remove any staff member from contact with inmates following an allegation of sexual abuse or sexual harassment.</p>

115.67	Agency protection against retaliation
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1445 331">Policy and Documents Reviewed: DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program; 90 Day Offender Sexual Abuse Review Checklist (GDC Form)</p> <p data-bbox="244 367 1474 456">Interviews: Agency Head, Superintendent, Designated Staff Member Charged with Monitoring Retaliation, Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – NA, Inmates who Reported a Sexual Abuse - NA</p> <p data-bbox="244 492 1474 779">Discussion of Policy and Documents Review: GDC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, affirms the agency has a zero tolerance for any form of retaliation and is committed to protecting inmates or staff who report sexual abuse and sexual misconduct or sexual harassment from retaliation. Policy requires that anyone who retaliates against a staff member or an offender who has reported an allegation of sexual abuse or sexual harassment in good faith is subject to disciplinary action. Policy requires a staff be identified to monitor for retaliation. Additionally, policy provides multiple protection measures including: housing changes for inmates, transfers, removal of alleged staff or inmate abusers from contact with victims and emotional support for inmates or staff who fears retaliation. Monitoring is required to be conducted for at least 90 days following a report of abuse. Monitoring will include monitoring the conduct and treatment of inmates and staff to see any changes to indicate possible retaliation and to remedy any retaliation.</p> <p data-bbox="244 815 1474 972">Monitoring includes: review of inmate disciplinary reports, housing or program changes, negative performance reviews or reassignments of staff etc. Monitoring may continue beyond 90 days if the initial monitoring indicates the need for it. Periodic status checks of inmates will be conducted. The obligation for monitoring terminates if the allegation is unfounded. Policy requires that monitoring is documented on the GDC Form 90 Day Offender Sexual Abuse Review Checklist. The checklist is completed for each inmate being monitored.</p> <p data-bbox="244 1008 1474 1097">There was one allegation of sexual harassment; this was confirmed through the reviewed Pre-Audit Questionnaire, reviewed incident reports for the past 12 months and a report from the PREA Unit PREA Analyst and interviews with the Superintendent and Retaliation monitor.</p> <p data-bbox="244 1133 1474 1223">Discussion of Interviews: The retaliation monitor indicated that she would contact the Resident following an allegation of sexual abuse or sexual harassment. She stated she would make sure the Resident knows she is the person to contact with any retaliation issues.</p> <p data-bbox="244 1258 1474 1379">She stated once an allegation is made, she would ensure that if the allegation was against a staff she would separate the staff from the Resident until an investigation could be conducted. The staff would be placed on “no contact” status. If the allegation is Resident on Resident, she indicated she could move the Resident to another dorm if that would keep them safe, possibly transfer the resident to another facility to ensure his safety.</p> <p data-bbox="244 1415 1445 1482">Things the staff would monitor would be disciplinary reports, grievances, movements and detail changes. If it was a staff fearing retaliation, the monitor would look at things like work assignments, shifts, details and performance reports.</p> <p data-bbox="244 1518 1490 1576">The monitor would make contact with the Resident/Staff every 30 days, 60 days, 90 days and more if needed. The monitoring would be documented on the GDC Retaliation Form.</p>

