

PREA Facility Audit Report: Final

Name of Facility: Jenkins Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 10/21/2025

Date Final Report Submitted: 12/18/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Full Name as Signed: Barbara Jo Denison

Date of Signature: 12/18/2025

AUDITOR INFORMATION

Auditor name: Denison, Barb

Email: denisobj@sbcglobal.net

Start Date of On-Site Audit: 10/07/2025

End Date of On-Site Audit: 10/09/2025

FACILITY INFORMATION

Facility name: Jenkins Correctional Facility

Facility physical address: 3404 Kent Farm Drive, Millen, Georgia - 30442

Facility mailing address:

Primary Contact

Name:	Edward Johnson
Email Address:	Edward.johnson@corecivic.com
Telephone Number:	478-331-9808

Warden/Jail Administrator/Sheriff/Director

Name:	Terrence Dickerson
Email Address:	Terrence.dickerson@corecivic.com
Telephone Number:	731-212-2401

Facility PREA Compliance Manager

Name:	Edward Johnson
Email Address:	edward.johnson@corecivic.com
Telephone Number:	478-331-9808
Name:	Jennifer Bowen
Email Address:	jennifer.bowen@corecivic.com
Telephone Number:	478-331-9808

Facility Health Service Administrator On-site

Name:	Charles Staples
Email Address:	charles.staples@corecivic.com
Telephone Number:	229-315-3411

Facility Characteristics

Designed facility capacity:	1150
Current population of facility:	1149
Average daily population for the past 12 months:	1150

Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys
Age range of population:	18 - 90
Facility security levels/inmate custody levels:	Minimum to medium
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	200
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	14
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	11

AGENCY INFORMATION	
Name of agency:	CoreCivic, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027
Mailing Address:	
Telephone number:	615-263-3000

Agency Chief Executive Officer Information:	
Name:	Damon T. Hininger
Email Address:	
Telephone Number:	615-263-3000

Agency-Wide PREA Coordinator Information**Name:** Jillian Shane**Email Address:** jillian.shane@corecivic.com**Facility AUDIT FINDINGS****Summary of Audit Findings**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

4

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.13 - Supervision and monitoring
- 115.31 - Employee training
- 115.32 - Volunteer and contractor training

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-10-07
2. End date of the onsite portion of the audit:	2025-10-09

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) with the Statesboro Regional Sexual Assault Center, doing business as Teal House. The Executive Director of Teal House was contacted on 9/12/25 to confirm and review the terms of the MOU. Teal House provides inmates with a 24/7 hotline number for inmate access to confidential emotional support services. Calls to the hotline are answered by contracted agencies that route the calls to one of the four Teal House advocates. If a caller reports sexual abuse to the advocate and this information has not been reported to the facility, the advocate encourages the caller to do so or to call 911. This information is not shared with the facility unless the caller is in imminent danger. Callers would be offered the opportunity to receive counseling upon their release.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1150
15. Average daily population for the past 12 months:	1150
16. Number of inmate/resident/detainee housing units:	11
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1151
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	4
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	6

27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	7
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1
31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	3
33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	26
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0

35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	182
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	12
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	10
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	On the first day of the audit there were vacancies for 19 positions, which included one Chief of Security, one Sargeant, one Lieutenant, fifteen correctional officers and one RN.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20

41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Random inmates were selected from each of the 11 housing units.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	There were two random inmates select who refused to be interviewed and were replaced with two other random inmates from the same housing units as the inmates that had refused.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	20

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1

52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	6
56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	I interview with the Warden and the supervisor of the restrictive housing unit; inmates are not placed in the segregated housing unit for risk of sexual victimization or those who have alleged sexual abuse.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The limited English proficient inmate was interviewed with translation provided by the Voyce.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	10
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Five random staff from each of the two security shifts were interviewed. This number included one Shift Supervisor, one Sergeant and three Correctional Officers from each shift. The Sergeant on the first shift is the supervisor of the Intake Unit. She was asked the random staff interview questions and the intake staff interview questions.

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

21

63. Were you able to interview the Agency Head?

☒ Yes

☐ No

64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

65. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

66. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☒ Agency contract administrator
- ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☒ Medical staff
- ☒ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☒ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☒ Investigative staff responsible for conducting administrative investigations
- ☐ Investigative staff responsible for conducting criminal investigations
- ☒ Staff who perform screening for risk of victimization and abusiveness
- ☒ Staff who supervise inmates in segregated housing/residents in isolation
- ☒ Staff on the sexual abuse incident review team
- ☒ Designated staff member charged with monitoring retaliation
- ☒ First responders, both security and non-security staff
- ☒ Intake staff

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☐ Medical/dental ☒ Food service ☐ Maintenance/construction ☐ Other

70. Provide any additional comments regarding selecting or interviewing specialized staff.	The PREA Coordinator and the Agency Head Designee were interviewed at the beginning of this reaccreditation period. The three volunteers were interviewed by telephone during the Pre-Onsite Audit Phase.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.	
71. Did you have access to all areas of the facility?	☒ Yes ☐ No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☒ Yes ☐ No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☒ Yes ☐ No
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No

75. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

The site review was conducted in all areas of the facility. Staff and visitors enter the facility through the front gate controlled by the control room. Staff and visitors are required to show identification upon entry and property is x-rayed. Staff and visitors walk through a metal detector and are pat searched by officers of the same gender. The facility has 11 housing units. Two are multiple occupancy cell housing units, 8 open bay units and 38 restrictive housing unit cells. One of the housing units (300 D) is the canine program dorm where 20 dogs were being cared for by a primary inmate with assistance from other inmates in the dorm. One dorm (200 D) is an intake dorm where newly assigned inmates are housed for two weeks for new offender orientation and classification. Inmates who work in the kitchen and maintenance are housed in the work dorm (300 C). There are seven covered recreation areas for outdoor recreation. Central Control monitors all doors and cameras. ADO staff have access to camera viewing on their desktops. The facility has 199 cameras and data is retained for 30 days. Medical services are provided 24-hours daily. Mental health services are provided by two onsite Mental Health Coordinators each assigned 40 hours a week. There are two behavioral health observations room in the medical area.

During the site review fifteen inmates and eight staff members were informally interviewed and asked questions about their knowledge of PREA. During the tour location of cameras, posted PREA information, blind spots, and privacy for inmates in housing units and restrooms were observed. In review of camera monitors on the last day of the audit, the cameras did not cause privacy issues when inmates are showering, toileting or changing clothing. The restroom areas are blocked out on the camera monitors to prevent opportunities for cross gender viewing.

Opposite gender announcements were made

by staff at the entry of each housing unit. Signs on entry doors remind staff to make opposite gender announcements. In interview of inmates, they confirmed female staff announce before they enter their housing units. Inmates interviewed stated they feel they have privacy to shower, toilet and change their clothing if a female staff is in their housing unit.

The PREA hotline reporting number was painted in both English and Spanish in housing units. The number was dialed on an inmate telephone, and a prompt was heard to leave a message. A message was left requesting a call back when the message was heard. The following morning at 9:46 a.m. the PREA Analyst for the Georgia Department of Corrections Office of Professional Standards called and confirmed receipt of my voicemail. The number to Teal House, was also dialed and found to be accessible to inmates to call to request confidential emotional support services. Third party information was found posted in visitation and the front lobby area. The PREA screening of one newly assigned inmate was observed in the Intake unit. The screener conducted the screening in the property room adjacent to the intake desk with the door closed. The screener asked the inmate the screening questions and wrote the inmates responses on a paper screening form. The screener provided verbal information to the inmate about PREA reporting and where he could find PREA information. Prior to the screening the inmate received written PREA information. The PREA video is played continuously in the intake area and inmates are required to watch the video.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

☒ Yes

☐ No

78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Twenty-three inmate records were reviewed for compliance with screening procedures and the requirements of PREA education for inmates. Twenty-one employee files, four contractor and three volunteer files were selected and reviewed remotely during the Pre-Onsite Audit Phase for the requirements of criminal background checks and for PREA training requirements.

The daily logbook entries for the first two weeks of September 2025 for dorms 100, 200 and RHU were requested and reviewed while onsite.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

79. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	7	1	7	1
Staff-on-inmate sexual abuse	3	0	3	0
Total	10	1	10	1

80. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	3	0	3	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

81. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

82. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	4	2	1
Staff-on-inmate sexual abuse	0	1	2	0
Total	0	5	4	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

83. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

84. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	0	0
Staff-on-inmate sexual harassment	0	1	0	0
Total	0	2	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

10

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	7
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	3
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	Due to standards 115.22, 115.61, 115.71, 115.73 and 115.86 determined to be non-compliant, part of the corrective action taken was for the facility to provide completed investigative files for two allegations reported during the onsite audit visit and any new allegations reported and investigated during the corrective action period. There were four allegations reported during the corrective action period for a total of six administrative investigations completed. The allegations were as follows: four employee-on-inmate sexual abuse, one inmate-on-inmate sexual abuse and one employee-on-inmate sexual harassment. The files were uploaded in the OAS and reviewed, and it was determined the facility achieved compliance to all of the investigation standards.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

- ☒ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.11 (a) CoreCivic's policy 14-2, <i>Sexual Abuse Prevention and Response</i>, is the agency's written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct. Page 3 of the policy includes definitions of prohibited behaviors. Sexual activity between inmates or employees, contractors and volunteers are strictly prohibited and subject to administrative and criminal disciplinary sanctions. CoreCivic's policy 14-2 is comprehensive and clearly outlines the procedures to be followed to reduce and prevent sexual abuse and sexual harassment of inmates. The policy addresses each standard as guidance to staff ensuring compliance to the PREA standards. Information about the zero-tolerance policy can be found on page 4, section A of policy 14-2. All employees and contractors sign a <i>PREA Zero Tolerance Policy Acknowledgment</i> form (14-2)) acknowledging the CoreCivic zero tolerance policy. 115.11 (b): The agency employs an upper-level, agency-wide PREA Coordinator at the corporate level. The agency's organizational chart depicts the PREA Coordinator's

position within the agency. The PREA Coordinator answers to the Vice President, Core Services. The PREA Coordinator, who when interviewed on 8/13/24, reported that she has sufficient time and authority to develop, implement and oversee CoreCivic's efforts to comply with the PREA standards. The PREA Coordinator oversees the agency's efforts to comply with the PREA standards in all CoreCivic's facilities. Page 4, section A-2 of policy 14-2 outlines the responsibilities of the PREA Coordinator. The PREA Coordinator is responsible for development, implementation and oversight of CoreCivic's efforts to comply with the PREA standards and the agency's Sexual Abuse Response and Prevention Program. When interviewed, the PREA Coordinator stated she has sufficient time and authority to oversee the agency's PREA program. When asked if she identifies an issue with complying with a PREA standard, what actions or processes does she undertake to work towards compliance she responded, "We assist the facility with corrective action plans as a result of audits. If the issue is a policy problem, we can look to a policy revision if necessary. We are able to provide technical on-site assistance for training that can correct incorrect practices that may have developed due to a misunderstanding of PREA standards. In my position, I am also able to involve CoreCivic Managing Directors and VP's and elevate concerns that need to be addressed at that level. We also have contracted PREA auditors that can be sent to facilities, if necessary."

115.11 (c): Each facility operated by CoreCivic has a designated PREA Compliance Manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The responsibilities of the PREA Compliance Managers are found on Page 2 of policy 14-2 CC. The position is an Administrative Duty Officer level manager. At this facility, the Assistant Warden is designated as the facility's PREA Compliance Manager. According to the facility's Organizational Chart, The PREA Compliance Manager answers to the Warden. When interviewed the PREA Coordinator stated, "At any given time, there are approximately 57 PREA Compliance Manager, including those from Community Corrections. The PREA office consists of two individuals. I am the Senior Director and handle audits and compliance issues including policy. Jillian Shane is a director and coordinates PREA investigation and training efforts. We have Quarterly Training sessions with PREA Compliance Managers via Skype and travel to the facilities for audits and training sessions. We are in contact with them daily on investigation and audit issues. If we are not at the facility in person, we generally communicate via Teams for meetings and training or e-mail and telephone for normal business correspondence." In interview of the Assistant Warden/PREA Compliance Manager, he stated he feels he has sufficient time to manage all of his PREA-related responsibilities.

The agency's 14-2 policy was found to be very comprehensive. Both the PREA Coordinator and the PREA Compliance Manager stated they have enough time to manage their PREA-related responsibilities and were very knowledgeable of those responsibilities when interviewed; therefore, the facility was found to exceed in the requirements of this standard.

115.12	Contracting with other entities for the confinement of inmates
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.12: CoreCivic is a private provider and does not contract with other agencies for the confinement of its inmates; therefore, this standard is not applicable to this facility. All new contracts with local, state and federal governmental agencies provide for agency contract monitoring to ensure that CoreCivic is complying with the PREA standards.

