

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Auditor Information			
Auditor name: Walter Sipple			
Address: Post Office Box 2502, Mount Pleasant, South Carolina 29465			
Email: waltersipple@comcast.net			
Telephone number: 843-323-8851			
Date of facility visit: May 4, 2015			
Facility Information			
Facility name: Helms Facility			
Facility physical address: 1275 Constitution Road, Southwest, Atlanta, Georgia 30316			
Facility mailing address: <i>Same as above</i>			
Facility telephone number: 404-624-2413			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Darrell Clark			
Number of staff assigned to the facility in the last 12 months: 57			
Designed facility capacity: 94			
Current population of facility: 29			
Facility security levels/inmate custody levels: Medium/Minimum, Medium, and Administrative			
Age range of the population: 19-79			
Name of PREA Compliance Manager: Cynthia Jennings-Evans		Title:	Counselor
Email address: evansc012@dcor.state.ga.us		Telephone number:	404-635-2191
Agency Information			
Name of agency: Georgia Department of Corrections			
Governing authority or parent agency: <i>State of Georgia</i>			
Physical address: State Office South, 300 Patrol Road, Forsyth, Georgia 31029			
Mailing address: <i>Same as above</i>			
Telephone number: 478-992-5101			
Agency Chief Executive Officer			
Name: Greg Dozier		Title:	Asst. Com.
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Agency-Wide PREA Coordinator			
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AUDIT FINDINGS

NARRATIVE:

The Prison Rape Elimination Act audit of the Helms Facility located in Atlanta, Georgia, was conducted on May 5, 2015. The audit was performed by Walter Sipple, United States Department of Justice Prison Rape Elimination Act independent certified auditor, and no others, operating as an independent contractor with absolutely no conflict of interest. The Helms Facility is an adult male and female confinement facility and part of the Georgia Department of Corrections. The facility operates under the jurisdiction of the State of Georgia and is classified as a medium security level, 94 capacity facility, consisting of 2 inmate housing units.

The Georgia Department of Corrections mission statement is as follows: "The department of corrections creates a safer Georgia by effectively managing offenders and providing opportunities for positive change". The Lee State Prison mission statement is as follows: "Helms Facility protects and serves the public as a professional organization of the Georgia Department of Corrections. Helms will effectively manage both pregnant females and medical challenged males. Helms will provide adequate medical care for both populations and maintain a safe and secure environment for the staff, inmates and the public." The auditor was impressed with the unique mission of the Helms Facility within the Georgia Department of Corrections. The auditor wanted to note that the Helms Facility is immediately located next to the Metro Transitional Center which is an all-female resident community-based re-entry facility for the Georgia Department of Corrections. The Metro Transitional Center provides the inmate labor for the Helms Facility. Both facilities work extremely well together in accomplishing separate but complementing missions for the Georgia Department of Corrections.

An entrance meeting was held with the superintendent, senior level facility staff, agency Prison Rape Elimination Act coordinator, facility Prison Rape Elimination Act compliance manager, agency regional executive, and the Prison Rape Elimination Act auditor during the first day of the on-site portion of the audit. The auditor was allowed access to the agency and facilities in order to conduct the audit.

Following the entrance meeting, the auditor toured and observed operations at the facility and returned in the evening to observe after hours operations along with interviewing evening section staff. The auditor contact information was posted throughout the facility prior to the on-site visit phase of the audit. A map of the facility was provided by the staff which also consisted of the inmate housing areas. A list of staff, volunteers, and contractors to include assignments and roles was provided to the auditor along with listings by housing unit for a random and objective selection of inmates for interviews.

The auditor reviewed compliance with the Prison Rape Elimination Act standards based on a review of agency policy, procedure, practice, daily activities, documentation, observation, and interviews with

staff and inmates during the on-site portion of the Prison Rape Elimination Act audit. Interviews were conducted with outside agencies, to include but not limited to, Just Detention International, The Grady Rape Crisis Center, and local area hospitals.