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy and Documents Reviewed: Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, 3. Protective Custody</p> <p>Interviews: Agency Head, Superintendent, Staff who Supervise Inmates in Segregated Housing, Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – NA, Inmates who Reported a Sexual Abuse - NA</p> <p>Discussion of Policy and Documents: Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, 3. Protective Custody, prohibits placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the inmate may be held in involuntary segregation for less than 24 hours while completing the assessment. This placement, including concern for the inmate’s safety, must be documented in the inmate/offender database, SCRIBE, documenting concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. Inmates who are placed in involuntary segregation are housed there only until an alternative means of separation from likely abusers can be arranged and the assignment, ordinarily, shall not exceed 30 days. Reviews are required to be conducted every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>Inmates in involuntary segregation will receive services in accordance with SOP HN09-0001, Administrative Segregation.</p> <p>The reviewed Pre-Audit Questionnaire documented there has been no incidents resulting in a Resident being placed in involuntary segregated housing during the past twelve (12) months. This was confirmed by reviewing grievances filed during the past 12 months, incident reports made during the past 12 months and interviews with the SART, the Superintendent, PREA Compliance Manager and random and targeted Residents.</p> <p>Discussion of Interviews: Interviews with staff indicated that residents at risk are placed in Dorm E, (designated safe dorm). The unit does have segregation/holding cells. If there were no options to keep a resident safe, he could be placed in a holding cell until staff assessed the situation and determined the best place to keep the resident safe.</p> <p>If a victim was placed in involuntary segregation for protection, interviewed staff stated the inmate would receive programming, visits from medical and the counseling staff, recreation and any mandated education while in protective custody and if any of those services were not provided, the reasons would be documented in the logbook.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1474 461">Policy and Documents Reviewed: Georgia Department of Corrections Policy, 208.6, G. Investigations; PREA Investigation Summary; Sexual Abuse Incident Review Checklist; Notification of Results of Investigation; Referrals to Medical and Mental Health (including the statements made by medical and counseling staff); PREA Initial Notification Form; Forms documenting SART receiving grievances alleging sexual abuse or sexual harassment; GDC 90 Day Offender Sexual Abuse Review Checklist; GDC Incident Report; Reviewed NIC Certificates; Coordinated Response Plan; Pre-Audit Questionnaire; One (1) Investigation Package</p> <p data-bbox="244 495 1150 521">Interviews: Superintendent, Investigative Staff, Inmates who Reported a Sexual Abuse - NA</p> <p data-bbox="244 555 1482 1111">Discussion of Policy and Documents Reviewed: The Georgia Department of Corrections (GDC) requires all allegations of sexual abuse and sexual harassment to be investigated. The policy requires that even a suspicion is investigated. The GDC requires that each facility has a Sexual Assault Response Team (SART) composed of staff who serves primarily as the “investigator” along with a representative from medical and a mental health or counseling staff. The SART’s role is to conduct an initial investigation into the allegation, unless there is obvious penetration or an assault, making it apparent that a potential criminal act has occurred. When it appears that an act or allegation is criminal in nature the Superintendent will contact the Regional Office who will dispatch a Special Agent to conduct the investigation. The Special Agent has the authority and responsibility to conduct criminal investigations and has “arrest” powers. Special Agents receive training to become investigators by the Georgia Bureau of Investigations. They also complete the online training provided by the National Institute of Corrections, “PREA: Conducting Sexual Abuse Investigations in Confinement Settings.” The SART will continue to investigate all other allegations including allegations of sexual harassment however if the Superintendent decides to, he may ask the District Office to determine if the allegation can be resolved at a local level or if the Special Agent needs to be involved. The SART investigator has completed the Specialized Training and the team, after reviewing all the evidence collected, determines, based on a preponderance of the evidence if the allegation is substantiated, unsubstantiated, or unfounded. Written reports document administrative investigations conducted by the SART. The Special Agent is responsible for reports of criminal investigations. Notification is made to the resident at the conclusion of the investigation to inform the resident of the outcome of the investigation.</p> <p data-bbox="244 1144 1485 1904">Georgia Department of Corrections Policy, 208.6, G. Investigations, describes the investigative process. Appointing authorities or his/her designee may make the initial investigation inquiring to determine if a report of sexual abuse or sexual harassment is a rumor or an allegation. The Local Sexual Assault Response Team is responsible for initially inquiring and subsequent investigation of all allegations of sexual abuse or sexual harassment with limitations. In cases where allegations are made against staff and the SART deems the allegation is unfounded or unsubstantiated by evidence of facility documentation, video monitoring systems, witness statements, or other investigative means, the case can be closed at the facility level. The Appointing Authority or designee(s) are required to report all allegations of sexual abuse with penetration and those with immediate and clear evidence of physical contact, to the OPS Special Agent In-Charge and the Department’s PREA Coordinator immediately upon receipt of the allegation. If an investigation cannot be cleared at the local level, the Special Agent In-Charge determines whether to open an official investigation and if so, dispatches an investigator who has received special training in sexual abuse investigations. When criminal investigations involving staff are completed, the investigation is turned over to the Office of Professional Standards to conduct any necessary compelled administrative reviews. After each SART investigation, all substantiated cases are referred to the OPS Criminal Investigations Division while all unsubstantiated SART investigations are referred to the Office of Professional Standards for an administrative review. The Department follows a uniform protocol for obtaining usable physical evidence for administrative proceedings and criminal prosecution. Investigations are required to be prompt and thorough, including those reported by third parties or anonymously. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Reports are documented and include descriptions of physical and testimonial evidence, reasoning behind the credibility of assessments and investigative facts and findings. Criminal investigations are documented in written reports that contain thorough descriptions of physical, testimonial, and documentary evidence and copies of all documentary evidence when feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The departure of the alleged abuser or victim from the employment or control of the Department does not provide a basis for termination of the investigation.</p> <p data-bbox="244 1937 1414 1995">The facility has a Sexual Assault Response Team. The team consists of a lead member who initiates the investigation, retaliation monitor, medical staff, and mental health staff.</p> <p data-bbox="244 2029 1461 2119">There was one (1) investigation conducted in the past 12 months. The Resident was notified of the outcome. Investigations contained the following:</p> <ul data-bbox="244 2096 496 2119" style="list-style-type: none"> - PREA Initial Notification

- Incident Report
- Witness Statements
- Evidence Reviewed
- Supplemental Report
- Notice to resident
- Retaliation Monitoring Sheet
- Incident Review (Where required)

Discussion of Interviews: A previous interview with an Office of Professional Standards Special Agent indicated he and the other Special Agents have completed the Specialized on-line training from the National Institute of Corrections as well as Specialized Training to become

Special Agents. That training was extensive and conducted by the Georgia Bureau of Investigation. He described the investigation process and indicated that if there was penetration he would come on out to the facility and probably be here when the Sexual Assault Nurse Examiner arrives and conducts the forensic exam. After the exam the "rape kit" would be turned over to the Special Agent who would take the kit to the Georgia Bureau of Investigations for testing.

A facility-based investigator also described in detail, the role of the Sexual Abuse Response Team when conducting investigations of sexual abuse and sexual harassment at the facility. He stated he would begin an investigation immediately. Evidence he would secure would be witness statements from the alleged victim and aggressor, as well as any other witnesses. He would review any camera footage that might be available and any other documentation that might be reviewed in an investigation. If the allegation appeared to be criminal in nature he would ensure the scene is secured and evidence protected until the Special Agent arrived.

Then his role would be to support the Special Agent in whatever ways he/she needed. Interviews with facility staff confirmed they all knew the SART team conducts sexual abuse/harassment investigations in this facility.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy and Documents Reviewed: The Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Section G. 14</p> <p>Interviews: Facility-Based Investigator</p> <p>Discussion of Policy and Documents Reviewed: The Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Section G. 14, requires that there shall be no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>The Lead Sexual Assault Team Member and facility-based investigator affirmed that the standard of evidence to substantiate an allegation of sexual abuse is “the preponderance of the evidence”.</p>