115.13	Supervision and monitoring
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.13 (a) Based on policy 14-2, pages 7 & 8, section D, the facility, in coordination with the CoreCivic FSC, shall develop an annual staffing plan that provides for adequate levels of staffing plan that provides for adequate levels of staffing to protect inmates against sexual abuse. The agency took into consideration the physical layout of the facility, the composition of the recent population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, the number and placement of supervisory staff, programs occurring on a particular shift and the resources the facility has available to commit to ensure adequate staffing levels. The agency also considers generally accepted detention and correctional practices and any findings of inadequacy from federal investigative agencies, internal or external oversight bodies, any applicable state or local laws or regulations and any other relevant factors. In interview with the Warden and the Assistant Warden/PREA Compliance Manager, they both confirmed what is considered when assessing staffing levels. 115.13 (b): The facility makes every effort to comply with the approved <i>PREA Staffing Plan</i> and documents and justifies any deviations. The current staffing plan was predicted on a total of 1150 beds. The average daily population since the last PREA audit was 1137 inmates. If there is deviation to the staffing plan, the PREA Compliance Manager is responsible for documenting deviations from the PREA Staffing Plan and describe the deviation on a 5-1B, <i>Notice to Administration</i> (NTA), along with thorough justification for the deviation and description of any corrective action that was taken to resolve the deviation. On information provided on the Pre-Audit Questionnaire, since the last PREA audit there were no deviations to the established staffing plan. The Warden stated in interview that once a week he reviews staffing rosters and once a month he conducts a live roster review to monitor compliance to the staffing plan. 115.13 (c): The staffing plan is reviewed annually by the PREA Compliance Manager who completes an <i>Annual PREA Staffing Plan Assessment</i> (14-2I) and forwards it to

	the Warden for review, who forwards it to the PREA Coordinator. This annual review also includes assessments of the policy, physical plant, and video monitoring systems. The PREA Coordinator forwards the 14-2I to the Vice President, Core Services for signature and approval of any recommendations made which would include changes to the policy and procedures, physical plant, video monitoring or the staffing plan. The <i>Annual PREA Staffing Plan Assessments</i> completed annually since the last PREA audit (2023-2024-2025) were provided for review. There were no recommendations for changes to the established staffing plan. The 2025 <i>PREA Staffing Plan</i> mandates a Shift Supervisor and five correctional officers on the first shift and a Shift Supervisor and two correctional officers on the second shift daily. When interviewed the PREA Coordinator stated, "The staffing plan is reviewed annually or when there has been significant change that would require reevaluation of the plan." 115.13 (d): According to agency policy 14-2, page 7, section D-1-3, intermediate level and/or higher-level facility supervisors conduct unannounced facility rounds to identify and deter staff sexual abuse and sexual harassment. These rounds are documented by signature of the supervisor making the rounds in the area's Logbook. The frequency of the unannounced supervisor rounds is determined by the Warden. The rounds are conducted on the night and day shifts in all areas where inmates have access. In interview of the Chief of Security she stated the assigned ADO makes rounds every day and the weeks when ADO staff are not designated as ADO, they are required to make Unannounced PREA Rounds every other day. Captains and Lieutenants make Unannounced PREA Rounds daily. Unannounced PREA Rounds are documented by signatures in red ink in the respective Logbooks. Employees are prohibited from alerting other employees that supervisory rounds are being conducted. In addition to Unannounced PREA Rounds, Watch Tours are conducted on the half-hour and Security Checks on the hour throughout a 24-hour period. The Unit Managers and the Correctional Counselors, as well as the Warden, check the Logbooks to ensure compliance. In review of Logbook entries for the first two weeks in September 2025 for housing units 100 and 200, numerous rounds are being conducted and documented as required. Inmates interviewed formally and informally confirmed they see staff walking in their housing units very often. Due to the facility's efforts to consistently comply with their staffing plan and provide supervision through Unannounced PREA Rounds, Watch Tours and Security Checks, the facility was found to exceed in the requirements of this standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 (a): This standard is not applicable to the Jenkins Correctional Facility. Per

	contact requirements, youthful offenders are not assigned to this facility.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.15 (a): Based on review of policy 14-2, pages 15-16 section J addresses the limits of cross gender viewing and searches. Cross gender inmate strip searches and cross gender body cavity searches shall not be conducted except in exigent circumstances. A cross gender visual search of a body cavity under exigent circumstances shall be conducted only pursuant to an approved cross gender strip search. On information provided on the Pre-Audit Questionnaire, in the past 12 months, there were no cross-gender strip or cross-gender visual body cavity searches of inmates. CoreCivic policy 14-2, page 15, section J-4 states, "CoreCivic staff are not authorized to conduct body cavity inspections. Body cavity inspections may only be conducted by non-CoreCivic medical professionals. Staff of the opposite gender other than a designated qualified medical professional shall not observe a body cavity inspection." 115.15 (b): The Jenkins Correctional Facility does not house female inmates; therefore, this provision of this standard is not applicable to this facility. 115.15 (c): The Jenkins Correctional Facility does not house female inmates; therefore, this provision of this standard is not applicable to this facility. 115.15 (d): The facility has policies and procedures in place that enable inmates to shower, perform bodily functions and change clothing without staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell/living quarter checks. According to policy transgender and intersex inmates are offered the opportunity to shower in the Health Services Department on a daily basis during a scheduled time determined by security and medical staff. Female staff are required to announce their presence when entering an inmate housing unit. Signs above entry to the housing units remind female staff to make opposite gender announcements before entering (<i>"Opposite Gender Must Announce Upon Entry"</i>). The practice of female staff announcing their presence when they entered the housing units was observed during the site review of the facility. Inmates interviewed confirmed announcements are made and shared they feel they have privacy when they shower, toilet and change clothing when female staff are in their housing area. Inmates are informed they are to dress and change in the shower area only. 115.15 (e): According to policy 14-2, pages 16-17, section J-12, searches or physical examinations of transgender and intersex inmates for the sole purpose of determining the inmate's genital status is prohibited. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing

	the medical records, or, if necessary, by a medical examination conducted in private by a medical practitioner. In interview of random staff, they knew that this was prohibited by policy. Due to the recent directive from the DOJ on 12/2/25, this provision was identified as being non-applicable. Since the provision remains in the PREA law, this provision was audited, and the facility was found compliant with this provision of this standard. 115.15 (f): All searches of transgender and intersex inmates shall be conducted in a professional and respectful manner and in the least restrictive manner possible consistent with security needs. According to page 17, section J-12-g, the gender of staff member searching a transgender or intersex inmate will depend on the specific needs of the individual inmate or on the operational concerns of the facility. Under most circumstances, this will be a case-by-case determination, which may change over the course of incarceration and should take into consideration the gender expression of the inmate. Staff are trained on how to conduct pat searches, including searches of transgender and intersex inmates, in a professional and respectful manner. The Search Procedures curriculum was provided for review. In addition to general training provided to all staff, staff receive training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates. Receipt of this training was verified through review of random staff training records and confirmed in interviews with staff who reported they receive training on search procedures annually. At this facility, cross gender pat searches are allowed, and transgender or intersex inmate are given a choice of what gender staff they prefer to pat search them. Transgender and intersex inmates are given the opportunity to shower separately. At the time of the onsite audit visit, there was one transgender female inmate assigned to the Jenkins Correctional Facility. When interviewed she reported she prefers a female staff member to pat search her, but if female staff was not present, a male could pat search her. She also reported she is allowed to take showers in medical. On 6/27/25, members of SART met with the inmate and a <i>Transgender/Intersex Assessment and Treatment Plan</i> (14-9A) was completed on 6/27/25 and was provided for review. The inmate stated she wanted to shower in the housing unit sitting down in the shower. She had no preference for a male or female for pat searches and UA's and her preference is to be strip searched by female staff. Due to the recent directive from the DOJ on 12/2/25, this provision was identified as being non-applicable. Since the provision remains in the PREA law, this provision was audited, and the facility was found compliant with this provision of this standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.16 (a): Based on review of policy 14-2, pages 12 & 13, sections H-7-9, inmates are provided PREA education in formats accessible to all inmates, including those who are deaf or hard of hearing, blind or have low vision, cognitive deficits or have limited reading skills. The facility will ensure information is effectively communicated orally if necessary. In interview with the Vice President, Core Services (agency head designee), he stated, "CoreCivic has recently (2024) entered into a new contract with the vendor Voyce for all interpretation and translation services. Voyce allows every person at every facility to have immediate to have immediate access to an interpreter multiple ways: website, video chat, phone call, etc. We have also used them to translate inmate handbooks into Spanish before. If an inmate has other disabilities, staff is trained to convey all information to them however appropriate (reading a document or helping someone find information, etc.) There are also multiple reporting options at each facility to ensure that all inmates have a means of making a report either to CoreCivic or to an outside agency if they need help." The facility has two TTY machines stored in the QA Manager's office that are available for staff use and sign language interpretation is provided through the Voyce. At the time of the onsite audit visit, two inmates who were identified as hard of hearing were interviewed. Both stated they had hearing aids but were not wearing them. One inmate stated he is waiting to get new batteries from medical. Questions had to be repeated to both of them, but they responded appropriately. One inmate interviewed had low vision and stated he lost his vision in one eye at age 15. He stated he can read with his other eye. He also responded appropriately to questions asked of him. 115.16 (b): The agency takes steps to ensure inmates who are limited English proficient have access to all PREA information in a format they can understand. Inmates receive an Inmate Handbook and a <i>CoreCivic PREA Prevent, Detect, Respond</i> brochure, both available in English and Spanish. Inmates view the PREA education video, available in English and Spanish. Bilingual staff provide translation for Spanish speaking inmates and a contract with the Voyce is used for the translation of any other language. At the time of the onsite audit visit, there was one inmate identified as limited English proficient (Spanish) who was interviewed with assistance from the Voyce. The inmate stated a Spanish speaking staff member interpreted for him and he received all PREA information in Spanish and viewed the Spanish PREA video. 115.16 (c): The agency prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances. Staff translators or the Voyce is utilized to convey information to limited English proficient inmates. From information provided on the Pre-Audit Questionnaire, in the past 12 months, there have been no instances where inmates were used for this purpose. Random and specialized staff interviewed knew the agency prohibits using inmates for this purpose.
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115.17	Hiring and promotion decisions
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Auditor Overall Determination: Meets Standard

Auditor Discussion

115.17 (a): Per policy 14-2, pages 4 & 5, section B, the agency prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who have engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile facility or other institution. It also prohibits hiring or promoting anyone who has been convicted of engaging or attempting to engage in sexual activity in the community or who has been civilly or administratively adjudicated to have engaged in these activities.

115.17 (b): CoreCivic 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 requires that all applicants and employees who may have contact with inmates have a criminal background check. Criminal background checks are conducted by First Advantage. The Contract Monitor will be given the names of any applicant who has worked for any Georgia facility to reach out to the previous facility for information they may be able to provide about the employee. Once an applicant has been selected to be hired, a contract with First Advantage provides for a check on education, driving record, previous employment and drug screening. A criminal background check is also conducted for anyone who transfers from another CoreCivic facility.

115.17 (c): The agency requires that before hiring new employees a criminal background check be conducted. According to information provided on the Pre-Audit Questionnaire, 73 criminal background checks were conducted on new hires in the past 12 months. An effort is made to contact all prior institutional employers by telephone for information on substantiated allegations of sexual abuse or sexual harassments or any resignations during a pending investigation of an allegation of sexual abuse or sexual harassment. The agency makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegation of sexual abuse. In interview with the Human Resource Manager, the request is documented on the *Verification of Employment* form (3-20-2B). During the Pre-Onsite Audit Phase 21 employee human resource files were reviewed remotely. Of the 21 employees, there were eight employees who had prior institutional employment. The 3-20-2B forms were not completed for seven of the employees. One employee who transferred from another CoreCivic facility had a 3-20-2B form completed as an applicant to the facility he transferred from. During the Pre-Onsite Audit Phase this finding was discussed with the Human Resource Manager who completed the seven employee 3-20-2B forms at that time. Due to this finding, it was determined that the facility did not meet compliance to this provision of this standard and entered into a corrective action period. The recommended Corrective Action is as follows:

Recommended Corrective Action:

- The Human Resource Manager be provided training on the process for

completing *Verification of Employment* forms (3-20-2B).

- For the next 60 days, a *Verification of Employment* form (3-20-2B) be completed for any applicants who have had prior institutional employment.
- At the end of the 60 days, upload into OAS any 3-20-2B forms for my review.

Corrective Action Taken:

- On 10/28/25, the Director, PREA Programs and Compliance held a remote training on standard 115.17. According to the *Training/Activity Attendance Roster* (4-2A) the Assistant Warden/PREA Compliance Manager, QA Manager, Investigator and the Human Resource Assistant attended the training. The PowerPoint curriculum of the training was provided for review. The training not only addressed provision 115.17 (c) but included all provisions of this standard.
- On 11/18/25, the facility provided copies of two 3-20-2B forms and corresponding e-mail communication for new employees hired during the corrective action period who reported prior institutional employment. This requirement did not apply to other new hires during this period.

Due to the training provided to the Human Resource Manager and the completion of 3-20-2B forms during the corrective action period, it was determined the facility achieved compliance to this provision and all provisions of this standard.

115.17 (d): Agency policy requires that criminal background checks be completed on any contractor who may have contact with inmates. The Jenkins Correctional Facility has 10 contractors. According to information provided on the Pre-Audit Questionnaire, in the past 12 months there three criminal background checks conducted on contractors. During the Pre-Onsite Audit Phase four contractor files were reviewed. All contractors had criminal background checks when they were assigned to the facility.

115.17 (e): CoreCivic requires that criminal background checks be conducted every five years on current employees and contractors who have contact with inmates. In interview with the Human Resource Manager, she stated that five-year background checks and fingerprints are performed every five years by First Advantage and by the Jenkins County Sheriff's Department.

115.17 (f): All applicants, employees, contractors and volunteers are asked about previous misconduct as stated in section 115.217 (a). Agency policy requires that the 14-2H, *Self-Declaration of Sexual Abuse/Sexual Harassment* form be completed as part of the hiring process, when a person becomes an employee, as part of the promotional process and annually. In interview of the Human Resource Manager, she reported all staff assigned to the facility complete a 14-2H as part of the hiring process, when considered for a promotion and annually. This was confirmed in review of 21 employee and four contractor human resource files.