An objective random sampling of staff, volunteer, inmate, and contractor interviews was selected from a series of lists presented to the auditor by the facility. Last names were randomly selected from an alphabetically ordered list in increments of five. A total of twelve agency and facility staff were interviewed per random sampling from the auditor. A total of seven inmates were interviewed with a minimum of ten percent from each housing unit per random sampling from the auditor, along with special category inmates and a selection identified during the in-take screening process. An exit interview was conducted at the end of the on-site visit by the auditor with the superintendent, Prison Rape Elimination Act compliance manager, facility department heads, and Prison Rape Elimination Act coordinator.

The agency and facility staff were very engaged and extremely helpful throughout the audit process. The auditor was impressed with the level of commitment and enthusiasm of facility staff in pursuing a Prison Rape Elimination Act compliant facility.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Helms Facility is located near a residential type of neighborhood at 1275 Constitution Road Southwest, in Atlanta, Georgia. The Helms Facility was originally built and opened as an inmate transitional center in 1991. In 2011, it was converted to a more secure confinement facility with security fencing surrounding the outer perimeter of the entire facility. The facility has a rated bed capacity of ninety-four (94) inmate beds, with a current population listed at the time of the on-site portion of the Prison Rape Elimination Act audit of twenty-nine (29) inmates. The average inmate daily population was reported as twenty-five (25) inmates. The facility consists of two inmate housing units with one being designated for medially challenged male inmates and one being designated for pregnant female inmates. The facility houses predominately medium-minimum-administrative classification custody inmates. The Helms Facility offers inmates programs such as general education diploma and adult basic education, moral recognition therapy, active parenting, and motivation for change. Inmates also have access to 24 hour medical care, general recreation, and various religious activities and services.

SUMMARY OF AUDIT FINDINGS:

The auditor conducted a thorough facility-wide audit of Helms Facility on May 5, 2015. The auditor was impressed with the high staff-to-inmate ratio at the Helms Facility along with the specialized mission. The auditor also noted how well the Helms Facility jointly works with the neighboring Metro Transition Center, which is a female inmate community-based transition center for the Georgia Department of Corrections, in accomplishing complimentary missions. The facility staff and residents were very

attentive and helpful throughout the audit process. Based on the auditor's individualized review of the Georgia Department of Corrections and the Helms Facility policies, procedures, practice, staff interviews, inmate interviews, released inmate interviews, and feedback from outside agencies, the Helms Facility is in compliance with 100%, or all 41, Prison Rape Elimination Act standards, with one standard being not applicable.

The auditor informed senior level staff at the exit briefing that Prison Rape Elimination Act compliance is a continuum process for the facility and follow-up reviews by the agency and facility leadership are recommended.

Number of standards exceeded: 0.

Number of standards met: 41.

Number of standards not met: 0.

Number of standards not applicable: 1.

PREA Standard 115.11: Zero tolerance of sexual abuse and sexual harassment.

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

Auditor comments: The Georgia Department of Corrections has a written policy toward sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting, and responding to such conduct. The agency employs an agency-wide Prison Rape Elimination Act coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the Prison Rape Elimination Act standards. The Prison Rape Elimination Act coordinator reports to the deputy commissioner of the Georgia Department of Corrections. The Prison Rape Elimination Act compliance manager for the Helms Facility reports directly to the superintendent as reflected in the facility organizational chart.

Specifically, the agency Prison Rape Elimination Act policy (208.06) states: "The Georgia Department of Corrections hereby adopts, implements, and follows the standards outlined in the Prison Rape Elimination Act Standards found at 28 CFR Part 115. Through the adoption of the Prison Rape Elimination Act Standards, the Georgia Department of Corrections seeks to eliminate sexual abuse and sexual harassment of offenders in custody. The Georgia Department of Corrections will not tolerate any form of sexual abuse or sexual harassment of any offender. Offenders who engage in consensual sexual contact with another offender, attempt to engage in or solicit such contact, or help another engage in sexual contact with an offender will be disciplined in a progressive manner with each occurrence. An offender who engages in sexual contact with another offender without that offender's consent will be disciplined progressively and referred for criminal prosecution. Staff members who engage in sexual abuse or sexual harassment with an offender will be subject to disciplinary action, up to and including termination and banishment from all Georgia correctional institutions, whichever action is applicable. Additionally, staff members who engage in sexual abuse with an offender will be subject to criminal prosecution. Pursuant to Georgia Code of Laws 16-6-5.1, it is a felony for correctional staff to have sexual contact with an offender".