115.73	Reporting to inmates
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1453 362">Policy and Documents Reviewed: GDC Policy 208.06, Prison Rape Elimination Act – PREA, Sexually Abusive Behavior Prevention and Intervention Program, G.15; Reviewed three (3) investigation packages; Reviewed GDC Notification Form, Attachment 5, GDC 208.6; Pre- Audit Questionnaire</p> <p data-bbox="244 398 1150 425">Interviews: Superintendent, Investigative Staff, Inmates who Reported a Sexual Abuse - NA</p> <p data-bbox="244 461 1477 712">Discussion of Policy and Documents Review: Following an investigation into an allegation of sexual abuse, within 30 days, the facility is required, by policy, (208.6), to notify the inmate of the results of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. GDC Policy 208.06, Prison Rape Elimination Act – PREA, Sexually Abusive Behavior Prevention and Intervention Program, G.15, requires that following the close of an investigation into an offender’s allegation that he/she suffered sexual abuse in a Department facility, the facility is required to inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Policy requires the notification be completed by a member of the local SART unless the appointing authority delegates to another designee under certain circumstances.</p> <p data-bbox="244 748 1477 837">Notifications are required to be documented. If an inmate is released from the Department’s custody the Department’s obligation to “notify” the inmate of the outcome of the investigation is terminated. Notifications are required to comply with the PREA Standards and DOC Policies.</p> <p data-bbox="244 873 1398 927">If an outside entity conducts the investigation the agency/facility will request the relevant information from the agency conducting the investigation to inform the resident of the outcome of the investigation.</p> <p data-bbox="244 963 1477 1151">A member of the SART is required to notify the resident when a staff member is no longer posted within the resident’s unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. The agency would also notify the resident when the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="244 1187 1414 1276">The notification form would document, for the resident, if the investigation was determined to be substantiated, unsubstantiated, unfounded or referred to OPS. If the allegation is determined to be substantiated, unsubstantiated, or unfounded, the resident is notified of any of the following if applicable:</p> <ul data-bbox="244 1312 1286 1688" style="list-style-type: none"> · Staff member is no longer posted within the inmate’s unit. · Staff member is no longer employed at the facility. · Staff member has been indicted on a charge related to sexual abuse with the facility. · Staff member has been convicted on a charge related to sexual abuse within the facility. · The alleged abuser (offender) has been indicted on a charge related to sexual abuse within the facility. · The alleged abuser (offender) has been convicted on a charge related to sexual abuse within the facility. · Other: Include explanation of why “other:” was checked. <p data-bbox="244 1724 1461 1850">There were three allegations of sexual harassment in the past twelve months. The auditor reviewed each of those investigations. One was unfounded and two allegations were determined not to be a PREA incident. Documentation was provided confirming the Residents were notified of the outcome of the investigations. One Resident had been transferred to another facility and the notification was mailed to the facility to give to the Resident.</p> <p data-bbox="244 1886 1422 1939">Discussion of Interviews: Interviews with the SART Leader indicated that a member of SART and/or PREA Compliance Manager would be responsible for notifying the Residents of the outcome of the investigation.</p>

115.76	Disciplinary sanctions for staff
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1442 398">Policy and Documents Reviewed: Department of Corrections Policy, 208.6, Prison Rape Elimination Act, H. Discipline, 1. Disciplinary Sanction for Staff; GDC Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement for Employees and Unsupervised Contractors and Unsupervised Volunteers; Reviewed Pre-Audit Questionnaire; Reviewed Grievances; Incident Reports</p> <p data-bbox="244 434 839 461">Interviews: PREA Compliance Manager and Superintendent</p> <p data-bbox="244 497 1474 622">Discussion of Policy and Document Review: Department of Corrections Policy, 208.6, Prison Rape Elimination Act, H. Discipline, 1. Disciplinary Sanction for Staff, requires staff who engages in sexual misconduct with an offender are banned from correctional institutions or subject to disciplinary action, up to and including, termination, whichever is appropriate. Staff may also be referred for criminal prosecution when appropriate.</p> <p data-bbox="244 658 1474 761">The presumptive disciplinary sanction for sexual touching is termination. Violations of Department policy related to sexual abuse or sexual harassment (other than engaging in sexual abuse) 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 with similar histories.</p> <p data-bbox="244 797 1474 900">Terminations for violations of the Department sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation are reported to law enforcement agencies unless the activity was clearly not criminal. These cases are also reported to the Georgia Peace Officers Standards and Training Council (POST).</p> <p data-bbox="244 936 1474 1039">Substantiated cases of nonconsensual sexual contact between offenders or sexual contact between a staff member and an offender will be referred for criminal prosecution. This was confirmed through interviews with the PREA Compliance Manager and Superintendent.</p> <p data-bbox="244 1075 1474 1312">Staff, as a part of their PREA training signs a GDC Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement for Employees and Unsupervised Contractors and Unsupervised Volunteers contains a warning that any violation of the policy will result in disciplinary action, including termination, or that they will be banned from entering any correctional institution. Furthermore, it assets that staff understand that in accordance with Georgia Law, O.C.G.A. 16-6-5.1, certain correctional staff members who engage in sexual contact with an offender commit sexual assault, a felony punishable by imprisonment of not less than one nor more than 25 years, a fine of \$100,000.00 or both. Staff acknowledges that an offender cannot consent to sexual activity. The auditor reviewed PREA Acknowledgment Statements signed by employees and contractors.</p> <p data-bbox="244 1348 1474 1402">In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0</p> <p data-bbox="244 1438 1474 1541">In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0</p> <p data-bbox="244 1576 1474 1680">Discussion of Interviews: Interviews with Superintendent and the PREA Compliance Manager indicated that if a staff were involved in an allegation of sexual abuse the staff would be placed on no-contact with that resident or placed on administrative leave. If the allegations were substantiated, the staff would be banned from all GDC facilities and the presumptive disciplinary action is termination.</p>

115.77	Corrective action for contractors and volunteers
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1473 398">Policy and Documents Reviewed: DOC Policy, 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph #2. Contractors and Volunteers; GDC Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement for Employees and Unsupervised Contractors and Unsupervised Volunteers; Pre-Audit Questionnaire</p> <p data-bbox="244 434 512 461">Interviews: Superintendent</p> <p data-bbox="244 497 1473 622">Discussion of Policies and Reviewed Documents: DOC Policy, 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph #2. Contractors and Volunteers, requires that any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement agencies, unless the activity was clearly not criminal and to relevant licensing bodies.</p> <p data-bbox="244 658 1422 739">The facility is required to take appropriate remedial measures and to consider whether to prohibit further contact with inmates in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p data-bbox="244 775 1473 999">Contractors and Volunteers, as a part of their PREA training sign a GDC Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement for Employees and Unsupervised Contractors and Unsupervised Volunteers contains a warning that any violation of the policy will result in disciplinary action, including termination, or that they will be banned from entering any correctional institution. Furthermore, it assets that staff understand that in accordance with Georgia Law, O.C.G.A. 16-6-5.1, certain correctional staff members who engage in sexual contact with an offender commit sexual assault, a felony punishable by imprisonment of not less than one nor more than 25 years, a fine of \$100,000.00 or both. Staff acknowledges that an offender cannot consent to sexual activity.</p> <p data-bbox="244 1034 1466 1124">The Pre-Audit Questionnaire documented that there were no allegations of sexual abuse or sexual harassment against any contractor or volunteer during the past 12 months. This was confirmed through reviewing incident reports from the past 12 months; monthly PREA reports; Monthly Medical PREA Logs, monthly report and from the PREA Unit Analyst.</p> <p data-bbox="244 1160 1473 1214">In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates: 0</p> <p data-bbox="244 1249 1485 1375">Discussion of Interview: The Superintendent affirmed that if they did have a volunteer or contractor who was alleged to have violated an agency sexual abuse or sexual harassment, they would be prohibited from coming into the prison and would have no contact at all with any Resident. He also stated that an investigation would be conducted and if the allegations were substantiated the volunteer or contractor would be referred for prosecution.</p>