115.17 (g): CoreCivic policy mandates that material omissions regarding sexual

	misconduct and the provision of materially giving false information are grounds for termination as required by this standard. Employees have a continuing affirmative duty to disclose any sexual misconduct. 115.17 (h): CoreCivic shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied to work. In interview the Human Resource Manager she stated she responds to other institution when she receives requests for PREA information.
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115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.18 (a): Based on policy 14-2, page 8, section E, when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion or modification of existing facilities on the ability to protect inmates from sexual abuse. In interview with the Vice President, Core Services (agency head designee) he stated, "CoreCivic employs architects and other professionals who through experience, research and consulting have knowledge of the issues and needs presented by PREA on new builds and renovations, the design staff will consult with the PREA Coordinator for recommendation and work to ensure that PREA is addressed. Real estate and design staff receive information from the field on privacy concerns in areas such as showers, restrooms and any areas where inmates/residents may be in a state of undress. Blind spots are identified that can be corrected through video surveillance coverage. During acquisitions, the staff making the site visits develop a preliminary assessment and the PREA Coordinator is involved in the review of physical plant issues. At existing facilities, a form 7-1B, <i>Physical Plant Considerations</i> is used to ensure PREA is considered when initiating a renovation/new construction." According to information provided on the Pre-Audit Questionnaire and in interview with the Warden, since the last PREA audit there were no expansions or modifications of the existing facility, and the facility has not acquired any new facilities. 115.18 (b): When installing or updating a video monitoring system, electronic surveillance system or other monitoring technology, CoreCivic will consider how such technology may enhance the ability to protect inmates from sexual abuse. In interview the Vice President, Core Services stated, "Cameras are used to support direct/indirect staff supervision. Better quality systems have been installed and consideration to optimal coverage is addressed at the time of these upgrades. Camera placement also takes into consideration the privacy needs for cross gender viewing in areas like restrooms and shower areas. Technology is also discussed with the facility during the PREA Staffing Plan Assessment that is reviewed each year by

	facility staff and the FSC PREA Coordinator. Some facilities do use staff-worn camera technology while others do not." In interview with the Warden, he stated since the last PREA audit there was no installation or updating of the video monitoring system.
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.21 (a): Based on policy 14-2, page 27, section O-4, CoreCivic and the Jenkins Correctional Facility are responsible for conducting administrative sexual abuse investigations on both inmate-on-inmate and staff sexual misconduct. The facility has a trained investigator responsible for conducting administrative investigations of sexual abuse and sexual harassment. All reports of sexual abuse that appear to be criminal are referred to the Georgia Department of Corrections (GDC), Criminal Investigations Division (CID) who follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence and fulfill all requirements of this standard. The Georgia Department of Corrections CID follows the Standard Operating Procedures, policy number 103.01, <i>Criminal Investigations</i>, in conducting criminal investigations. 115.21 (b): The protocol is developmentally appropriate for youth where applicable and as appropriate, shall be adapted from or otherwise based on the most recent edition of the Department of Justice's Office on Violence Against Women publication. "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" or similarly comprehensive and authoritative protocols developed after 2011. 115.21 (c): Victims of sexual abuse have access to forensic medical examinations. Forensic exams are provided by SANE nurses from SART, LLC who come onsite to perform SANE exams. CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) entered into in June 2022 with SART, LLC. On 9/12/25 the CEO/Chief SANE Coordinator was contacted to discuss the process of SANE exams. SANE exams are performed in the medical department of the Jenkins Correctional Facility. One of four SANE nurses are dispatched to the facility. Designated state trained facility staff provide inmate victims with victim advocacy services onsite. The victim advocate is not allowed in the room while the exam is being conducted. Included in the SANE nurse's clinic notes are recommendations for the medical department to offer STD prophylaxis to the victim and for facility mental health staff to follow-up with the victim. Completed crime lab kits are given to security staff to store in the facility's evidence room until someone from the Office of Professional Standards (OPS) picks up the kit to be processed. There is no cost to the victim for SANE exams. On information provided on the Pre-Audit Questionnaire, in the past 12 months, there was one SANE exam performed. This was confirmed in interview with the CEO/Chief SANE Coordinator of SART, LLC.

	115.21 (d): The Mental Health Coordinator is trained by the Georgia Network to End Sexual Assault (GNESA) and accompanies a victim through the forensic examination process and provides emotional support. CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) with the Statesboro Regional Sexual Assault Center, doing business as Teal House. The Executive Director of Teal House was contacted on 9/12/25 to confirm and review the terms of the MOU. Teal House provides inmates with a 24/7 hotline number for inmate access to confidential emotional support services. Calls to the hotline are answered by contracted agencies that route the calls to one of the four Teal House advocates. If a caller reports sexual abuse to the advocate and this information has not been reported to the facility, the advocate encourages the caller to do so or to call 911. This information is not shared with the facility unless the caller is in imminent danger. Callers would be offered the opportunity to receive counseling upon their release. 115.21 (e): The facility provides a qualified facility staff member trained by the Georgia Network to End Sexual Assault (GNESA) who accompanies the victim through the forensic examination process. In interview with the PREA Coordinator she stated, "Each facility has an MOU that spells out responsibilities of the facility and the agency which provides advocates available. Advocates are always offered whenever an interview is conducted of a victim or if an inmate is transported to the hospital for a SAFE/SANE exam. The contact information for emotional support services is provided to inmates via the inmate handbook and is posted on the walls of the facility near any inmate phone bank or on bulletin boards in common areas." When asked how the agency ensures that the MOU meets the qualifications described in standard 115.221 (d), she stated, "We include these stipulations in the MOU that we sign with the agency providing the services. Both CoreCivic and the agency retain copies of the final and signed MOU." 115.21 (f): The facility has one trained facility investigator who are responsible for conducting administrative investigations of allegations of sexual abuse and sexual harassment. Criminal investigations are conducted by Georgia Department of Corrections (GDC), Criminal Investigations Division (CID).
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion 115.22 (a): According to CoreCivic Policy 14-2, page 26, section N-1, the Warden is responsible for ensuring an administrative and/or criminal investigation be completed for all allegations of sexual abuse and sexual harassment. The facility is responsible for conducting administrative investigations of all allegations of sexual abuse and sexual harassment. In the past 12 months there were 13 PREA allegations reported and administratively investigated. According to information reported on the Pre-Audit Questionnaire, in the past 12 months there was one PREA allegation referred for

criminal investigation to the GDC Office of Professional Standards (OPS). In interview with the Vice President, Core Services (agency head designee), he stated, "All allegations are reported in the Core Civic Incident Reporting Database (IRD) system and/or partner reporting systems. The allegation is then assigned to an Investigator. This system requires multiple levels of administrative oversight and review. A 72-hour phone call with the FSC PREA Office is held to ensure compliance and proper investigative process is being followed. Investigators are required to follow up with law enforcement before closing an administrative case."

One inmate-on-inmate sexual abuse allegation reported to several staff members by inmates from one housing unit was not reported until medical staff was advised one week later. Due to the late report of the inmate-on-inmate sexual abuse allegation, the referral of the allegation and the initiation of the administrative investigation was delayed. The facility was found to not meet compliance to this provision of this standard and entered into a corrective action period. The recommended corrective action is as follows:

Recommended Corrective Action:

- The Senior Director, PREA Programs and Compliance provide investigation training to the facility Investigator, the QA Manager and members of the SART. Have members in attendance sign a *Training/Activity Attendance Roster (4-2A)* and upload in OAS the 4-2A and the content of training provided.
- The facility Investigator to complete the pending investigations. When completed, upload each investigative file in the OAS.
- Any new allegations reported during the corrective action period, upload in OAS the investigative files for new allegations reported and investigated.

Corrective Action Taken:

1. On 10/29/25, the Director, PREA Programs and Compliance provided remote PREA Investigation Training. Provided for my review was the PowerPoint slides and narrative of the training and required documents. The training covered information pertaining to this standard as well as standards 115.61, 115.71, 115.73 and 115.86. A *Training/Activity Attendance Roster (4-2A)* was provided showing the Assistant Warden/PREA Compliance Manager, QA Manager, STG Officer, and the Investigator were in attendance.

2. Since the onsite audit visit, there were six allegations administratively investigated. Two allegations were reported during the onsite audit visit and four reported during the corrective action period. On 11/21/25 the six investigative files were reviewed. Investigations were found to be initiated upon receipt of the allegations and were complete with investigative reports and required documentation contained in each file. It was determined the facility achieved compliance to this provision and all provisions of this standard.

115.22 (b): According to CoreCivic policy 14-2, page 27, section O-1, CoreCivic facilities do not conduct criminal investigations of allegation of sexual abuse. If an

	allegation of sexual abuse or sexual harassment appears to be criminal, the allegation will immediately be reported to the GDC CID for criminal investigation. In interview of the Vice President, Core Services (agency head designee), he stated, "It is CoreCivic policy to immediately refer all allegations of sexual abuse that are potentially criminal in nature to law enforcement agencies with the legal authority to conduct investigations. All administrative investigations are conducted by CoreCivic Investigators who have received the specialized PREA training. CoreCivic never conducts criminal investigations, only administrative ones." 115.22 (c): The agency's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigations is published on the CoreCivic website (http://corecivic.com/security-operations/prea). In interview with the facility Investigator, he knew it was his responsibility to refer any allegations that appear to be criminal to the GDC CID for investigation.
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion 115.31 (a): Policy 14-2, pages 5 & 6, section C-1-3, addresses the agency's requirements of employee PREA training. All CoreCivic employees receive training on the agency's zero-tolerance policy (14-2) for sexual abuse and sexual harassment at pre-service and annually at in-service. The <i>PREA Overview</i> and the <i>Prison Rape Elimination Act</i> training curriculums were provided for review. The training, completed by employees during pre-service and annually in in-service training through Talent Central's e-learning, was found to include the following information: (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) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates 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 inmates. (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside

	authorities. Due to the recent directive from the DOJ on 12/2/25, subsection (9) of this provision was identified as being non-applicable. Since the provision remains in the PREA law, this provision was audited, and the facility was found compliant with this provision of this standard. Random interviews with staff confirmed what information was covered in the training. A new directive for 2025 is that the CoreCivic <i>PREA Overview</i> training will no longer be required. Staff will be required to complete the GDC <i>Prison Rape Elimination Act</i> training only. 115.31 (b): The training is tailored to meet the needs of male and female inmates. Employees who are reassigned from facilities housing only one gender of inmates are given additional training to meet the needs of the opposite gender population. Between trainings, employees are provided with quarterly PREA Refresher training, webinars, Quarterly Email Blasts and during the month of November, PREA Month, the PREA Coordinator and the Director, PREA Programs and Compliance provide <i>5-minute PREA Talks</i> by emailing different topics about PREA to staff agency-wide. 115.31 (c): This provision of this standard states PREA refresher training will be provided every two years. The agency/facility requirement is annual PREA training for employees, exceeding in the requirements of this provision. 115.31 (d): Upon completion of PREA training, employees confirm by electronic verification that they have completed and understood the PREA training and sign a <i>PREA Training Acknowledgement</i> (14-2A) and a <i>CoreCivic Zero Tolerance Policy Acknowledgement</i> (14-2J) forms. The Learning and Development Manager was informed that it is not necessary for employees to sign the 14-2J form annually. This form is only signed as a new employee. Twenty-one employee PREA training files were reviewed remotely during the Pre-Onsite Audit phase. Employees employed since the last PREA audit or hired any year in this reaccreditation period had documentation showing they had completed PREA training each year. Due to the knowledge of all staff interviewed and in review of 21 PREA training records, the facility was found to exceed in the requirements of this standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	115.32 (a): CoreCivic policy 14-2, pages 6 & 7, section C-8, outlines the training requirements for contractors and volunteers. The objectives of the trainings ensure volunteers and contractors are trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection and response policies and

	procedures. 115.32 (b): The level and type of training provided to contractors and volunteers is based on the services they provide. Per policy and standard requirements, all contractors and volunteers who have contact with inmates are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed of how to report such incidents and sign a <i>PREA Zero Tolerance Policy Acknowledgement</i> form (14-2J). Volunteers complete the <i>PREA Overview: Training for Contractors and Volunteers</i> (14-2K-CC). The curriculum for the training was provided for review. The Chaplain is designated as the Volunteer Coordinator, and he facilitates annual training for volunteers. Contractors receive the same training as employees do. Volunteers sign the third page of the training curriculum upon completion of the training acknowledging they have read the information and understood its content and sign a <i>PREA Training Acknowledgement</i> (4-2A) form. Contractors sign a 14-2A form and an electronic verification of completion of PREA training. 115.32 (c): The Jenkins Correctional Facility has 10 contractors and 12 volunteers. The Learning and Development Manager maintains documentation of contractor PREA training, and the Chaplain maintains documentation of volunteer training. In the review of five contractor training records and three volunteer training records, all records reviewed were complete with documentation of training maintained by the facility. In interview with three volunteers by telephone during the Pre-Onsite Audit Phase, they reported some of the topics the training contained. Two contracted Trinity Food Service Workers interviewed reported they have annual online training requirements through Trinity as well as through the facility and throughout the year Trinity requires additional training where quite often, PREA is the topic. The facility was found to exceed in the requirements of this standard.
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.33 (a): Based on CoreCivic's policy 14-2, pages 11 & 12, section H-1-6, all inmates receive information upon arrival to the facility about the zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency policy and procedures for responding to such incidents. In information provided on the Pre-Audit Questionnaire, in the past 12 months 1139 inmates assigned to the Jenkins Correctional Facility received PREA information at intake. Inmates receive an <i>Inmate Handbook</i> and a <i>CoreCivic PREA Prevent, Detect, Respond</i> brochure (14-2AA). All written information is provided in English and Spanish. They also view the <i>PREA: What You Need to Know</i> video. In interview of confirmed what information inmates