The Prison Rape Elimination Act coordinator is a senior level agency executive and the facility Prison Rape Elimination Act compliance manager reports directly to the superintendent of the facility. The agency policy mandates a zero tolerance policy and an implementation plan is in place outlining how the agency will implement the zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The agency and facility has an easy to understand organizational chart

and the auditor was provided a copy during the pre-audit phase of the audit. Helms Facility staff acknowledged an understanding of the zero tolerance policy. The Georgia Department of Corrections and the Helms Facility meets the standard and complies in all material ways with the standard for the relevant review period.

The auditor reviewed the agency policies and procedures (policy 208.06); observed facility practices; reviewed data provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period. The Helms Facility staff was very helpful during the audit process.

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

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

Auditor comments: The auditor interviewed the agency Prison Rape Elimination Act coordinator as well as contracting officials. All contracts include the entity's obligation to adopt and comply with the Prison Rape Elimination Act standards. Any new contract or contract renewal provides for agency contract monitoring to ensure that the contractor is complying with the Prison Rape Elimination Act standards. The Georgia Department of Corrections and the Helms facility, per policy 208.06, meet the standard.

PREA Standard 115.13: Supervision and monitoring.

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

Auditor comments: The Georgia Department of Corrections ensures that each facility it operates shall develop, document, and make its best effort to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. The Helms Facility took the following into consideration:

- 1) Generally accepted detention and correctional practices;

- 2) Any judicial findings of inadequacy;
- 3) Any findings of inadequacy from Federal investigative agencies;
- 4) Any findings of inadequacy from internal or external oversight bodies;
- 5) All components of the institution's/facility's/center's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- 6) The composition of the inmate population;
- 7) The number and placement of supervisory staff;
- 8) Institution programs occurring on a particular shift;
- 9) Any applicable State or local laws, regulations, or standards;
- 10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- 11) Any other relevant factors.

In circumstance where the staffing plan is not complied with, the agency shall document and justify all deviations from the plan. Whenever necessary, but no less frequently than once each year, the agency shall assess, determine, and document whether adjustments are needed to:

- 1) The staffing plan established pursuant to the standard;
- 2) Prevailing staffing patterns;
- 3) The facility's deployment of video monitoring systems and other monitoring technologies; and
- 4) The resources the facility has available to commit to ensure adequate staffing levels.

The agency and facility is in the first year cycle of becoming a Prison Rape Elimination Act compliant facility. The auditor reviewed agency policy (policy 208.06). The Helms Facility provided the auditor with documentation of staff unannounced rounds along with log entry verification. The Georgia Department of Corrections and the Helms Facility are in compliance with the standard.

PREA Standard 115.14: Youthful inmates.

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

Auditor comments: The Helms Facility does not confine youthful inmates. The Georgia Department of Corrections policy (208.06) is in compliance with the standard.

PREA Standard 115.15: Limits to cross-gender viewing and searches.

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

Auditor comments: The Georgia Department of Corrections and the Helm Facility has a written policy (208.06) that prohibits any cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Policies and procedures are in place that enable 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

The agency and facility has policies and procedures where they do not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it is determined 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.

The agency and facility trains security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

The auditor was impressed with how the Georgia Department of Corrections organized the Helms

Facility. The auditor wanted to note that the Helms Facility is immediately next door to the Metro Transitional Center. The Metro Transitional Center is a female only facility and the majority of staff is female. The Metro Transitional Center female residents provide labor and assistance to the operation of the Helms Facility. Both facilities work well together in accomplishing the unique mission they have as separate institutions. The auditor thoroughly audited both facilities. The Georgia Department of Corrections and the Helms Facility meets the standard.