115.78	Disciplinary sanctions for inmates
	<p data-bbox="244 147 735 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 1477 362">Policy and Documents Reviewed: GDC Policy, 208.6, Sexually Abusive Behavior Prevention and Intervention Program, H. Discipline, Paragraph 3. Disciplinary Sanctions for Offenders, Pre-Audit Questionnaire; Reviewed Incident Reports; Resident Handbook</p> <p data-bbox="244 398 501 425">Interview: Superintendent</p> <p data-bbox="244 461 1477 645">Discussion of Policy and Documents Reviewed: GDC Policy prohibits all consensual sexual activity between offenders and offenders may be subject to disciplinary action for such activity. Consensual sexual activity between offenders does not constitute sexual abuse, but it is considered a disciplinary issue. Paragraph b. requires that offenders are 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. The sanctions that may be imposed are prescribed in Standard Operating Procedures 209.01, Offender Discipline.</p> <p data-bbox="244 680 1477 837">Policy requires that the disciplinary process consider whether an offender’s mental disabilities or mental illness contributed to behavior when determining what type of sanction, if any, will be imposed. And if the facility offers therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, the facility is required to consider whether to offer the offending offender to participate in such interactions as a condition of access to programming or other benefits.</p> <p data-bbox="244 873 1437 927">Policy affirms that an 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.</p> <p data-bbox="244 963 1477 1088">Reports made in good faith upon a reasonable belief that the alleged conduct occurred shall not constitute false reporting or lying, even if the investigation does not establish sufficient evidence to substantiate the allegation. However, following an administrative finding of malicious intent on behalf of the offender making the report, then the offender will be subject to disciplinary sanctions pursuant to a formal disciplinary process in accordance with SOP 209.01, Offender Discipline.</p> <p data-bbox="244 1124 1477 1214">The reviewed resident handbook contains sanctions for Residents violating sexual abuse policies and procedures. Sanctions would range, depending on the severity of the offense, from restriction, extra duty, disciplinary isolation to extended time, revocation and criminal prosecution.</p> <p data-bbox="244 1249 1437 1303">In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 0</p> <p data-bbox="244 1339 1453 1393">In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0</p> <p data-bbox="244 1429 1477 1585">Discussion of Interview: The Superintendent confirmed that an inmate who violated a sexual abuse policy would be charged with a crime by the Office of Professional Services Investigator, who has arrest powers, and refers to the prosecutor for prosecution for the offense. If the violation was less than sexual abuse it would be treated as a rule violation and the inmate would be provided a “due process” hearing. Prior to sanctions being imposed the officers are required to consider past history as well as any mental or developmental issues.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy and Documents Reviewed: GDC Policy 208.06, Sexually Abusive Behavior Prevention and Intervention Program, I., Medical and Mental Health Care; Pre-Audit Questionnaire; Victim/Aggressor Assessment; Health Screening Form</p> <p>Interviews: Medical and Mental Health Staff</p> <p>Observations: Intake Process; Victim/Aggressor Assessment Process.</p> <p>Discussion of Reviewed Policy and Documents: GDC Medical Policies are specific and voluminous regarding health care. Health Care services are provided through a contract. The GDC Policy, 208.06, Sexually Abusive Behavior Prevention and Intervention Program I, Medical and Mental Health Care requires that the GDC provide prompt and appropriate medical and mental health services in compliance with 28 CFR 115 and in accordance with the GDC Standard Operating Procedures.</p> <p>Residents are screened upon admission to the facility by medical staff. During the initial health screening upon intake, Residents are asked about previous sexual abuse. If the Resident discloses that he was a prior victim, the Resident must be offered a follow-up with mental health.</p> <p>Additionally, if a Resident discloses prior victimization during the initial intake victim/aggressor assessment, the Resident will be offered a follow-up with either medical or a mental health practitioner. This follow-up is offered and will be completed within 14 days of the intake screening. The Resident may choose to refuse the offer and if so, the refusal will be documented.</p> <p>If the screening process indicates an offender has previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community, staff ensures that the offender is offered a follow- up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p>The facility documented on their Pre-Audit Questionnaire that there have been no allegations of either sexual abuse or sexual harassment during the past 12 months therefore they have not had any in the past 12 months to refer to mental health for follow-up. This was confirmed through review of the Pre- Audit Questionnaire, reviewed victim/aggressor assessments, and interviews with staff. If the facility had such a disclosure the Resident would be offered a follow-up with the mental health.</p> <p>Care is taken to protect reported information. Information reported by offenders related to prior victimization or abusiveness that occurred in an institutional setting is 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. Interviews with medical and mental health staff indicated that they obtain and document informed consent from Residents before reporting information about prior sexual victimization that did not occur in an institutional setting.</p> <p>Discussion of Interviews: Interviews with medical and counseling staff, as well as staff responsible for intake screening and screening for risk of victimization and/or abusiveness, indicated inmates are screened for prior victimization. Policy requires, and staff, stated in interviews, if the screening indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure the offender is offered a follow-up meeting with a medical or mental health practitioner usually the same day or next and well within 14 days of the intake screening. The medical staff related that if a Resident, during the intake screening, discloses prior victimization, their role is to offer that Resident a follow-up with mental health.</p>