	receive upon arrival to the facility. Inmates interviewed confirmed they received written PREA information upon arrival to the facility and confirmed viewing the PREA video. 115.33 (b): Within 30 days of an inmate's date of arrival, Case Managers provide Comprehensive PREA Education. The Case Manager reviews PREA information and offers the inmate the opportunity to view the <i>PREA: What You Need to Know</i> video and receive another copy of the Inmate Handbook and the 14-2AA brochure. 115.33 (c): Inmates are provided PREA information in formats accessible to all inmates, including those who are disabled or Limited English Proficient (LEP). Written PREA information and posted information is provided in both English and Spanish. The <i>PREA: What You Need to Know</i> video is available in English and Spanish. The facility has a contract with the Voyce to provide translation of PREA information in any language. Two TTY 's, located in the QA Manager's office, are available for inmates who are deaf or hard of hearing. Sign language interpretation is provided by the Voyce. 115.33 (d): Twenty-three inmate records were reviewed to determine compliance to the requirements of PREA education for inmates. On day of arrival to the facility inmates sign a <i>PREA Education Acknowledgement</i> form acknowledging receipt the <i>Inmate Handbook</i> and the <i>CoreCivic PREA Prevent, Detect, Respond</i> brochure (14-2AA) and viewing the <i>PREA: What You Need to Know</i> video. They also sign a 14-2AA form upon completion of PREA Comprehensive Education. 115.33 (e): Ongoing information is provided continuously on posters, both in English and Spanish, prominently displayed in various locations throughout the facility. The GDC was providing electronic mobile GOAL devices, but they are no longer being provided. JPay kiosks are available for inmate use where PREA information is provided. All inmates interviewed were aware of the zero-tolerance policy and methods of reporting sexual abuse and sexual harassment available to them. Inmates interviewed shared they received written PREA information and viewed the PREA video when they first came to the facility.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.34 (a): Based on CoreCivic's policy 14-2, page 6, section C-5, in addition to general training provided to all employees, CoreCivic ensures facility Investigators receive training on conducting sexual abuse investigations in confinement settings. One employee is designated as the facility's Investigator. When interviewed, the Investigator confirmed completing specialized investigative training. 115.34 (b): The training includes techniques for interviewing sexual abuse victims,

	proper use of the Miranda and Garrity warning, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or referral for prosecution as verified in review of the <i>Investigating Sexual Abuse in Confinement Settings</i> curriculum. When interviewed, the Investigator confirmed the topics addressed in the training. 115.34 (c): The facility provided a copy of a certificate of completion for the specialized training of the facility Investigator completed on 10/19/21. The facility also maintains documentation of the general PREA training provided to all employees completed by the facility investigator. When interviewed, the Investigator knew his responsibilities in conducting administrative investigations and referral of any allegations that appear to be criminal to the GDC CID.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.35 (a): According to CoreCivic policy 14-2, page 6, section C-6 & 7, in addition to the general training provided to all employees all full and part-time Qualified Health Care Professionals and Qualified Mental Health professionals, working at CoreCivic facilities receive specialized medical/mental health training. The training includes how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence, and how to respond effectively and professionally to victims of sexual abuse and sexual harassment. 115.35 (b): Facility medical staff do not conduct forensic exams. CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) entered into in June 2022 with SART, LLC. On 9/12/25 the CEO/Chief SANE Coordinator was contacted to discuss the process of SANE exams. SANE exams are performed in the medical department of the Jenkins Correctional Facility. One of four SANE nurses are dispatched to the facility. Designated state trained facility staff provide inmate victims with victim advocacy services onsite. The victim advocate is not allowed in the room while the exam is being conducted. Included in the SANE nurse's clinic notes are recommendations for the medical department to offer STD prophylaxis to the victim and for facility mental health staff to follow-up with the victim. Completed crime lab kits are given to security staff to store in the facility's evidence room until someone from the Office of Professional Standards (OPS) picks up the kit to be processed. There is no cost to the victim for SANE exams. 115.35 (c): The facility maintains documentation that all full and part-time medical and mental health professionals complete Specialized Medical and Mental Health training. The facility provided an electronic verification report showing all medical and mental health staff have completed the <i>2025 PREA Medical and Mental Health Training</i>.

	115.35 (d): In addition to specialized training, medical and mental health practitioners complete general PREA training annually.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.41 (a): Inmates are screened for their risk of being sexually abused or sexually abusive towards others according to policy 14-2, pages 9-11, section. Classification staff screen inmates in the Intake area upon admission to the facility. When interviewed, the Classification Supervisor and two Case Managers explained the intake screening process. On the last day of the onsite audit visit, a screening of one newly assigned inmate was observed. The screening was conducted by a Case Manager in a property room adjacent to the Intake desk. When she completed the screening, the inmate was asked to sign the screening tool. 115.41 (b): Intake screening is completed within 24 hours of arrival to the facility. In information provided on the Pre-Audit Questionnaire, in the past 12 months, 1139 inmates assigned to the facility were screened upon arrival for their risk of sexual victimization and sexual abusiveness. In review of 23 inmate records and in interview of inmates confirmed inmates are being screened within 24 hours of their arrival to the facility, exceeding in the 72-hour requirement of this provision of this standard. 115.41 (c): In lieu of CoreCivic's 14-2B, <i>Sexual Abuse Screening Tool</i>, inmates are screened, using the GDC <i>PREA Sexual Victim/Sexual Aggressor Classification Screening Tool</i>, attachment 2 of <i>GDC Standard Operating Procedures</i>, policy number 208.06. The paper form of the screening tool is completed during an individual face-to-face interview with the inmate and then information from the paper form is entered into Scribe, an electronic inmate program. 115.41 (d): In review of the screening tool, it was found to consider all of the criteria required in this provision of this standard. The Classification Supervisor and two Case Managers interviewed confirmed the information contained in the GDC <i>PREA Sexual Victim/Sexual Aggressor Classification Screening Tool</i>. In review of the screening tool it considers, at a minimum, the following criteria to assess inmates for risk of sexual victimization and sexual abusiveness: (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. (9) The inmate's own perception of vulnerability. (10) Whether the inmate is detained solely for civil immigration purposes. Due to the recent directive from the DOJ on 12/2/25, subsection (7) of this provision was identified as being non-applicable. Since the provision remains in the PREA law, this provision was audited, and the facility was found compliant with all provisions of this standard. 115.41 (e): The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing inmates for risk of being sexually abusive, as confirmed by interview of Classification staff. 115.41 (f): According to policy 14-2, page 11, section G-13, 25 days after their arrival to the facility, inmates are rescreened by Classification staff using the <i>GDC PREA Sexual Victim/Sexual Aggressor Classification Screening Tool</i> to reassess the inmate's risk of victimization or abusiveness. According to information provided on the Pre-Audit Questionnaire, in the past 12 months 1139. inmates assigned to the facility whose length of stay was over 30 days were reassessed for their risk of victimization or abusiveness. In review of 23 inmate records to determine compliance with screening procedures, inmates are being rescreened within 30 days of arrival to the facility. 115.41 (g): In interview of the Classification staff, an inmate's risk level shall also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Transgender and Intersex inmates are rescreened every six months. 115.41 (h): Inmates are not disciplined for refusing to answer or for not disclosing complete information in response to questions asked on the screening form. 115.41 (i): To maintain confidentiality of screening information, access to this information on the <i>GDC PREA Victim/Sexual Aggressor Classification Screening Tool</i> is allowed to employees who have certain access to Scribe. The paper screening tools are maintained in Case Managers' offices behind locked doors. In interview of the PREA Coordinator she stated, "Access to the 14-2B and partner agency risk assessments are secured in the inmate's file in record office where access is controlled to only those who need access such as Case Managers and treatment personnel. Those assessments on computers are protected by passwords and are not accessible by all staff."
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115.42	Use of screening information
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Auditor Overall Determination: Meets Standard
Auditor Discussion
115.42 (a): The agency uses the information from the risk screening form to make housing, bed, work, education and program assignments with the goal of separating inmates at high risk of being sexually victimized from inmates with those at high risk of being sexually abusive. Individualized determinations are made about how to ensure the safety of each inmate. Policy 14-2, page 13, section I-1, addresses the use of the information obtained during the screening process. In interview with the PREA Coordinator she stated, "It is contrary to CoreCivic policy to place LGBTI inmates together in one dedicated unit. Housing decisions are made at the facility level using the screening form to assess risk. Transgender inmates are reviewed individually with consideration made for their own safety concerns. CoreCivic has an LGBTI Management policy (14-9) with an assessment form attached (form 14-9A). This is subject to review during internal audits, mock PREA audits and partner agency audits". 115.42 (b): Page 13, section I-1-7 of policy 14-2, addresses how individualized determinations on a case-by-case basis are made about how to ensure the safety of each inmate. In interview with the Assistant Warden/PREA Compliance Manager Classification staff they explained how the facility utilizes information from the screening to keep inmates safe from sexual abuse. Inmates who score at risk for victimization or abusiveness are not housed together. The Classification Supervisor makes the housing decisions. When interviewed she stated inmates who are screened to be at risk for victimization are housed in either 2D (Intake Dorm) or 3B (Honors Dorm). Victims and predators are tracked on a <i>PREA Housing Roster</i>. In review of the screening information of 23 inmates scored to be at risk of victimization or abusiveness and were found being tracked on the PREA Housing Roster. 115.42 (c): The decision whether to assign a transgender or intersex inmates to a male facility or a female facility will generally be made by the contracting agency prior to the inmate's arrival to a CoreCivic facility. Guidelines on housing and program assignments for the management of transgender and intersex inmates are outlined in policy 14-2, page 14, section I-8 and the facility follow CoreCivic policy 14-9, <i>Management of Transgender and Intersex Inmates</i>, in all housing determinations. In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, CoreCivic considers on a case-by-case basis whether the placement would ensure the inmate's health and safety and whether the placement would present management or security problems. According to policy 14-9, following the identification of a transgender or intersex inmate, the inmate is referred to the SART for an assessment using the CoreCivic 14-9A, <i>Transgender/ Intersex Assessment and Treatment Plan</i> form. The facility had one transgender inmate assigned to the facility during the onsite audit visit. The facility provided the 14-9A form for the meeting held by SART. In interview of the Classification Supervisor, she stated that transgender and intersex inmates will be housed in 2D close to the front of the dorm within camera view.

	115.42 (d): Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review whether any threats to safety were experienced by the inmate. In interview of the Assistant Warden/PREA Compliance Manager and Classification staff they stated transgender and intersex inmates are screened twice a year. 115.42 (e): According to agency policy 14-2, page 14, section i-8-c, transgender or intersex inmate gender self-identification and self-assessment of safety needs shall be given serious consideration in all housing and program assignments. 115.42 (f): According to agency policy 14-2, page 17, section J-12-h, transgender and intersex inmates are given the opportunity to shower separately from other inmates. Transgender and intersex inmates are asked if they want accommodations for showering. According to policy 14-2, page 17, transgender and intersex inmates will be provided an opportunity to shower in Health Services daily during a scheduled time determined by security and medical staff. In interview of the transgender inmate, she stated she can shower in the medical department. In review of her 14-9A, she stated she preferred to shower in the unit sitting in a chair. 115.42 (g): The facility shall not place lesbian, gay, bisexual, transgender or intersex inmates in dedicated units, wings or dormitories solely on the basis of gender identification or status. In interview with the PREA Coordinator she stated, "It is contrary to CoreCivic Policy to place LGBTI inmates together in one dedicated unit. Housing decisions are made at the facility level using the screening form to assess risk. Transgender inmates are reviewed individually with consideration made for their own safety concerns. CoreCivic has an LGBTI Management policy (14-9) with an assessment form attached (form 14-9A). This is subject to review during internal audits, mock PREA audits and partner agency audits". In interview of the Assistant Warden/PREA Compliance Manager, he stated the facility is not under any consent decree, legal settlement, or legal judgement requiring that it establish a dedicated facility, unit or wing for lesbian, gay, bisexual, transgender or intersex inmates. Due to the recent guidance from the DOJ on 12/2/25, provisions (c), (d), (e), (f) and (g) of this standard were identified as being non-applicable. Since the provisions remain in the PREA law, these provisions were audited, and it was determined the facility was compliant with all provisions of this standard.
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115.43 Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.43 (a): Information on restrictive housing is found on page 14, section I-9-a-f of CoreCivic policy 14-2. Inmates at high risk for sexual victimization shall not be placed in involuntary restrictive 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 the facility cannot conduct as an assessment immediately, the facility may hold the inmate in involuntary restrictive housing for less than 24 hours while completing the assessment. On information provided on the Pre-Audit Questionnaire and in interview with the Warden the Restrictive Housing Unit (RHU) Sargeant they stated, in the 12 past months no inmates have been placed in involuntary restrictive housing due to being at risk for sexual victimization. 115.43 (b): Inmates placed in restrictive housing shall have access to programs, privileges, education and work opportunities to the extent possible. If access to programs, privileges, education and work opportunities is restricted, the facility will document: (1) the opportunities that have been limited; (2) the duration of the limitation; and (3) the reasons for such limitations. The Warden and the RHU Sargeant reported during interview that inmates at high risk for sexual victimization are never housed in the RHU. 115.43 (c): Restrictive housing shall be used only until an alternative means of separation from likely abusers can be arranged and such an assignment shall not ordinarily exceed a period of 30 days. The Warden and the RHU Sargeant reported during interview that inmates at high risk for sexual victimization are never housed in the RHU. 115.43 (d): If involuntary restrictive housing is warranted as outlined above the documentation of such action shall clearly specify a basis for the facility concern for the inmate safety and the reason why no alternative means of separation can be arranged. The Warden and the RHU Sargeant reported during interview that inmates at high risk for sexual victimization are never housed in the RHU. 115.43 (e): Every 30 days, a review of each inmate status will be conducted to determine whether there is a continuing need for separation from the general population. The Warden and the RHU Sargeant reported during interview that inmates at high risk for sexual victimization are never housed in the RHU.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 (a): Policy 14-2, pages 17 & 18, section K-1, outlines the procedures for inmate reporting of allegations of sexual abuse and sexual harassment, retaliation by other inmates or staff or staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates are informed of the zero-tolerance policy and methods of reporting in the CoreCivic <i>PREA Prevent, Detect, Respond</i> brochure and on information posted throughout the facility in both English and Spanish. Reporting information can also be found on page 30 of the <i>Inmate Handbook</i>. Inmates are informed they can report to any staff member either verbally or in writing, including