PREA Standard 115.16: Inmates with disabilities and Inmates who are limited English proficient.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility ensures that inmates with disabilities, including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Additionally, the auditor identified potential vulnerabilities with certain inmates and expressed recommendations to the agency and facility leadership during the on-site phase of the audit. The auditor briefed the senior leadership at the exit interview and jointly agreed upon improvements to both standards as a corrective action plan.

The agency and facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under Prison Rape Elimination Act standard 115.64, or the investigation of the inmate's allegation.

The Helms Facility provided the auditor with a verified document of interpreter services from a company called Language Line Services, Inc. The point-of-contact telephone number is 1-866-874-3972. The auditor reviewed the Georgia Department of Corrections policies and procedures (agency policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.17: Hiring and promotion decisions.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described.

The agency and facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The agency and facility performs a criminal background records check before enlisting the services of any contractor who may have contact with residents. A process is in place for criminal background checks at least every five years for current employees and contractors who may have contact with residents.

An interview with the facility staff confirmed compliance with the Prison Rape Elimination Act standard. Each new hire along with volunteers and contractors receive a thorough background screening. This screening specifically includes criminal background checks through the National Crime Information Center. A sampling of new hires or promotions in the last 12 months not only revealed thorough background checks, but a quality recruiting program resulting in new staff. The auditor was impressed with the quality of the staff along with the screening process established by the facility. A number of staff was interviewed by the auditor. Background checks are also performed on volunteers and contractors. .

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (agency policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.18: Upgrades to facilities and technologies.

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

Auditor comments: The auditor interviewed the Helms Facility superintendent and he confirmed that when installing or updating any form of video monitoring system, electronic surveillance system, or other monitoring technology, consideration is made to how such technology may enhance the facility's ability to protect inmates from sexual abuse. The facility has had no substantial expansions.

The auditor reviewed the Georgia Department of Corrections policies and procedures (policy 208.06); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.21: Evidence protocol and forensic medical examination.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility utilize an internal agency investigator from Internal Affairs and have an on-site Sexual Abuse Response Team along with the on-site forensic examination process and sexual abuse incident response list per policy 208.06, VH81-0001, IIA21-0001, and VG55-0001. The Helms Facility staff provided the auditor with a document confirming appointment of a victim advocate that will be made available for the inmates if requested.

The Georgia Department of Corrections follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution.

The Georgia Department of Corrections offers all victims of sexual abuse access to forensic examinations which are performed by qualified sexual assault nurse examiners from Georgia Regents University without financial cost. The Helms Facility reported on the pre-audit questionnaire no inmate forensic examinations have been conducted within the past 12 months of the audit.

The auditor reviewed the Georgia Department of Corrections policies and procedures (policy 208.06); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.22: Policies to ensure referrals of allegations for investigations.

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

Auditor comments: The Georgia Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The agency and facility has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The policy and procedure is available to the public on their website at www.dcor.state.ga.us. The Helms Facility reported on the pre-audit questionnaire that one allegation was referred for investigation within the past 12 months of the audit.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208-06); observed agency practices; reviewed data provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.31: Employee training.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility perform Prison Rape Elimination Act pre-service and in-service training. Specifically, the agency trains all employees who have contact with inmates on the following:

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

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of each facility. The Helms Facility provided the auditor with documentation of staff training and employee guide given to all staff. Specifically, the auditor randomly interviewed staff to confirm acknowledgement and understanding of the requirements of the training standard. The auditor was impressed with the amount of experienced staff that the Helms Facility has assigned. Some of the uniformed staff have decades of experience working in corrections and specifically with the Georgia Department of Corrections. The Georgia Department of Corrections and the Helms Facility is in compliance with the standard.

PREA Standard 115.32: Volunteer and contractor training.

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

Auditor comments: The Georgia Department of Corrections ensures all volunteers and contracts that have contact with inmates have been trained on their responsibilities under the Georgia Department of Corrections sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with the inmates, but all volunteers and contractors who have contact with inmates are notified of the Georgia Department of Corrections zero-tolerance policy regarding sexual abuse and sexual harassment and informed on how to report such incidents.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed volunteers and contractors during an on-site visit and tour of the facility. The agency and facility meets the standard at this time. The Helms Facility provided the auditor with a copy of a volunteer acknowledgement form that all volunteers complete. The Helms Facility reported a total of 15 contractors and 19 volunteers who have contact with inmates and have been trained in agency policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

PREA Standard 115.33: Inmate Education.