115.82	Access to emergency medical and mental health services
	<p data-bbox="244 145 737 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 1458 365">Policy and Documents Reviewed: GDC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program; PREA Medical Logs; Coordinated Response Plan; Lists of SANEs; Reviewed Investigation Packages; Orientation to Health Care Document, Consents for Release of Information</p> <p data-bbox="244 394 1126 423">Interviews: Medical and Mental Health Staff, Inmates who Reported a Sexual Abuse - NA</p> <p data-bbox="244 452 1458 645">Discussion of Reviewed Policies and Documents: GDC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program requires the facility to provide prompt and appropriate medical and mental health services in compliance with this standard. It requires the SART to arrange for immediate medical examination of the alleged victim, followed by a mental health evaluation within 24 hours. One of the SART Members is the health services administrator. Medical Staff are required to contact the appropriate Sexual Assault Nurse Examiner, who will respond as soon as possible, but within 72 hours of the time the alleged assault occurred to collect forensic evidence.</p> <p data-bbox="244 674 1485 1238">The facility provided the agency's procedures for SANE Nurse Evaluation/Forensic Collection. This document provides detailed procedures beginning with the initial report of sexual abuse or assault. Medical staff is charged with conducting an initial assessment of the offender to determine if there is evidence of physical trauma requiring immediate medical intervention in accordance with good clinical judgment. Medical staff immediately initiates all necessary urgent/emergent treatment for bleeding, wounds and other traumas. They then complete the Nursing Protocol Assessment form for alleged sexual assault. Facility clinicians document physical examinations in the progress notes. When medically indicated, medical staff are required to arrange transfer the offender (if no SANE's is available on site) to the designated emergency facility for continued treatment and collection of forensic evidence. If an alleged assault occurred within 72 hours of the reported incident and the offender does not require transport to the emergency room, the designated facility SANE Nurse (from the list of SANE Nurses) shall be immediately notified and an appointment scheduled for the collection of forensic evidence. The facility provided the auditor with a list of SANEs who can be called to come to the facility to conduct the Sexual Assault Forensic Exam. This will occur only if there has been penetration, including oral penetration, reported by the patient. Otherwise no rape kit will be collected. If the sexual assault occurred more than 72 hours previously, the decision on whether the evaluation is done by a local hospital, by the SANE Nurse, or facility staff will be made on a case by case basis. The decision is made by the Health Authority in consultation with the facility investigator and in accordance with GDC PREA Policy requires that If the facility does not have a designated SANE Nurse, the offender is sent to the designated emergency room for collection of forensic evidence.</p> <p data-bbox="244 1267 1458 1395">If a Resident was sexually assaulted the Resident would go to the local hospital for a SANE exam, performed by Augusta University (GCHC). Mental Health staff is onsite to respond to sexual assault victims. Additionally, the local Rape Crisis Center, Lily Pad SANE Center, is available to provide an advocate, who would meet the Resident at the hospital and serve as a victim advocate.</p> <p data-bbox="244 1424 1477 1552">The facility provided the Medical PREA Log maintained by medical staff. This document logs the date of the incident, reported within 72 hours, Transport to ER, Inmate consent signed, SANE notified, Time notified, Date Exam scheduled, Date exam completed, time SANE arrived, Sane Conducting the Exam, Company Chain of Command for Rape Kit, and Date the rape kit is accepted by security.</p> <p data-bbox="244 1581 1150 1610">There were no Residents who required a forensic exam during the past twelve (12) months.</p> <p data-bbox="244 1639 1449 1733">The Department has a written form entitled "Orientation to Health Care". The section, "Emergency Care" tells Residents if they are having symptoms of a serious medical condition, they should notify the correctional officer immediately and the officer will notify medical and that they will be evaluated.</p> <p data-bbox="244 1762 1469 1890">Discussion of Interviews: The nurse stated the facility does not perform forensic exams. She indicated a Resident victim of sexual assault would be taken to the local hospital ER for the exam. The facility has a contract with Augusta University (GCHC) to preform SANE exams. The facility has a MOU with the Lily Pad SANE Center who would provide an advocate to accompany the victim.</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1484 329">Policy and Documents Reviewed: GDC "Procedure for Sane Nurse Evaluation/Forensic Collection: GDC Policy 208.6, PREA Reviewed Pre-Audit Questionnaire</p> <p data-bbox="244 360 678 387">Interviews: Medical and Mental Health Staff</p> <p data-bbox="244 418 1484 712">Discussion of Policy and Documents Reviewed: The agency's "Procedure for Sane Nurse Evaluation/Forensic Collection" provides specific actions required when an inmate alleges sexual abuse/assault. It also requires that following a SANE Examination, the facility provider or designee is responsible for ordering prophylactic treatment for STIs. A follow up visit by a clinician is required three working days following the exam. The facility has a facility specific coordinated response plan (Local Procedure Directive) that specifies the actions for first responders; Sexual Assault Response Team, Medical and Mental Health. GDC Policy requires that victims of sexual abuse are provided health care services, including the forensic exam at no cost to the victim. This is confirmed through review of the GDC PREA Policy as well as interviews with medical staff. GDC Policy requires that the facility attempt to conduct a mental health evaluation of all known resident on resident abusers within 60 days of becoming aware of such history and offer treatment as appropriate.</p> <p data-bbox="244 743 1348 770">When Residents to go to the hospital for a forensic exam, the hospital would offer the Resident STI prophylaxis.</p> <p data-bbox="244 801 1468 893">Discussion of Interview: The nurse confirmed the process for providing ongoing physical and mental healthcare services for victims of sexual assault. All victims of sexual assault are offered a follow-up with mental health, and ongoing treatment as necessary.</p>