Health Services, Mental Health or the Chaplain. They are also informed they can submit a letter marked "Confidential" to the Warden. Reporting information in English and Spanish is posted in all housing units concerning the procedures and reporting options available to inmates. Inmates and staff interviewed were aware of inmate reporting options available to them. Inmates are informed they can report allegations on the GDC PREA Reporting Line by dialing 1-8-7732 for English and 2-8-7732 for Spanish. On 9/15/25 the PREA Analyst for the Georgia Department of Corrections Office of Professional Standards was contacted to discuss the process of calls made on the inmate pay phones to the internal PREA Reporting Line (1-8-7732 for English and 1-2-7732 for Spanish). When an inmate calls this number and reports a PREA allegation, the caller would be prompted to leave a message. The PREA Analyst or one other person in that office handle these calls and forward the inmate's message to the facility immediately for administrative investigation. The PREA Analyst follows up with the facility and tracks the status of the investigation.

On the first day of the audit during the site review the number for English access was dialed (1-8-7732). The internal reporting line was found to be accessible and when the call was answered, I was prompted to leave a message. I stated my name and my purpose of calling and asked to be called back when my message was received. The following day at 9:46 a.m. I received a call back from the GDC PREA Analyst notifying me he had received my message.

115.51 (b): Inmates are also informed that they have options to report abuse or harassment to a public or private entity that is not part of CoreCivic or the contracting agency and information will be forwarded to facility officials. They are informed they can report sexual abuse and sexual harassment (including an anonymous report) by writing the Office of Victim Services, State Board of Pardons and Paroles, 2 Martin Luther King, Jr. Drive SE, Suite 458, Balcony Level, East Tower, Atlanta, GA 30334. They are also informed that letters to and from this address will not be opened and read.

115.51 (c): Employees must take all allegations of sexual abuse and harassment seriously whether they be made verbally, in writing, anonymously and from third parties and are required to promptly document all verbal reports as stated on page 19, section K-2-b of policy 14-2. Staff interviewed knew the reporting options for inmates and knew verbal reports must be documented. Staff who fail to report allegations may be subject to disciplinary action.

115.51 (d): CoreCivic employees, contractors, volunteers and third parties may privately report sexual abuse and sexual harassment of inmates in writing or may contact the CoreCivic's Ethics and Compliance Hotline at 1-800-461-9330 or report on CoreCivic's website at www.corecivic.com/ethicsline. Reporting methods can be found on the CoreCivic website and in the CoreCivic Code of Ethics, pages 16 & 17. Staff are informed of the Ethics Line on *Speak Up* and *Ethic Matters* posters. Employees can also report in writing to the Warden in a sealed envelope marked "Confidential". Staff interviewed were aware of inmate reporting options and about staff privately reporting sexual abuse of inmates by calling the agency's Ethics and Compliance hotline or reporting on the Ethics Line website and by reporting in writing confidentially to the Warden.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.52 (a): According to CoreCivic policy 14-2, pages 18 &19, section K-1-e, CoreCivic facilities do not maintain administrative procedures to address inmate grievances regarding sexual abuse, unless specifically mandated by contract. If a grievance reporting sexual abuse or sexual harassment is submitted, it will immediately be referred to the Grievance Coordinator who will forward it to the SART. According to the GDC <i>Statewide Grievance Process</i>, policy SOP 227.02, PREA-related grievances are processed according to SOP 208.06. 115.52 (b): The facility Investigator, Administrative Duty Officer and/or the PREA Compliance Manager will be informed immediately if an inmate submits a grievance alleging sexual abuse or sexual harassment. On information reported on the Pre-Audit Questionnaire it was noted in the past 12 months there was one PREA-related grievance submitted. In interview of the Grievance Coordinator, she reported there was one PREA-related grievance filed in the past 12 months. The Grievance Coordinator e-mailed a copy of the grievance to the Investigator and the other SART members. PREA protocols were initiated, and an investigation determined the inmate's allegation was unfounded. The grievance and the corresponding investigative file were reviewed. Inmates request grievance forms from their unit or their Case Manager. The inmate submits the grievance to their Case Manager who in turn submit the grievance to the Grievance Coordinator. 115.52 (c): Inmates who allege sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. Employees and contractors are to take all allegations of sexual abuse seriously, including verbal, anonymous and third-party reports. When interviewed staff and contractors knew that they must promptly document any verbal reports.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.53 (a): Policy 14-2, pages 8 & 9, section F, outlines the agency's policy on providing inmates with access to outside victim advocates for emotional support services related to sexual abuse. CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) with the Statesboro Regional Sexual Assault Center, doing business as Teal House. The Executive Director of Teal House was contacted on 9/12/25 to confirm and review the terms of the MOU. Teal House

	provides inmates with a 24/7 hotline number for inmate access to confidential emotional support services. Calls to the hotline are answered by contracted agencies that route the calls to one of the four Teal House advocates. If a caller reports sexual abuse to the advocate and this information has not been reported to the facility, the advocate encourages the caller to do so or to call 911. This information is not shared with the facility unless the caller is in imminent danger. Callers would be offered the opportunity to receive counseling upon their release. Inmates are informed of emotional support services available to them in the Inmate Handbook, page 31, and on posted information in English and Spanish. Inmates can call Teal House's hotline number (1-866-489-2225) by contacting a unit staff member or in writing to Teal House, 209 South College St., Statesboro, GA 30458. 115.53 (b): Inmates are informed prior to giving them access to outside victim advocates to the extent to which such communication will be monitored and to the extent which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Inmates are informed calls to the Teal House are not recorded or monitored. When interviewed, inmates believed they could remain anonymous if they chose to. 115.53 (c): CoreCivic and the Jenkins Correctional Facility maintain a copy of the MOU they have with Teal House entered into on 6/14/22. A copy of the MOU was provided for my review.
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.54 (a): The agency has a method to receive third-party reports of sexual abuse and sexual harassment. Family members or other individuals may report verbally or in writing to the PREA Coordinator or the Warden. Per CoreCivic policy 14-2, page 19, section K-2-h, information on third party reporting is made available on CoreCivic's website (www.corecivic.com/ethicsline) with instructions for outside parties to contact the or the PREA Coordinator and the telephone number to reach the Ethics Line (1-800-461-9330) is provided. Inmates, staff and visitors are made aware of third-party reporting on <i>Ethics Matters - Breaking the Code of Silence</i> and <i>Speak Up</i> posters found posted in visitation and the front lobby. Employees are encouraged to report any misconduct they become aware of to their immediate supervisor, Human Resources or facility leadership. Inmates and staff interviewed were knowledgeable of third-party reporting.

115.61	Staff and agency reporting duties
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Auditor Overall Determination: Meets Standard

Auditor Discussion

115.61 (a): Based on agency policy 14-2, page 19, section K-2, staff must take all allegations of sexual abuse and sexual harassment seriously, including verbal, anonymous and third-party reports. All staff are required to report immediately to the Assistant Warden/PREA Compliance Manager any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against inmates or staff who reported such an incident. Staff are to document all verbal reports promptly. Staff who fail to report allegations may be subject to disciplinary action. Random staff interviewed knew their reporting responsibilities. The PREA training curriculum addresses staff reporting responsibilities. All staff carry with them a *First Responder Card* to remind them of their responsibilities if they receive an allegation of sexual abuse.

In review of 13 investigative files during the Pre-Onsite Audit Phase, one inmate-on-inmate sexual abuse allegation reported to several staff members by inmates from one housing unit was not reported until medical staff was advised one week later. Due to staff members failure to report the allegation, disciplinary action was taken. Due to this finding the facility was found to be non-compliant with this provision of this standard and entered into a corrective action period. The recommended corrective action is as follows:

Recommended Corrective Action:

- The Senior Director, PREA Programs and Compliance provide investigation training to the facility Investigator, the QA Manager and members of the SART. Have members in attendance sign a *Training/Activity Attendance Roster* (4-2A) and upload in OAS the 4-2A and the content of training provided.
- The Assistant Warden/PREA Compliance Manager share with all staff a reminder that it is their duty to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse, sexual harassment or retaliation against any inmates or staff who reported such an incident.
- The facility Investigator to complete pending investigations. When completed, upload investigative files in the OAS.
- Upload in OAS the investigative files for any new allegations reported and investigated during the corrective action period.

Corrective Action Taken:

1. On 10/29/25, the Director, PREA Programs and Compliance provided remote PREA Investigation Training. Provided for review was the PowerPoint slides and narrative of the training and required documents. The training covered information pertaining to this standard as well as standards 115.22, 115.71, 115.73 and 115.86. A *Training/Activity Attendance Roster* (4-2A) was provided showing the Assistant Warden/PREA Compliance Manager, QA Manager, STG Officer, and the Investigator were in attendance.

	2. On 10/30/25, the QA Manager sent an e-mail to all Jenkins Correctional Center staff reiterating the importance of standard 115.61 and the responsibility of all staff to report any knowledge, or suspicion of any matters related to sexual abuse and sexual harassment. Attached to the e-mail was the PREA Resource Center's <i>Standard in Focus</i> for standard 115.61. 3. Since the onsite audit visit, there were six allegations administratively investigated. Two allegations were reported during the onsite audit visit and four reported during the corrective action period. On 11/21/25 the six investigative files were reviewed. Investigations were found to be reported and initiated upon receipt of the allegations and were complete with investigative reports and required documentation contained in each file. It was determined the facility achieved compliance to this provision and all provisions of this standard. 115.61 (b): Apart from reporting to designated supervisors, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Staff interviewed confirmed this practice. 115.61 (c): Medical and mental health professionals are required to follow reporting procedures as outline in policy 14-2, page 19, section K-2-f and obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. In interview of the HSA and Mental Health Coordinator they stated at the initiation of services to an inmate they disclose the limitations of confidentiality and their duty to report. 115.261 (d): The Jenkins Correctional Facility houses adult males only, none of whom according to their classified level of care are considered vulnerable adults under the State Vulnerable Persons Statue, as verified by interview with the Warden. The facility does not house victims under the age of 18. If there is an allegation of a vulnerable adult, facilities are instructed to contact local law enforcement agencies for reporting requirements. In interview with the Warden, he stated he would check with the Contract Monitor for this information. When interviewed the PREA Coordinator stated, "Each state has its own law and reporting requirements on this. In most of our facilities, a notification to law enforcement and the partner agency triggers their notification to any other agency as required. Mandatory reporting laws for each state are maintained and referenced whenever relevant." 115.261 (e): The facility reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to the Assistant Warden/ PREA Compliance Manager. Interview with specialized and random staff revealed staff is very knowledgeable of their responsibilities to report incidents of sexual abuse or harassment and know not to reveal any information about a sexual abuse incident to anyone other than to the extent necessary.
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115.62	Agency protection duties
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.62 (a): Policy 14-2, page 20, section M-1 requires that when it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate. In interview with the Vice President, Core Services (agency head designee), he stated, "Staff take immediate action to protect the inmate by removing the inmate from the area and/or individuals from the reported danger/risk. An investigation is immediately initiated to determine which other actions may be necessary to address the situation reported." In interview with the Warden and on information reporting on the Pre-Audit Questionnaire, in the past 12 months there were no instances where it was necessary for the facility to take immediate action in regard to an inmate being at substantial risk of sexual abuse. The Warden stated he would remove the inmate from the possible threat immediately. Staff interviewed were aware of their responsibilities if they felt an inmate was at risk for sexual abuse. They knew they are required to report this information to their supervisor. All staff carry with them a <i>First Responder Card</i> reminding them of the actions to take in the event they are a first responder to an allegation of sexual abuse. The <i>Sexual Abuse Incident Check Sheet</i> (14-2C-CC) is used to ensure all required steps and notifications are made