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

Auditor comments: Prison Rape Elimination Act inmate education options were duplicative to include but limited to postings on walls throughout the facility, brochures, and videos. During the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual

harassment. Each inmate receives additional written information in the form of an inmate rules and regulations handbook. The agency and facility provides a comprehensive education to inmates regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Each inmate signs an acknowledgement of understanding form that is kept in the records.

The Prison Rape Elimination Act coordinator utilizes an inmate video as part of the training curriculum. The auditor confirmed Prison Rape Elimination Act related education and training within a very short period of arrival time. The auditor also interviewed intake staff.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with inmate orientation acknowledgement forms, pamphlets, inmate check lists, and poster documentation to confirm compliance with the standard. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.34: Specialized training: Investigations.

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

Auditor comments: The auditor confirmed that investigators receive specialized training in accordance with the standard. Any cases that involve criminal investigations are referred to the agency Internal Affairs investigators. Specialized training includes such things as techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency and facility training is in accordance with the Prison Rape Elimination Act standard.

In addition to the general Prison Rape Elimination Act training provided to all employees of the Georgia Department of Corrections, in house investigators receive training on conducting investigations in confinement settings.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation

provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.35: Specialized training: Medical and mental health care.

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

Auditor comments: The auditor interviewed the agency medical administrator, nurses, and mental health counselor. The medical and mental health staff interviewed were knowledgeable in reference to the Prison Rape Elimination Act training and acknowledged responsibility and understanding of the Prison Rape Elimination Act standards. The agency and facility ensures that all full, part-time, and contract medical and mental health care practitioners who work regularly with inmates have been trained in:

- 1) How to detect and assess signs of sexual abuse and sexual harassment;
- 2) How to preserve physical evidence of sexual abuse;
- 3) How to respond effectively and professionally to victims of sexual abuse/harassment; and
- 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with certificates of specialized training from the National Institute of Corrections online program to confirm compliance with the standard. The agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.41: Screening for risk of victimization and abusiveness.

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

Auditor comments: Based on interviews with random inmates and intake staff, all inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Intake screening shall ordinarily take place within 72 hours of arrival and more often is completed within 24 to 48 hours of arrival. Such assessments shall be conducted using an objective screening instrument. The intake screening shall 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;
- 2) The age of the inmate;
- 3) The physical build of the inmate;
- 4) Whether the inmate has previously been incarcerated;
- 5) Whether the inmate's criminal history is exclusively nonviolent;
- 6) Whether the inmate has prior convictions for sex offenses against an adult or child;
- 7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- 8) Whether the inmate has previously experienced sexual victimization; and
- 9) The inmate's own perception of vulnerability.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. An inmate's risk level is reassessed within 30 days from the inmate's arrival when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. The inmates are not to be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked.

The agency and facility implements appropriate controls on the dissemination within the agency of responses to questions asked pursuant to this standard or order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Only limited staff has access to the risk screening form such as medical, mental health, executive director, facility director, as well as the Prison Rape Elimination Act compliance manager.

The agency and facility screening process for risk of victimization and abusiveness is multi-faceted. The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor a copy of the agency intake and classification form confirming compliance with the standard. The Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.42: Use of screening information.

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

Auditor comments: The facility intake staff along with the housing unit counselors' work together to ensure proper use and follow-up is conducted with the inmate screening information. The auditor observed and reviewed the agency's and facilities risk-based housing decisions and screening form. The agency and facility uses information from the risk screening to inform housing, cell, bed, work, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

The Georgia Department of Corrections does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgement for the purpose of protecting such inmates. A transgender or intersex inmate's own views with respect to his or her own safety are given serious consideration. Transgender and intersex inmates are given the opportunity to shower separately from other inmates.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided

the auditor with documentation of the agency intake and classification form. The Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.43: Protective custody.