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policy and Documents Review: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program J. Data Collection and Review, 1. Monthly Sexual Abuse and Sexual Assault Program Review; Pre-Audit Questionnaire</p> <p>Interviews: Warden or Designee, PREA Compliance Manager, Incident Review Team</p> <p>Discussion of Policies and Documents: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program J. Data Collection and Review, 1. Monthly Sexual Abuse and Sexual Assault Program Review, affirms and requires that each facility meet once per month to review and assess the facility's PREA prevention, detection, and response efforts.</p> <p>During that meeting, policy requires an incident review to be conducted for each sexual abuse allegation that has been concluded within the past 30 days. This review is to be conducted on all abuse allegations deemed to be substantiated and unsubstantiated. Reviews of unfounded allegations are not necessary.</p> <p>Team members consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse; whether the allegation was motivated by the perpetrator's or victim's race, ethnicity, gender identity, gay, lesbian, bisexual, transgender or intersex identification, status or perceived status, or gang affiliation, or was motivated by other group dynamics at the facility; to examine the area where the incident allegedly occurred to assess whether physical barriers in the area enabled the abuse; to assess the adequacy of staffing levels in the area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and prepare a report of findings, including, but not limited to , determinations regarding all of the above and any recommendations for improvements, and submit the report to the Superintendent or PREA Compliance Manager.</p> <p>The reviews are conducted at the end of the investigation, as required. Interviews with team members confirmed the reviews are conducted within 30 days of the conclusion of the investigation and that the team would consider, what motivated the incident (identification, status, gang related etc.), where it happened, blind spots, the presence of cameras, staffing and other items included on the Incident Review Checklist (Sexual Abuse Incident Review Checklist).</p> <p>This facility had zero allegations of sexual abuse in the past twelve months. This has been confirmed through multiple sources. These included the reviewed Monthly PREA reports to the Agency's PREA Unit; reviewed Monthly PREA Medical Logs; reviewed Pre-Audit Questionnaire; and interviews with the Superintendent; the PREA Compliance Manger; the Nurse, as well as interviews with randomly selected and targeted Residents.</p> <p>Discussion of Interviews: The facility has a process for conducting incident reviews following an investigation; interviewed staff could articulate the process. The process was articulated by the SART team members and was in compliance with Policy. The PREA Compliance Manager described the things the SART team would be looking at during the incident review and how to prevent other sexual assaults.</p>

115.87	Data collection
	<p data-bbox="242 145 762 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 1461 432">This standard is rated exceeds because of the sophisticated reports the PREA Analyst can generate. In addition to the monthly reports of sexual abuse/sexual harassment submitted to the PREA Unit from which the Annual Report is compiled, the PREA Analyst secures a report of disabled Residents/inmates for the auditor prior to each audit, enabling the auditor to identify inmates who are hearing or visually impaired or otherwise disabled. Also, prior to each audit the PREA Analyst provides the auditor with a report of all calls to the PREA Hotline during the past twelve (12) months.</p> <p data-bbox="242 461 1469 555">Policies and Documents Review: GDC Policy 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, J.3; Georgia Department of Corrections Annual Report; Monthly PREA reports to the GDC PREA Unit; Monthly Operational Report; Profile Reports from the GDC PREA Analyst; Reports of Calls to the PREA Hotline.</p> <p data-bbox="242 584 1254 613">Interviews: Statewide PREA Coordinator, Assistant Statewide PREA Coordinator (previous interviews)</p> <p data-bbox="242 642 1474 904">Discussion of Policies and Documents: The Georgia Department of Corrections collects accurate and 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 US Department of Justice. The department maintains reviews and collects data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews. Information is also secured from every facility, including private facilities with whom, DOC contracts for the confinement of inmates. Upon request, DOC provides data from the previous calendar year to the US Department of Justice no later than June 30th.</p> <p data-bbox="242 934 1477 1095">GDC Policy 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, J.3, requires each facility to submit to the Department’s PREA Analyst, each month, a report, using the electronic spreadsheet provided from the PREA Coordinator’s office. The form is submitted by email the fifth calendar day of the month following the reporting month. It requires that allegations occurring within the month will be included on this report along with the appropriate disposition. The monthly report is to be completed in accordance with the Facility PREA Log User Guide.</p> <p data-bbox="242 1124 1481 1621">The auditor reviewed the most recent Georgia Department of Corrections Annual Report. The Agency issues annual PREA reports and posts them on the GDC Website. The auditor reviewed 2018, 2019 and 2020 Georgia Department of Corrections Prison Rape Elimination Annual Reports. The reports were detailed and comprehensive. The reports indicated that the Georgia DOC has 34 prisons, 13 transitional centers, 9 probation detention centers, 5 substance abuse and integrated treatment facilities and 4 private prisons. Data is collected from each of the facilities and aggregated. Georgia DOC compiles and investigates PREA allegations in 4 major categories including 1) Staff on inmate Abuse, 2) Staff on Inmate Harassment, 3) Inmate on Inmate Abuse, and 4) Inmate on Inmate Harassment. The report provided data regarding the total number of allegations from all facilities and then it breaks the allegations down into those that were substantiated, unsubstantiated and unfounded. A chart then breaks down the data by facility. Overall, the FY 2020 report indicated there was a 3% decrease in the number of allegations compared to last year and substantiated cases decreased by 32%. This decrease in percentage is likely due to several factors: 1) Increased education in the definitions of what does, and does not meet the definition of PREA; 2) A significant decrease in the use of the PREA Hotline to report false allegations; 3) Process improvements and prevention training; and 4) Improvements in investigative procedures. Georgia Department of Corrections dedication to constant improvement and continual monitoring will allow the agency to continue to achieve its goal of protecting all offenders from sexual harassment and sexual abuse. Statistics are provided for each GDC facility.</p> <p data-bbox="242 1650 1477 1845">The GDC PREA Unit has a dedicated staff person, an analyst, who collects and analyzes the data. Based on the data reviewed the GDC can track allegations and investigations and findings from each facility and assess the need for any corrective actions. The PREA Compliance Manager related the facility sends a monthly PREA report (208.06, Attachment 2), to the Agency’s PREA Analyst. This report, according to the compliance manager, consists of the numbers of PREA Cases, victims and predators, statistics on allegations of sexual abuse, assaults, grievances filed, the results of investigations and a response to the question, “was the investigation or allegations sent to the OPS investigators.</p> <p data-bbox="242 1874 1414 1968">In addition to the monthly PREA statistical report submitted by each facility; the facility also submits to GDC, a Monthly Operational Report, providing statistics on a multitude of topics, including PREA incidents. The monthly PREA Report documents all allegations/incidents of sexual abuse or sexual harassment.</p> <p data-bbox="242 1998 1485 2125">The PREA Analyst provides the auditor, prior to each audit; reports documenting the disabilities of Residents; lists of Residents disclosing prior victimization (when available), as well as an email documenting the names of Residents contacting the PREA Hotline during the past twelve (12) months. The disability report enables the auditor to identify Residents/inmates who are hearing or visually impaired or who have some other form of disability.</p>