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.63 (a): CoreCivic policy 14-2, page 25, section M-20 was used to verify compliance to this standard. Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden shall notify the Warden where the sexual abuse was alleged to have occurred, with a copy of the statement of the inmate forwarded as part of the notification. 115.63 (b): This notification is to occur as soon as possible, but no later than 72 hours after receiving the allegation. In information provided on the Pre-Audit Questionnaire, in documentation provided for review and in interview with the Warden, in the past 12 months there was one allegation reported of an inmate being sexually abused while confined to a county jail facility. 115.63 (c): The Warden is required to document through 5-1B, <i>Notice to Administration</i> (NTA) that a notification was provided. The Assistant Warden/PREA Compliance Manager provided the county jail with a <i>Notice to Administration</i> (NTA), which was provided for review. 115.63 (d): The facility head or agency office that receives a notification will ensure

	that the allegation is investigated in accordance with the PREA standards. In interview of the Vice President, Core Services (agency head designee) he stated, "This occurs most often at the facility level rather than at the corporate office level. The information is received by the Warden at the facility; however, any staff who receives the information know to report it to the Warden and PCM for appropriate action. It then gets added into our incident system and the PREA protocols are initiated. If the central office (FSC) receives the referral, it will be immediately referred to the Warden and PCM at the facility for investigation." He further stated, "If the allegation was alleged to have occurred at another facility, the facility Warden receiving the information must notify the Warden at the other facility within 72 hours. If the allegation received as that an incident of sexual abuse allegedly occurred within the CoreCivic facility, both the partner agency and the investigative entity responsible for criminal investigations would be notified. The most common examples are allegations inmates make during their intake process. The CoreCivic staff obtain as much information as possible from the inmate and provide this to the Warden at the other facility as part of the notification. Each facility provides examples of these cases during PREA audits." In the past 12 months there was one notification received from another facility that an inmate assigned to a state prison reported that sexual abuse occurred while the inmate was assigned to the Jenkins Correctional Facility. On information provided for review, the PREA protocols were immediately initiated, and the allegation was investigated.
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115.64 Staff first responder duties	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.64 (a): CoreCivic policy 14-2, pages 20 & 21, sections M-2-6, outlines the procedures for first responders to allegations of sexual abuse by security and non-security staff. Per policy, upon learning of an allegation of sexual abuse, the first security responder is to keep the alleged victim safe with no contact with the alleged perpetrator and immediately escorted to a private area and ensure that the crime scene is preserved. If the abuse was alleged to have occurred within a period of time that allows for the collection of physical evidence, staff shall request the alleged victim to not wash, shower, remove clothing, use the restroom, eat, drink, smoke or brush his/her teeth and notify the highest supervisory authority on-site. Staff will ensure the alleged abuser does not take any actions that could destroy physical evidence. According to information reported on the Pre-Audit Questionnaire and in interview with the Assistant Warden/PREA Compliance Manager, in the past 12 months there were 10 allegations of sexual abuse reported. In all cases, security staff were first responders to the allegations. 115.264 (b): Policy mandates that if the first responder to an allegation of sexual

	abuse is a non-security staff member, they shall advise the alleged victim not to take any actions that could destroy physical evidence and then notify security staff immediately. Non-security staff members interviewed knew what to do if they were a first responder to an allegation of sexual abuse. All staff carry with them a <i>First Responder Card</i> that outlines their responsibilities in response to allegations of sexual abuse and sexual harassment. The <i>Sexual Abuse Incident Check Sheet</i> (14-2C) is used to ensure all required steps and notifications are made. Security and non-security staff are trained on first responder duties during pre-service and during annual in-service training. Interviews with security and non-security staff revealed that they knew the policy and practice to follow if they were the first responder to an allegation of sexual abuse or sexual harassment. They reported they knew that the alleged victim and abuser must be separated and knew how to preserve the crime scene and preserve any physical evidence. When interviewed, two first responders to allegations of sexual abuse explained the steps they took when they were first responders to allegations of sexual abuse.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.65 (a): CoreCivic policy 14-2, pages 19 & 20, section L, outlines the facility's coordinated response to an incident of sexual abuse. Page 20, section L-1, sections a-e, outlines the responsibilities of each member of the Sexual Abuse Response Team (SART) to ensure coordination of the facility's coordinated response plan. The SART includes the Assistant Warden/PREA Compliance Manager, Chief of Security, Investigator, HSA and the Mental Health Coordinator/Victim Services Advocate, with the agency's PREA Coordinator and/or Director, Compliance and Investigation, Senior Director and the Managing Director in attendance via telephone or zoom. In interview, with the Warden, he confirmed the members of the SART. A <i>Sexual Abuse Incident Check Sheet</i> (14-2C) is completed for all allegations of sexual abuse to ensure that all steps of the coordinated response plan are carried out and required notifications are made. All staff carry with them a <i>First Responder Card</i> to remind them of the steps to take in response to an allegation of sexual abuse. Interviews with members of the SART, revealed they knew their responsibilities in carrying out the coordinated response plan.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard

	Auditor Discussion 115.66 (a): CoreCivic policy 14-2, page 31, section S-2-g & h, was used to verify compliance to this standard. CoreCivic would not enter into any collective bargaining agreement or other agreement that would limit the agency's ability to remove alleged employee sexual abusers from contact with inmates pending the outcome of an investigation. Employees are subject to disciplinary sanctions up to termination for violating CoreCivic's policies on sexual abuse and sexual harassment. In interview with the Vice President, Core Services (agency head designee), he stated "Yes, CoreCivic as an agency has entered into and/or renewed collective bargaining agreements since August 20, 2012. The agreements permit CoreCivic to remove alleged staff sexual abusers from contact with the inmate pending an investigation or disciplinary action." One inmate-on-inmate sexual abuse allegation reported to several staff members by inmates from one housing unit was not reported until medical staff was advised one week later. Due to staff members failure to report the allegation, disciplinary action was taken.
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard Auditor Discussion 115.67 (a): CoreCivic has as policy to protect inmates who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff as outlined on pages 23-24, section M-19 of policy 14-2. The Mental Health Coordinator is responsible for retaliation monitoring. Monitoring is documented on the 14-2D, <i>PREA Retaliation Monitoring Report</i>. The date the retaliation monitoring is assigned is to be documented on the 14-2C, <i>Sexual Abuse Incident Check Sheet</i>. In review of the investigative file13 investigative files during the Pre-Onsite Audit Phase, there were four 14-2D forms not found filed in the respective investigative files. On the last day of onsite audit visit, a meeting was held with the facility Investigator, QA Manager, and the CoreCivic PREA Consultant. All completed investigative files were reviewed. One 14-2D form was not in the file was provided during the meeting. Documentation was provided for one inmate who refused his 30/60/90 days monitoring, one inmate transferred, one released and one was deceased prior to retaliation monitoring was scheduled to begin. During a corrective action period for other standards found in non-compliance, six additional investigative files were reviewed. One allegation was a sexual harassment allegation and five were allegations of sexual abuse. In four of the sexual abuse files 14-2D forms were found prepared but monitoring not started. In two cases the alleged victims were transferred to another facility and in two cases the 30-day monitoring date was scheduled after the date of my review. Documentation of retaliation monitoring for one alleged victim showed the victim was monitored for 30

	days and monitoring again in 60 days. 115.67 (b): Multiple protection measures, such as housing changes, or transfers of inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims are taken. In interview with the Vice President, Core Services (agency head designee), he stated, "For both inmates and staff who have reported allegations of sexual abuse, we provide monitoring on a 30/60/90-day period (longer if needed) to ensure no retaliation has occurred. These reviews are documented on an attachment to our 14-2 policy. The review takes into consideration any actions which may be perceived as retaliatory whether it be housing and/or job assignments with inmates/residents and shift changes, evaluations etc. for staff. These reviews also occur for victims of sexual abuse. Our policies and practices prohibit retaliation for any reason, and we include this expectation in training with staff. Any violations are acted upon accordingly." In interview with the Warden and Mental Health Coordinator they shared what measures they would take to protect inmates and staff from retaliation. The Warden stated he would consider housing changes for inmates and for staff consider different posts shift. The Mental Health Coordinator stated she would consider moving inmates to another dorm, put in for a transfer to another facility or house in medical to be close by. For staff she would go to the chain of command to find a solution. 115.67 (c): Monitoring is required 30/60/90 days following an allegation and can continue beyond 90 days if there is a continuing need. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place. In interview of the Warden and the Mental Health Coordinator, they explained the process and time frames of retaliation monitoring. Both stated monitoring would continue for 90 days and longer if necessary. 115.67 (d): In addition to monthly monitoring, inmates will also have periodic status checks, and any relevant documentation will be reviewed. 115.67 (e): If other individuals who cooperate with an investigation express a fear of retaliation, appropriate measures will be taken to protect that individual from retaliation. In interview with the Vice President, Core Services (agency head designee), he stated, "Our policies and practices prohibit retaliation for any reason, and we include this expectation in training with staff. Any allegations of retaliation are handled as a separate investigation than the original sexual abuse allegation." CoreCivic has a new non-retaliation policy 3-33 which encourages CoreCivic employees to speak up when they observe misconduct. CoreCivic <i>Ethic Matters Speaking Up and Non-Retaliation</i> (3-33), posters were found displayed in the facility reminding staff of their responsibility to speak up.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard

	Auditor Discussion 115.68 (a): According to CoreCivic policy 14-2, page 14, section I-9-g, any use of restrictive housing to protect an inmate who alleged to have been the victim of sexual abuse shall be subject to the requirements outline on page 14, section I-9-f. According to information provided on the Pre-Audit Questionnaire and in interview of the Warden and the RHU Sargeant, the Jenkins Correctional Facility has not placed any alleged victims in restrictive housing in the past 12 months. Both the Warden and RHU Sargeant reported an alleged victim would not be housed in RHU.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion 115.71 (a): The agency/facility conducts an investigation immediately when notified of an allegation of sexual abuse and sexual harassment including third party and anonymous reports. Administrative allegations of sexual abuse and sexual harassment are conducted promptly, thoroughly, and objectively. The facility Investigator is responsible for conducting administrative investigations of all sexual abuse and sexual harassment allegations at the Jenkins Correctional Facility. Information about administrative investigations is outlined in CoreCivic's policy 14-2, pages 26 & 27 section N, and criminal investigations are outlined on pages 27 & 28, section O. According to policy 14-2, all allegations of sexual abuse and sexual harassment are reported in the CoreCivic 5-1 policy, <i>Incident Reporting</i>. In the review of the 13 investigative files during the Pre-Onsite Audit Phase, the administrative investigative reports were not as thorough and comprehensive as agency procedures require. They did not contain all steps of the investigation in chronological order and in detail. On the last day of onsite audit visit, a meeting was held with the facility Investigator, QA Manager, and the CoreCivic PREA Consultant. All completed investigative files were reviewed. Due to my findings in review of investigative files the facility was found to not meet compliance to this provision of this standard and entered into a corrective action period. The following is the recommended corrective action: Recommended Corrective Action: • The Senior Director, PREA Programs and Compliance provide investigation training to the facility Investigator, the QA Manager and members of the SART. Have members in attendance sign a <i>Training/Activity Attendance Roster</i> (4-2A) and upload in OAS the 4-2A and the content of training provided. • The facility Investigator to complete pending investigations. When completed, upload in OAS the complete investigative files.

- Upload in OAS the investigative files for any new allegations reported and investigated during the corrective action period.

Corrective Action Taken:

1. On 10/29/25, the Director, PREA Programs and Compliance provided remote PREA Investigation Training. Provided for my review was the PowerPoint slides and narrative of the training and required documents. The training covered information pertaining to this standard as well as standards 115.22, 115.61, 115.73 and 115.86. A *Training/Activity Attendance Roster* (4-2A) was provided showing the Assistant Warden/PREA Compliance Manager, QA Manager, STG Officer, and the Investigator were in attendance.

2. Since the onsite audit visit, there were six allegations administratively investigated. Two allegations were reported during the onsite audit visit and four allegations reported during the corrective action period. On 11/21/25 the six investigative files were reviewed. Investigative reports were found to be complete and thorough adhering to agency procedure requirements. It was determined the facility achieved compliance to this provision and all provisions of this standard.

115.271 (b): The facility provided the Investigator's certificate of completion of *Investigating Sexual Abuse in a Confinement Setting*, a web-based training. When interviewed, facility Investigator confirmed completing this training and described some of the topics the training addressed.

115.271 (c): The Investigator gathers and preserves direct and circumstantial evidence, including physical and DNA evidence and available electronic monitoring data. In interview of the investigator, he reported he interviews the alleged victims, suspected perpetrators and witnesses and named some of the evidence they would collect in his investigation.

115.271 (d): Allegations involving staff or inmates that appear to be criminal are investigated by the GDC Office of Professional Standards (OPS) Criminal Investigations Division (CID) in accordance with the GDC Standard Operating Procedure, policy number 103.01. If the evidence appears to support criminal prosecution, compelled interviews will be conducted after consulting with prosecutors.

115.271 (e): The credibility of an alleged victim, suspect or witness is assessed on an individual basis and shall not be determined by the person's status as an inmate or a staff. The agency does not require an inmate who alleges sexual abuse to submit to a polygraph test. This was confirmed in interview with the Investigator.