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

Auditor comments: The auditor confirmed that the agency and facility has a policy for protective custody. Inmates at high risk for sexual victimization shall not be 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 a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. No inmate has been placed in involuntary segregation. The auditor interviewed and reviewed the agency and facility segregated housing unit policies and procedures along with documentation examples and form reviews.

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

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with documents and copies of inmate classification rating forms that confirms compliance with the standard. The Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.51: Inmate reporting.

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

Auditor comments: The agency and facility has multiple ways for inmate reporting of sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The auditor tested the inmate phone systems in every inmate housing unit to confirm agency and facility access for inmate reports of sexual abuse and sexual harassment to agency and facility officials. The auditor contacted the local rape crisis center and Just Detention International, which is a national advocacy organization, and they stated that they have not fielded any calls or contacts related to the facility. The auditor interviewed inmates and they were well informed concerning the inmate reporting process for anything related to the Prison Rape Elimination Act.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; interviewed outside organizations; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with copies of inmate pamphlets confirming compliance with the standard. The Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.52: Exhaustion of administrative remedies.

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

Auditor comments: The agency does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The agency ensures 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. The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Third parties,

including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of the inmates. The agency and facility reported no third-party assistance for inmates during the past 12 months. The agency and facility has established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency immediately forwards the grievance to a level of review at which immediate corrective action is taken and provides an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The auditor reviewed agency and facility grievance forms and confirmed no facility level grievances were processed within the past 12 months related to sexual abuse or sexual harassment.

The auditor reviewed the agency and facility policies and procedures (policy 208.06 and SOP IIB05-0001: "Statewide Grievance Procedure"); observed agency and facility practices; reviewed data provided by the agency and facility staff; reviewed the inmate handbook concerning the grievance process; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.53: Inmate access to outside confidential support services.

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

Auditor comments: The Georgia Department of Corrections policy 208.06 provides inmate access to outside confidential support services through the Georgia Ombudsman's Office via telephone at 478-992-5358 or in writing to the Georgia State Board of Pardons and Paroles, Office of Victim Services, 2 Martin Luther King Jr. Drive, Southeast, Balcony Level, East Tower, Atlanta, Georgia 30334. The agency and facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, for services.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meet the standard.

PREA Standard 115.54: Third-party reporting.

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

Auditor comments: The auditor confirmed that the Georgia Department of Corrections and the Helms Facility has policies (policy 208.06) and procedures that third-party reports will be accepted. The agency offers several opportunities for third-party reporting on the agency website, www.dcor.state.ga.us. The local rape crisis center, The Grady Rape Crisis organization of Atlanta, also is available for third-party reporting. The agency and facility distributes publicly available information on how to report sexual abuse and sexual harassment on behalf of a resident as well as distributing posters and brochures throughout the facility. The auditor verified through staff and inmate interviews that they are aware of and concur with reporting requirements in accordance with the agency policy and Prison Rape Elimination Act standard.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.61: Staff and agency reporting duties.

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

Auditor comments: Based on a review of Georgia Department of Corrections and the Helms Facility policy, procedure, and practice along with staff interviews, the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in any facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Other than reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse, and inform inmates of the practitioner's duty to report, and the limits of confidentiality, at the initiation of services.

The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. If the alleged victim is a vulnerable adult under a State or local vulnerable person's statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.62: Agency protection duties.

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

Auditor comments: The auditor confirmed through Georgia Department of Corrections and the Helms Facility policies (policy 208.06) and procedures along with staff and inmate interviews that they will act immediately to any and all inmates in imminent danger or substantial risk of sexual abuse. When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. Specifically, the auditor interviewed both agency and facility line officer staff. The agency and facility has a standardized check list for any sexual abuse incidents.

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.63: Reporting to other confinement facilities.

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

Auditor comments: Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The agency and facility document that it has provided such notification. The head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with the Prison Rape Elimination Act standard. No reporting from or receipt of sexual misconduct was noted by the auditor from the agency. The auditor reviewed the agency and facility generated reporting form.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.64: Staff first responder duties.