115.88	<p>Data review for corrective action</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Policy and Documents Review: Reviewed Georgia Department of Corrections Annual Report; Pre- Audit Questionnaire; Reviewed Agency's Website, FY 2020 Annual PREA Report</p> <p>Interviews: Agency Statewide PREA Coordinator; Assistant Statewide PREA Coordinator, PREA Compliance Manager</p> <p>Discussion of Policies and Documents Reviewed: The Georgia Department of Corrections requires each facility to conduct incident review after each sexual abuse allegation investigation if the allegations are founded or unsubstantiated. The purpose of this is to determine what the motivation for the incident was and to assess whether there is a need for corrective actions including additional staff training, staffing changes, requests for additional video monitoring technology or other actions to help prevent similar incidents in the future.</p> <p>Likewise, the agency 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 and the GDC. The department has a dedicated staff person whose job it is to collect and analyze the data.</p> <p>The reviewed annual report for 2020 affirms the agency is continuously improving the reporting and investigation methods to ensure the highest level of compliance, as well as swift corrective action when needed. The report also states the Georgia DOC continues to improve the processes of how PREA allegations are reported, investigated and tracked. The development, testing and implementation of a PREA allegation tracking method allowed for further breakdowns of allegations, along with detailed reporting from all GDC facilities, as compared to last year.</p> <p>The reviewed 2020 annual report identified initiatives at each GDC facility to improve and enhance the facility and agency's approach to prevention, detection, responding and reporting sexual abuse and sexual harassment. Annual reports are posted on the Georgia Department of Corrections website.</p> <p>The agency has contracted with Just Detention and other Organizations to assist with policies; securing Rape Crisis Centers who can provide outside advocacy services, and to help the Department to develop a transgender policy. The other initiatives developed with Just Detention are discussed in 115.11.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Policies and Documents Reviewed: GDC Policy 208.06, Prison Rape Elimination Act -PREA, Sexually Abusive Behavior Prevention and Intervention Program, VI. Record Retention of Forms Relevant to this Policy</p> <p>Interviews: Statewide PREA Coordinator; Assistant Statewide PREA Coordinator, PREA (previous interview); Compliance Manager; Superintendent</p> <p>Discussion of Policies and Documents: Georgia Department of Corrections makes all aggregated sexual abuse data from all facilities under its direct control and private facilities with whom it contracts, readily available to the public through the Georgia GDC Website. GDC Policy requires all reports are securely retained and maintained for at least 10 years after the date of the initial collection unless the Federal, State or local laws require otherwise.</p> <p>GDC Policy 208.06, Prison Rape Elimination Act -PREA, Sexually Abusive Behavior Prevention and Intervention Program, VI. Record Retention of Forms Relevant to this Policy, requires that the retention of PREA related documents and investigations will be securely retained and made in accordance with this policy and policy in VI.1, Sexual abuse data, files and related documentation requires they are retained at least 10 years from the date of the initial report.</p> <p>Criminal investigation data files and related documentation is required to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years or 10 years from the date of the initial report, whichever is greater.</p> <p>Administrative investigation data files and related documentation is to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or 10 years from the date of the initial report, whichever is greater.</p>

115.401	<p data-bbox="240 85 619 114">Frequency and scope of audits</p> <p data-bbox="240 147 735 176">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 239">Auditor Discussion</p> <p data-bbox="240 273 1474 398">Policy and Documents Reviewed: GDC Policy, 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, K. Audits; Notices of PREA Audit GDC Policy, 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, K. Audits, asserts that the Department will conduct audits pursuant to 28 C.F.R/, 114.401-405</p> <p data-bbox="240 432 1442 521">Each facility operated by the Department will be audited every three years or on a schedule determined by the PREA Coordinator. Bainbridge Residential Substance Abuse Treatment Facility was last audited on April 30, 2019 with 100% compliance.</p> <p data-bbox="240 555 1485 712">The agency also contracts with county and private facilities. Policy requires that county facilities and privately operated on behalf of the Department (housing state offenders) must meet the same audit requirements. These entities are responsible for scheduling and funding their audits. All audits are required to be certified by the Department of Justice and each facility will bear the burden of demonstrating compliance with the federal standards. A copy of the final report will be submitted to the Department's PREA Coordinator upon completion.</p> <p data-bbox="240 745 1465 871">The auditor was provided complete and unfettered access to all areas of the facility. Space in an office was provided for the auditor to conduct interviews with complete privacy. When additional documentation was requested it was provided expeditiously. During the on-site review, the auditor freely walked around the facility, interviewing informally, staff and probationers.</p> <p data-bbox="240 904 1414 965">The facility promptly provided whatever was asked for by the auditor and following the onsite audit, as information was requested the PREA Compliance Manager and the PREA Coordinator provided it expeditiously.</p> <p data-bbox="240 999 1485 1189">The PREA Notice was observed posted throughout the facility. The notice contained contact information for the auditor. The auditor did not receive any correspondence as a result of the notice posting. During the tour of the facility the auditor informally talked with Residents and staff. None of the Residents requested to talk with the auditor in private. Interviews were conducted in complete privacy and every resident chosen for interviews participated in the interviews. The audit was free to move about the facility at will, providing the opportunity for any resident to communicate with the auditor. Prior to the onsite portion of the audit the auditor received no correspondences from Residents or Staff.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 1490 365">The GDC Statewide PREA Coordinator ensures that all PREA Reports are published on the agency's website within 90 days of the completion of the report. Reports for all facilities for all reporting periods are posted on the agency's website and easily accessible to the public. Bainbridge RSAT was last audited on April 30, 2019; the facility was compliance with all standards.</p> <p data-bbox="244 394 1430 454">The auditor reviewed the Agency's website and reviewed a sample of PREA reports as well as annual reports that were posted on the website.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	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?	na
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	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
115.13 (b)	Supervision and monitoring	
	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
115.13 (c)	Supervision and monitoring	
	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