115.271 (f): The administrative investigation shall include an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation is documented on the 5-1G-CC, *Incident Investigation Report*. The report includes investigative facts, physical evidence and testimonial evidence,

	reasoning behind credibility assessments, investigative findings and whether actions and/or failures of staff to act contributed to the incident, including explanation as to what determined the conclusion. 115.271 (g): A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. Information on criminal investigations is found on pages 25 & 26, section O of policy 14-2. 115.271 (h): Substantiated allegations shall be referred for prosecution. There was one inmate-on-inmate sexual abuse allegation determined to be substantiated through the administrative investigation that was referred to GDC OPS for criminal investigation. In conversation with the facility Investigator, GDC OPS has turned the evidence over to the Jenkins County District Attorney's office for possible prosecution. 115.271 (i): CoreCivic retains all written reports pertaining to administrative investigations of sexual abuse and sexual harassment for as long as the alleged abuser is incarcerated or staff member is employed by the agency, plus five years as required by the <i>CoreCivic Retention Schedule</i> (1-15 B). 115.271 (j): If an alleged staff abuser or victim terminates employment before the conclusion of an investigation, the investigation continues. If an inmate abuser or victim leaves the facility before the conclusion of the investigation, the investigation continues. The Investigator stated he would continue the investigation if the staff abuser or victim terminated their employment before the conclusion of the investigation. 115.271 (k): This provision is not applicable to this facility. CoreCivic facilities are not state entities or components of the Department of Justice responsible for investigating allegations of sexual abuse in prisons or jails. 115.271 (l): The facility shall cooperate with outside investigators and remain informed of the progress of the investigation through communication with outside investigators. In interview with the PREA Coordinator she stated, "Each facility develops its own relationship with local law enforcement and must follow-up on cases. Where CoreCivic has more than one facility, the partner agency OIG is often consulted about the status of investigations (TN, GA, etc.)." In interview of the Warden, Assistant Warden/PREA Compliance Manager and the facility Investigator, they all responded they would communicate with GDC Investigators to receive updates about the progress of the investigation.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard

	Auditor Discussion 115.72 (a): Based on CoreCivic's policy 14-2, page 27, section N-9, the agency shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. When the facility Investigator was asked what standard of evidence was used in determining if an allegation is substantiated, he confirmed the agency's policy and the standard requirement.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard Auditor Discussion 115.73 (a): Policy 14-2, pages 29 & 30, section R, was used to verify compliance to this standard. The policy indicates that following an investigation of sexual abuse of an inmate, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. According to information reported on the Pre-Audit Questionnaire, there were 13 completed administrative investigations of sexual abuse in the past 12 months. It is the responsibility of the Investigator or the STG Sargeant to present the notice to the victim. 115.73 (b): If the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the inmate. 115.73 (c): The policy further states that following an inmate's allegation that an employee has committed sexual abuse against the inmate; the facility is required to inform the inmate of the outcome of the investigation, unless the facility has determined that the allegation was unfounded. The inmate will be informed if the staff member is no longer posted within the inmate's unit, if the staff member was indicted on a charge related to sexual abuse or if the staff member has been convicted on a charge related to sexual abuse. In information provided on the Pre-Audit Questionnaire, in the past 12 months there were no staff found in violation of the zero-tolerance policy. 115.73 (d): Following an inmate's allegation that another inmate sexually abused him/her, the agency shall inform the inmate of the outcome of the investigation. The inmate is informed if the alleged abuser was indicted on a charge related to sexual abuse or the alleged abuser was convicted on a charge related to sexual abuse. 115.73 (e): All notifications or attempted notifications shall be documented on the 14-2E, <i>Inmate Allegation Status Notification</i> form. The inmate signs the 14-2E and the form is filed in the corresponding investigative file. If the inmate is released from CoreCivic custody, it is no longer the facility's obligation to notify the inmate. Thirteen investigative files were reviewed remotely during the Pre-Onsite Audit Phase.

Seven files contained *Inmate/Detainee Allegation Status Notification* (14-2E) forms. Blank 14-2E forms were found in three files due to the inmate being transferred or released before the investigation was completed and two files did not have 14-2E forms. Some files were found to have inaccuracies on the *Inmate/Detainee Allegation Status Notification* forms (14-2E). Errors included no signatures of inmate and/or staff or forms not being dated. The facility provided a justification for two of the 14-2E forms that were missing. One the alleged victim was transferred to another facility, and the second the facility is awaiting a disposition from GDC OPS who are conducting an ongoing criminal investigation. Due to this finding, the facility entered into a corrective action period. The recommended corrective action is as follows:

Recommended Corrective Action:

- The Senior Director, PREA Programs and Compliance provide investigation training to the facility Investigator, the QA Manager and members of the SART. Have members in attendance sign a *Training/Activity Attendance Roster* (4-2A) and upload in OAS the 4-2A and the content of training provided.
- The facility Investigator to complete the three pending investigations. When completed, upload each investigative file in the OAS. Any new allegations reported during the corrective action period, upload in OAS the investigative files for new allegations reported.

Corrective Action Taken:

1. On 10/29/25, the Director, PREA Programs and Compliance provided remote PREA Investigation Training. Provided for my review was the PowerPoint slides and narrative of the training and required documents. The training covered information pertaining to this standard as well as standards 115.22, 115.61, 115.71 and 115.86.

A *Training/Activity Attendance Roster* (4-2A) was provided showing the Assistant Warden/PREA Compliance Manager, QA Manager, STG Officer, and the Investigator were in attendance.

2. Since the onsite audit visit, there were six allegations administratively investigated. Two allegations were reported during the onsite audit visit and four reported during the corrective action period. On 11/21/25 the six investigative files were reviewed. All files contained *Inmate/Detainee Allegation Status Notification* forms. In two cases the inmates refused to sign the form, and that information was noted on the form. In two other cases, the forms were prepared, and it was noted the alleged victim was transferred to another facility. In two cases the forms were presented to the alleged victim and were found to be accurate with required signatures of the alleged victim and the staff presenting the notice, with both dated. It was determined the facility achieved compliance to this provision and all provisions of this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.76 (a): Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy as outlined in policy 14-2, page 30, section S-2-a-d. New Employees are required to read CoreCivic's <i>Code of Ethics</i> which outlines the standards of conduct employees will be held responsible to adhere to. Employees sign a <i>Code of Ethics Acknowledgement</i> form acknowledging they have read and understand the Code of Ethics. 115.76 (b): Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. 115.76 (c): Disciplinary sanctions for violation of agency policies related to sexual abuse or sexual harassment shall commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and other sanctions imposed for comparable offenses by other staff with similar histories. 115.76 (d): All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignation, shall be reported to law enforcement agencies unless the activity was clearly not criminal, and to relevant licensing bodies. From information provided on the Pre-Audit Questionnaire and in interview with the Warden, in the past 12 months, there no staff found in violation of the agency's sexual abuse and policy.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.77 (a): Based on review of policy 14-2, page 31, section S-2-e & f, any volunteer or contractor who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies or licensing boards, unless the activity was clearly not criminal. The facility has 12 volunteers and 10 contractors. 115.77 (b): Any other violation of CoreCivic sexual abuse or sexual harassment policies by a volunteer or contractor will result in appropriate corrective action up to and including restricting contact with inmates and removal from the facility. In interview of the Warden he stated if a volunteer or contractor violates the sexual abuse or sexual harassment policies, he would contact GDC immediately. In interview of the Warden and documentation provided on the Pre-Audit Questionnaire, in the past 12 months there were no volunteers or contractors found in violation of the agency's sexual abuse/sexual harassment policy.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.78 (a): Per policy 14-2, page 30, section S-1, inmates will be subject to disciplinary sanctions following an administrative finding that the inmate was found guilty of inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are informed in the <i>Inmate Handbook</i> of prohibited acts. According to information provided on the Pre-Audit Questionnaire and in interview with the Warden, in the past 12 months there were no inmates found in violation of the zero-tolerance policy. 115.78 (b): Sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories. Inmates are informed in the Inmate Handbook of sanctions that will be imposed for the violations of prohibited acts. 115.78 (c): The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his behavior in determining what type of sanction, if any should be imposed. On information in the Pre-Audit Questionnaire and in interview with the Warden he confirmed that mental disabilities and mental illness would be considered when determining disciplinary sanctions 115.78 (d): In the case of sexual abuse, the alleged perpetrator is offered mental health services. In interview with the Mental Health Coordinator, referrals are made to mental health, and victims and abusers are seen within 24-48 hours. 115.78 (e): An inmate may be disciplined for sexual conduct with an employee only upon a finding that the employee did not consent to such conduct. 115.78 (f): According to agency policy, inmates who deliberately allege false claims of sexual abuse may be disciplined. In review of two of the employee-on-inmate sexual abuse investigative files, the alleged victims were given disciplinary cases for reporting false information. 115.78 (g): Sexual activity between inmates is prohibited in all CoreCivic facilities and inmates may be disciplined for such activity. Inmates are informed that sexual misconduct is a violation against the facility's rules and regulations and what constitutes sexual misconduct. All sexual activity between inmates is prohibited and inmates are informed they will be disciplined for violations.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard

	Auditor Discussion 115.81 (a) & (c): According to CoreCivic policy 13-2, page 10, sections 10 & 11, if a screening indicates that an inmate has previously experienced prior sexual victimization, whether it occurred in an institutional setting or the community, staff will ensure the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. According to information provided on the Pre-Audit Questionnaire, all inmates assigned to the Jenkins Correctional Facility are offered a referral to medical and mental health following their initial screening. In interview of the Mental Health Coordinator, she reported inmates referred from PREA screening who score to be a victim are seen in Mental Health within 14 days or referral. In interview of inmates who self-disclosed prior sexual victimization, they reported being offered a referral to Mental Health. 115.81 (b): In a screening indicates an inmate previously perpetrated sexual abuse, the inmate is offered a referral to mental health. In interview of the Mental Health Coordinator, she reported inmates referred from PREA screening who self-disclose previously perpetrated sexual abuse are seen in Mental Health within 14 days or referral. In interview of inmates who self-disclosed previously perpetrating sexual abuse they reported being offered a referral to Mental Health. 115.81 (d): Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary to inform treatment plans and security management decisions, including housing, bed, work, education and program assignments, or as otherwise required by federal, state or local law. In interview of the Classification Supervisor, she stated that she makes the housing decisions for inmates who score to be victims or abusers. Victims are housed in dorm 2-D or 3-B. Those that screen to be abusers are housed in any other dorm. Inmates who self-disclose being transgender or intersex are assigned to dorm 2-D closest to the door in camera view. 115.81 (e): As stated in policy 14-2, page 19, section K-2-g, medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. In interview of the HSA and Mental Health Coordinator, they both said they would obtain consent before reporting any information about prior sexual victimization.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	115.82 (a): All inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services determined by medical and mental health practitioners according to their professional judgement, according to CoreCivic policy 13-79, page 1, policy statement. In review of investigative files of reported allegations of sexual abuse, in all cases the alleged victim was escorted to medical following their report of the allegation. 115.82 (b): Medical staff are available 24/7 at the Jenkins Correctional Facility. Security staff first responders are required to take preliminary steps to protect the victim. Security and non-security staff first responders confirmed their knowledge of the requirements to protect the victim to ensure their safety. 115.82 (c): CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) entered into in June 2022 with SART, LLC. On 9/12/25 the CEO/Chief SANE Coordinator was contacted to discuss the process of SANE exams. SANE exams are performed in the medical department of the Jenkins Correctional Facility. One of the four SANE nurses is dispatched to the facility. Designated state trained facility staff provide inmate victims with victim advocacy services onsite. The victim advocate is not allowed in the room while the exam is being conducted. Included in the SANE nurse's clinic notes are recommendations for the medical department to offer STD prophylaxis to the victim and for facility mental health staff to follow-up with the victim. Completed crime lab kits are given to security staff to store in the facility's evidence room until someone from the Office of Professional Standards (OPS) picks up the kit to be processed. 115. 82 (d): According to CoreCivic policy 13-79, medical and mental health treatment services are provided at no cost to the victim whether the victim names the abuser or cooperates with any investigation arising out of the incident. In conversation with the CEO/Chief SANE Coordinator of SART, LLC, there is no cost to the victim for SANE exams.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.83 (a): Based on CoreCivic's policy 13-79, page 3, the facility ensures medical and mental health evaluations and treatment to all inmates who have been victimized by sexual abuse. 115.83 (b): This treatment includes follow-up services, treatment plans and when necessary, referrals for continued care following their transfer to another facility or their release from custody. On 9/12/25 the CEO/Chief SANE Coordinator was contacted to discuss the process of SANE exams. She stated that included in the

	SANE nurse's clinic notes are recommendations for the medical department to offer STD prophylaxis to the victim and for facility mental health staff to follow-up with the victim. 115.83 (c): Inmate victims of sexual abuse are provided medical and mental health services consistent with the community level of care. In interview of the HSA and Mental Health Coordinator, they both stated the services inmates are offered are consistent or exceed the community level of care. 115.83 (d): Jenkins Correctional Facility does not house female inmates; therefore, this provision of this standard is not applicable to this facility. 115.83 (e): Jenkins Correctional Facility does not house female inmates; therefore, this provision of this standard is not applicable to this facility. 115.83 (f): In interview, of the CEO/Chief SANE Coordinator of SART, LLC she stated that included in the SANE nurse's clinic notes are recommendations for the medical department to offer STD prophylaxis to the victim. 115.83 (g): Treatment services are provided at no cost to the victim whether the victim names the abuser or cooperates with any investigation of the incident. 115.83 (h): According to CoreCivic's policy 14-2, page 11, section 15-h, all known inmate-on-inmate abusers shall have a documented referral for a mental health evaluation within 60 days of learning of abuse history. In interview of the Mental Health Coordinator, she stated inmate-on-inmate abusers would be seen in Mental Health within 24-48 hours after the allegation has been reported.
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.86 (a): Based on policy 14-2, page 29, section P, the Assistant Warden/Director/ PREA Compliance Manager will ensure a post investigation review of a sexual abuse incident is conducted within 30 days of the conclusion of every sexual abuse investigation, unless the allegation was determined to be unfounded. The <i>Sexual Abuse or Assault Incident Review Report</i> (14-2F) is completed for this review. In review of the 10 investigations of sexual abuse, six allegations were determined to be unfounded, three to be unsubstantiated and one allegation substantiated. A <i>Sexual Abuse Incident Review Report</i> forms (14-2F) were found filed in eight of the total investigative files reviewed, which included the six allegations that were unfounded. Three of the 14-2F forms did not have the date the investigation was closed and the date the incident review was conducted. The facility was found to not meet compliance to this provision of this standard and entered into a corrective action period. The recommended corrective action is as follows:

Recommended Corrective Action:

- The Senior Director, PREA Programs and Compliance provide investigation training to the facility Investigator, the QA Manager and members of the SART. Have members in attendance sign a *Training/Activity Attendance Roster* (4-2A) and upload in OAS the 4-2A and the content of training provided
- The facility Investigator to complete any pending investigations. When completed, upload in OAS each investigative file.
- Upload in OAS any new allegations reported during the corrective action period.