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

Auditor comments: Based on Georgia Department of Corrections and the Helms Facility policy and procedures along with agency staff and resident interviews during the on-site portion of the audit, upon learning of an allegation that an inmate was sexually abused, the first staff member to respond to the report shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing

clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

If the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The auditor reviewed an agency and facility generated check list for first responder use.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.65: Coordinated response.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and agency and facility leadership.

During the on-site portion of the audit, communication between different departments and organizations seemed effective. Staff and contractors knew who to report to for further guidance and communication if they needed questions answered.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

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

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

Auditor comments: Neither the agency nor any other government entity responsible for collective bargaining on the agency's behalf entered into or renewed any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

The Georgia Department of Corrections and the Helms Facility has no collective bargaining as verified with the agency during the on-site portion of the audit. The staff is fully aware that a violation of policy may more than likely result in termination. The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.67: Agency protection against retaliation.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The facility specifically appointed a retaliation monitor charged with tracking any form of retaliation. The agency employs multiple protection measures, such as housing and cell 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, the agency and facility monitors the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation. The retaliation monitor reviews inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Monitoring continues beyond 90 days if the initial monitoring indicates a continuing need. Monitoring also includes periodic status checks. Any other individuals who cooperate with an investigation expresses a fear of retaliation, the agency takes appropriate measures to protect that individual against retaliation.

The Prison Rape Elimination Act coordinator, facility retaliation monitor, and compliance manager reported no incidents of retaliation during the past 12 month period from the date of the audit. The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.68: Post-allegation protective custody.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility have a protective custody policy and procedure. Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of protective custody policy and procedure. The agency Prison Rape Elimination Act coordinator and facility compliance manager confirmed the agency and facility policies and procedures in accordance with protective custody policy and Prison Rape Elimination Act standard 115.43.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.71: Criminal and administrative agency investigations.

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

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

Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to Prison Rape Elimination Act 115.34. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and deoxyribonucleic acid (DNA) evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. The auditor interviewed the agency's and facility's investigators and was impressed with their knowledge and experience.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The agency retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The auditor reviewed written reports and investigations provided by the investigator.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the

agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility reported no substantiated allegations of conduct that appeared to be criminal being referred for prosecution during the review period. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.72: Evidentiary standard for administrative investigations.

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.73: Reporting to inmates.

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

Auditor comments: The Prison Rape Elimination Act compliance manager is responsible for reporting back to any inmates in reference to any Prison Rape Elimination Act related incidents. The agency and facility informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Based on the agency's policy, following an inmate's allegation that a staff member has committed sexual abuse against an inmate, the agency shall subsequently inform the inmate (exception being if the allegation is determined to be unfounded) whenever:

- 1) The staff member is no longer employed by the agency;
- 2) The staff member is no longer posted within the inmate's unit;
- 3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the agency; or
- 4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the agency.

Following an inmate's allegation that he has been sexually abused by another inmate, the facility shall subsequently inform the alleged victim whenever: The facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the agency; or the facility learns that the alleged abuse has been convicted on a charge related to sexual abuse within the agency. All such notifications or attempted notifications are documented and retained by the agency Prison Rape Elimination Act compliance manager. The agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with a copy of an inmate notification form confirming compliance with the standard. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.76: Disciplinary sanctions for staff.

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

Auditor comments: Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. Georgia Department of Corrections staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

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

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility reported no staff from the facility that have been terminated, or resigned prior to termination, for violating agency sexual abuse or sexual harassment policies within the past 12 month period of the audit. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.77: Corrective action for contractors and volunteers.

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

Auditor comments: The auditor interviewed contractors and volunteers during the on-site portion of the audit. Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Appropriate steps are taken in reference to remedial measures, and consideration made whether to prohibit further contact with inmates, in the case of any other violation of agency and facility sexual abuse or sexual harassment policies by a contractor or volunteer.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility reported no contractors or volunteers were reported to law enforcement for engaging in sexual abuse with inmates within the past 12 month period from the audit. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.78: Disciplinary sanctions for inmates.