115.13 (d)	Supervision and monitoring	
	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
115.14 (a)	Youthful inmates	
	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
115.14 (b)	Youthful inmates	
	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
115.14 (c)	Youthful inmates	
	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
115.15 (a)	Limits to cross-gender viewing and searches	
	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
115.15 (b)	Limits to cross-gender viewing and searches	
	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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	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)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	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
115.15 (e)	Limits to cross-gender viewing and searches	
	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
115.15 (f)	Limits to cross-gender viewing and searches	
	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

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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 abuse and sexual harassment, including: inmates who are blind or have low vision?	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 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
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	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
115.17 (a)	Hiring and promotion decisions	
	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
115.17 (b)	Hiring and promotion decisions	
	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
115.17 (c)	Hiring and promotion decisions	
	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
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	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

115.17 (f)	Hiring and promotion decisions	
	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
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	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
115.18 (a)	Upgrades to facilities and technologies	
	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
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	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
115.21 (b)	Evidence protocol and forensic medical examinations	
	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

115.21 (c)	Evidence protocol and forensic medical examinations	
	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
115.21 (d)	Evidence protocol and forensic medical examinations	
	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.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	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
115.21 (f)	Evidence protocol and forensic medical examinations	
	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
115.21 (h)	Evidence protocol and forensic medical examinations	
	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.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	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

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	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
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	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
115.31 (a)	Employee training	
	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
115.31 (b)	Employee training	
	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

115.31 (c)	Employee training	
	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
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	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
115.32 (b)	Volunteer and contractor training	
	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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	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
115.33 (b)	Inmate education	
	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
115.33 (c)	Inmate education	
	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

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

115.35 (a)	Specialized training: Medical and mental health care	
	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
115.35 (b)	Specialized training: Medical and mental health care	
	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
115.35 (c)	Specialized training: Medical and mental health care	
	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
115.35 (d)	Specialized training: Medical and mental health care	
	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
115.41 (a)	Screening for risk of victimization and abusiveness	
	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
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	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
115.41 (e)	Screening for risk of victimization and abusiveness	
	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
115.41 (f)	Screening for risk of victimization and abusiveness	
	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

115.41 (g)	Screening for risk of victimization and abusiveness	
	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
115.41 (h)	Screening for risk of victimization and abusiveness	
	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
115.41 (i)	Screening for risk of victimization and abusiveness	
	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
115.42 (a)	Use of screening information	
	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
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	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

115.42 (d)	Use of screening information	
	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
115.42 (e)	Use of screening information	
	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
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	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
115.43 (a)	Protective Custody	
	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

115.43 (b)	Protective Custody	
	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
115.43 (c)	Protective Custody	
	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
115.43 (d)	Protective Custody	
	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
115.43 (e)	Protective Custody	
	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
115.51 (a)	Inmate reporting	
	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

115.51 (b)	Inmate reporting	
	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
115.51 (c)	Inmate reporting	
	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
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	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.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
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.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	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
115.53 (b)	Inmate access to outside confidential support services	
	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
115.53 (c)	Inmate access to outside confidential support services	
	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
115.54 (a)	Third-party reporting	
	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
115.61 (a)	Staff and agency reporting duties	
	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
115.61 (b)	Staff and agency reporting duties	
	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

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

115.64 (b)	Staff first responder duties	
	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
115.65 (a)	Coordinated response	
	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
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	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?	yes
115.67 (a)	Agency protection against retaliation	
	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
115.67 (b)	Agency protection against retaliation	
	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

115.67 (c)	Agency protection against retaliation	
	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
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	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
115.68 (a)	Post-allegation protective custody	
	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
115.71 (a)	Criminal and administrative agency investigations	
	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

115.71 (b)	Criminal and administrative agency investigations	
	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
115.71 (c)	Criminal and administrative agency investigations	
	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
115.71 (d)	Criminal and administrative agency investigations	
	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
115.71 (e)	Criminal and administrative agency investigations	
	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
115.71 (f)	Criminal and administrative agency investigations	
	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
115.71 (g)	Criminal and administrative agency investigations	
	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
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	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
115.71 (j)	Criminal and administrative agency investigations	
	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
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

115.76 (c)	Disciplinary sanctions for staff	
	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
115.76 (d)	Disciplinary sanctions for staff	
	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
115.77 (a)	Corrective action for contractors and volunteers	
	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
115.77 (b)	Corrective action for contractors and volunteers	
	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
115.78 (a)	Disciplinary sanctions for inmates	
	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
115.78 (b)	Disciplinary sanctions for inmates	
	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
115.78 (c)	Disciplinary sanctions for inmates	
	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
115.78 (d)	Disciplinary sanctions for inmates	
	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
115.78 (e)	Disciplinary sanctions for inmates	
	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

115.78 (f)	Disciplinary sanctions for inmates	
	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
115.78 (g)	Disciplinary sanctions for inmates	
	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
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	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).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	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
115.82 (a)	Access to emergency medical and mental health services	
	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
115.82 (b)	Access to emergency medical and mental health services	
	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

115.82 (c)	Access to emergency medical and mental health services	
	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
115.82 (d)	Access to emergency medical and mental health services	
	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
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.86 (a)	Sexual abuse incident reviews	
	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

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	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
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	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
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	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
115.87 (d)	Data collection	
	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
115.87 (e)	Data collection	
	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
115.87 (f)	Data collection	
	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

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

115.401 (b)	Frequency and scope of audits	
	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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	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
115.403 (f)	Audit contents and findings	
	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