Corrective Action Taken:

1. On 10/29/25, the Director, PREA Programs and Compliance provided remote PREA Investigation Training. Provided for my review was the PowerPoint slides and narrative of the training and required documents. The training covered information pertaining to this standard as well as standards 115.22, 115.61, 115.71, and 115.73.

A *Training/Activity Attendance Roster* (4-2A) was provided showing the Assistant Warden/PREA Compliance Manager, QA Manager, STG Officer, and the Investigator were in attendance.

2. Since the onsite audit visit, there were six allegations administratively investigated. Two allegations were reported during the onsite audit visit and four reported during the corrective action period. On 11/21/25 the six investigative files were reviewed. In five of the investigative files, *Sexual Abuse Incident Review Report* (14-2F) forms were found in the respective files. One allegation was a sexual harassment allegation which does not require an incident review to be conducted. In review of the five 14-2F forms, all forms were complete with the date the investigations were closed and the date the review was conducted. All reviews were found to be timely and conducted well before the 30-day required timeframe. It was determined the facility achieved compliance to this provision and all provisions of this standard.

115.86 (b): The review shall occur within 30 days of the conclusion of the investigation.

115.86 (c): It is the responsibility of the SART to conduct these reviews. Members of the SART include the Warden, Assistant Warden/PREA Compliance Manager, HSA, Victim Services Coordinator/Mental Health Representative, Corrections Officer/Back-up PREA Compliance Manager, Correctional Officer/Security Representative and the Investigator, with the PREA Coordinator and/or the Director, the PREA Compliance and Investigation, Senior Director and Managing Director sometimes in attendance via telephone or zoom. In interview with the Warden, he confirmed the members of the SART.

115.86 (d): When reviewing an incident the SART shall:

(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 shift;
- (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 paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA Compliance Manager.

Due to the recent guidance from the DOJ on 12/2/25, subsection (2) of this provision was identified as being non-applicable. Since the provision remains in the PREA law, this subsection of this provision was audited, and it was determined the facility was compliant to all subsections of this provision.

All findings and recommendations for improvement are documented and submitted to the PREA Coordinator. In interview with the PREA Coordinator she stated. "We conduct an incident review on each substantiated or unsubstantiated allegation of sexual abuse. Form 14-2F is the Incident Review Form and training about how to conduct the incident review is conducted with PREA Compliance Managers. All provisions of the standard are covered on the 14-2F form that is used. Each 14-2F form is provided for review as part of the investigative case file." She further stated, "All investigative files are sent to the FSC for Director and Sr. Director review. This review includes an initial phone call with the facility and leadership, plus a review of all documentation in the investigative file at the close of the case. The incident review form is part of the documentation. When a trend is noticed, it is addressed appropriately, either through a phone call, training, site visit or other measures."

When asked what actions, if any, does the PREA Coordinator take after the report has been submitted to her, she replied, "After incident reports or completed investigations are submitted, the Director PREA Compliance must review and summarize any substantial cases for the Senior Director, Managing Director, and Vice President of Core Services. Any significant incidents are discussed with executive leadership by the Senior Director during monthly meetings. After the annual PREA report is finished, it is published on the public company website and distributed internally, including the Board of Directors, for review". When interviewed, the Warden, Assistant Warden/PREA Compliance Manager and other members of SART, knew their responsibilities as they relate to the review of sexual abuse incidents.

115.86 (e): The facility will implement the recommendations for improvement or will document reasons for not doing so. Both the Warden and the Assistant Warden/PREA Compliance Manager reported they would follow-up on any recommendations made during the incident reviews.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.87 (a): Information on data collection is found on page 29, sections T-1-3, of CoreCivic's policy 14-2. CoreCivic collects uniform data for every allegation of sexual abuse at all facility under their control. The facility ensures incidents of sexual abuse are entered into the 5-1 CC reporting system as required in CoreCivic policy 5-1 CC, <i>Incident Reporting</i>. 115.87 (b): At least annually, the PREA Coordinator aggregates the incident-based sexual abuse data. In interview with the PREA Coordinator he stated, "The agency reviews data collected and aggregated pursuant to 115.287 in order to assess and improve the effectiveness of the sexual abuse prevention, detection and response policies and training. Data from all facilities is included in the process." 115.87 (c): The data collected, will be 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 (DOJ). 115.87 (d): The facility maintains, reviews and collects data as needed including reports, investigation files and sexual abuse incident reviews. The facility will ensure that incidents of sexual abuse and sexual harassment are reported on the Prison Rape Elimination Act (PREA) Reporting (5-1E) form. According to CoreCivic's policy 14-2, page 30, section T-11, aggregated PREA sexual abuse data is retained for 10 years and PREA investigation files and written reports for 5 years after the inmate is released or post-employment of alleged abusers according to the CoreCivic Retention Schedule (1-15B). In interview of the PREA Coordinator she stated, " Every year CoreCivic complies an annual report where all data is aggregated and analyzed. Throughout the year aggregate data and any trends identified are discussed with leadership, including the Facility Director. All data (investigative reports) are held in a secure share drive folder that only FSC level PREA Director and Sr. Director, Community VP, Managing Director, Sr. Directors, and legal has access to. Any time a concern is identified, it is addressed with the Facility Director and their Operations chain of command to resolve. There is also a quarterly, semi-annual and yearly metrics summary distributed to the Facility Directors and above." 115.87 (e): This provision of this standard is not applicable to this facility. The agency does not contract for the confinement of its inmates. 115.87 (f): Upon request, or no later than June 30, the agency provides aggregated data information for the previous calendar year to DOJ. According to information reported on the Pre-Audit Questionnaire, DOJ requested this information in the previous calendar year.

115.88	Data review for corrective action
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.88 (a): Based on policy 14-2, page 29, section T-4-6 & 8, and on interview with the PREA Coordinator, the agency reviews all of the data collected from all of its facilities and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training. The PREA Coordinator prepares an annual report that provides problem areas and corrective actions for each facility and as the agency as a whole. When interviewed the PREA Coordinator stated, "An annual report is prepared each year to assess and improve the PREA program." When interviewed the Vice President, Core Services (agency head designee) stated, "A review of PREA data is made on a daily, monthly and annual basis. Incident data is provided daily to select FSC staff in a <i>Daily PREA Report</i> and via incident notifications. All substantiated cases are reported to leadership weekly and reviewed by the Director, PREA Programs and Compliance. Monthly and annually the data is reported as metrics in a format that can determine if there are trends at individual facilities or with inmate populations. Facilities can use the data to identify where sexual abuse may be occurring and whether changes to either physical plant, presence of staff/video coverage or procedures would minimize the risk of incidents in those areas." 115.88 (b): The annual report includes a comparison of the current year's data and corrective actions with those from the previous years and provides an assessment of the agency's progress in addressing sexual abuse. 115.88 (c): The PREA Coordinator forwards the annual report to the Chief of Corrections Officer for approval. The report is made public on CoreCivic's website and can be accessed at http://corecivic.com/the-prison-rape-elimination-act-of-2003-prea. Annual reports since 2013 were found published on the agency's website. In interview of the Vice President, Core Services (agency head designee) he stated he approves the annual reports. 115.88 (d): Before making aggregated sexual abuse data public, all personal identifiers are redacted. In interview with the PREA Coordinator, she stated, "The reports do not contain the identity or personal and medical information belonging to inmates or staff. Investigations referenced in the annual reports have no identifying information included."

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.89 (a): According to policy 14-2, pages 29 & 30, section T-7-11, the agency ensures that the data collected is securely retained. In interview with the PREA

	Coordinator she stated, "Files and information relative to investigations of PREA allegations are retained in the CoreCivic 5-1, <i>Incident Report Database</i>. This is on a secured server. Hard copies of investigation files are secured at the facility. All Annual Reports are published publicly on the CoreCivic website. Everything is subject to record retention schedules detailed in policy." 115.89 (b): The annual report is approved by the agency's Chief of Corrections. CoreCivic makes all aggregated sexual abuse data, from facilities under its direct control readily available to the public annually on their website at http://corecivic.com/the-prison-rape-elimination-act-of-2003-prea. 115.89 (c): Before making aggregated sexual abuse data publicly available, all personal identifiers are redacted. 115.89 (d): According to the <i>CoreCivic Retention Schedule</i> (1-15-B), the entire PREA packet including aggregated sexual abuse data is retained for 10 years. This information was confirmed in interview with the PREA Coordinator.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 (a): Based on policy 14-2, page 32, section U, CoreCivic ensures that an external audit of all of its facilities is conducted every three years to ensure compliance with the agency's policy, the PREA National Standards and federal law and regulations. The FSC Quality Assurance Department in conjunction with the PREA Coordinator ensures that a DOJ Certified PREA Auditor conducts the external audit. 115.401 (b): According to the agency's PREA Coordinator, during the three-year period beginning on August 20, 2013, CoreCivic ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years. The last PREA audit of this facility was conducted in 2022. 115.401 (f): I received and reviewed all relevant agency-wide policies for the Jenkins Correctional Facility. 115.401 (g): I reviewed a sampling of relevant documents and other records and information for the most recent one-year period. 115.401 (h): During the audit, I was allowed access to all areas of the facility. 115.401 (i): I was permitted to request and receive copies of any relevant documentation, including information that was stored electronically. 115.401 (j): I have retained all documentation relied upon to make audit

	determinations. The documentation will be provided to the Department of Justice upon request. 115.401 (k): I interviewed a representative sample of inmates and staff, supervisors, administrators, contractors and volunteers. 115.401 (l): I reviewed camera monitors and electronically stored data. 115.401 (m): I was permitted to conduct private interviews with inmates and staff ensuring confidentiality to our conversation. 115.401 (n): Inmates and staff were notified on 8/27/25 through posted facility notices in both English and Spanish that they could send confidential correspondence to me and were given my name and mailing address. I did not receive any correspondence. 115.401 (o): CoreCivic/Jenkins Correctional Facility have a Memorandum of Understanding (MOU) with the Statesboro Regional Sexual Assault Center, doing business as Teal House. The Executive Director of Teal House was contacted on 9/12/25 to confirm and review the terms of the MOU. Teal House provides inmates with a 24/7 hotline number for inmate access to confidential emotional support services. Calls to the hotline are answered by contracted agencies that route the calls to one of the four Teal House advocates. If a caller reports sexual abuse to the advocate and this information has not been reported to the facility, the advocate encourages the caller to do so or to call 911. This information is not shared with the facility unless the caller is in imminent danger. Callers would be offered the opportunity to receive counseling upon their release.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion 115.403 (a): Based on policy 14.2 CC, page 32, section U-4, each audit includes a certification by the auditor that no conflict of interest exists with respect to his/her ability to conduct a CoreCivic audit. No audit may be conducted by an auditor who has received financial compensation from CoreCivic within the three years prior to CoreCivic retaining the auditor. CoreCivic will not employ with or otherwise financially compensate the auditor for three years subsequent to CoreCivic's retention of the auditor, with the exception of contracting for subsequent PREA audits. I certify by my signature in the Auditor's Certification section of this report that no conflict of interest exists with my ability to conduct this audit. 115.403 (b): Audit reports shall state whether company-wide policies and procedures comply with relevant PREA National Standards. In thorough review of CoreCivic's <i>Sexual Abuse Prevention, Response</i> policy (14-2), the policy was found

to be well written and comprehensive complying with the PREA National Standards.

115.403 (c): For each standard, I made a determination of a finding of Exceeds Standard, Meets Standard or Does Not Meet Standard. Standards 115.11, 115.13, 115.31 and 115.32 were found to exceed in the requirements of the standards. Standards 115.17, 115.22, 115.61, 115.71, 115.73 and 115.86 were found to not meet all provisions of the standards and the facility entered into a corrective action period. Upon completion of the corrective action period, it was determined the facility achieved compliance to these standards and all other standards were determined to meet the requirements of the standards.

115.403 (d): This report describes the methodology, sampling sizes and basis for my conclusions as required.

115.403 (e): I have redacted any personal identifiable inmate or employee information, but I can provide such information to the Department of Justice upon request.

115.403 (f): Per agency policy and standard requirements, CoreCivic ensures that this final report will be published on their website at <http://corecivic.com/the-prison-rape-elimination-act-of-2003-prea>.

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
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115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
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Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
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115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
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	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes

	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit,	na

	whichever is later.)	
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	

	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with	yes

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how	yes

	to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes

	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Work Assignments?	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
115.43 (a)	Protective Custody	

	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b) Protective Custody		
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
115.43 (c) Protective Custody		
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes

	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	yes

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency	yes

	is exempt from this standard.)	
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes

	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a	yes

	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?	
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	

	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities	yes

	responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations,	yes

	including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in	yes

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	

	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does	yes

	the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	

	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation	yes

	has been determined to be unfounded?	
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	

	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	

	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401	Frequency and scope of audits	

(b)		
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse	yes

	noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	
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