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

Auditor comments: No criminal or administrative findings were reported within the past twelve months of the audit. Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed. The agency disciplines an inmate for sexual contact with staff only upon finding that the staff member did not consent to such contact. A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency and facility prohibits all sexual activity between inmates and may discipline inmate for such activity.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy IIB02-0001, VG34-0001, and 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with documented policy and procedure that confirms compliance with the standard. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

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

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

Auditor comments: If the medical and mental health screening indicates that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the

community, agency staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. If the screening indicates that an inmate has previously perpetrated sexual abuse or sexual victimization, whether it occurred in an institutional setting or in the community, agency and facility staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other agency staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

The auditor interviewed the medical staff, nursing staff, mental health counselor, and the inmate intake staff. The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.82: Access to emergency medical and mental health services.

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

Auditor comments: 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. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with a nursing assessment form for sexual abuse. The auditor noted that due to the special mission of the Helms Facility the medical staff to inmate ratio is very high ensuring emergency access. Based on the above listed information, the Georgia Department of Correction and the Helms Facility meets the standard and complies with the standard for the relevant review period.

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

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in the facility. 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. The agency and facility provides such victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The auditor interviewed the department medical staff, nursing staff, and mental health counselor during the on-site portion of the Prison Rape Elimination Act audit. The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor noted that due to the special mission of the Helms Facility a large medical staff to inmate ratio exists for the small inmate population ensuring a higher level of medical care. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.86: Sexual abuse incident reviews.

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

Auditor comments: The Georgia Department of Corrections conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not be substantiated, unless the allegation has been determined to be unfounded. This review ordinarily occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The agency and facility review team considers the following:

- 1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- 2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- 3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- 4) Assess the adequacy of staffing levels in that area during different shifts;
- 5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- 6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to above paragraph numbers 1 to 5, and any recommendations for improvement, and submit such report to the facility head and Prison Rape Elimination Act compliance manager.

The auditor reviewed the Georgia Department of Corrections and the Helms Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The Helms Facility provided the auditor with a document with a listing of facility staff assignments to the sexual abuse incident review team confirming compliance with the standard. Based on the above listed information, the Georgia Department of Corrections and the Helms Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.87: Data collection.

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

Auditor comments: The Georgia Department of Corrections collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The agency aggregates the incident-based sexual abuse data at least annually. The incident-based data collected shall 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. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Upon request, the agency shall provide all such data from the previous calendar year to the United States Department of Justice no later than June 30.

The auditor reviewed the Georgia Department of Corrections policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor noted that the agency is in the first cycle year of Prison Rape Elimination Act audits and data collection is ongoing. Based on the above listed information, the Georgia Department of Corrections meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.88: Data review for corrective action.

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

Auditor comments: Based on Georgia Department of Corrections policy and procedure review (policy 208.06) along with agency staff interviews, the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by:

- 1) Identifying problem areas;
- 2) Taking corrective action on an ongoing basis; and
- 3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

The agency is in its first year cycle audit review and will compare the current year's data and corrective action with those from next years and shall provide an assessment of the agency's progress in addressing sexual abuse. The agency's report is approved by the commissioner of the agency and made readily available to the public through its website once completed at, www.dcor.state.ga.us. The auditor confirmed that the most recent report is posted on the agency website. The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

The Georgia Department of Corrections is in compliance with the standard for the relevant review period.

PREA Standard 115.89: Data storage, publication, and destruction.

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

Auditor comments: Based on a review of documents, policy, and procedure (policy 208.06) along with agency Prison Rape Elimination Act coordinator interview, the agency ensures that data is collected and securely retained. The agency makes all aggregated sexual abuse data, from facilities under its direct control, readily available to the public at least annually through its website once complete at, www.dcor.state.us. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected for at least 10 years after the date of the initial collection.

The auditor confirmed that the most recent annual report is posted on the agency website. The Georgia Department of Corrections is in compliance with the Prison Rape Elimination Act standard for this rating period.

AUDITOR CERTIFICATION:

I certify that:

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

Walter Sipple



June 4, 2015

Auditor Signature

Date