PREA AUDIT: AUDITOR'S SUMMARY REPORT Community Confinement Facilities





Name of facility:	Macon Transitional Center						
Physical address:	200 Henry St. Macon	n Ga 3120	6				
Date report submitted:	Date report June 27, 2015						
Auditor Information	on Katherine Br	own					
Address:	12121 Little Road Su	uite 286 H	Hudson, Florida 3466	57			
Email:	kbrown2828@yahoo	o.com					
Telephone number:	727-470-4123						
Date of facility visit:	June 24, 2015						
Facility Informatio	n						
Facility mailing address:	SAA						
Telephone number:	478-751-6090						
Macon	☐ Military		☐ County	☐ Federa	1		
Transitional Center is:	☐ Private for profit		☐ Municipal	X State			
Center is:	☐ Private not for profit						
Facility Type:	☐ Community treatment center		y House 🔲 Restitu ol or drug rehabilita				
Name of PREA Con	npliance Manager:	Enis	Mitchell		Title:	Counselor	
Email address:		enisn	n@gdc.ga.gov		Telephone number:	478-751- 6534	
Agency Informatio	n						
Name of agency:	Georgia Department	of Correc	tions				
Governing authority:							
Physical address:	ss: 300 Patrol Road Forsyth, GA 31029						
Mailing address:	s: SAA						
Telephone number:	478-992-5211						
Agency Chief Exec	utive Officer						
Name:	Homer Bryson		Title:	Commissioner			
Email address:	Homer.Bryson@gdc	<u>.ga.gov</u>	Telephone number:	478-992-5101			
Agency-Wide PREA	A Coordinator						
Name:	Sharon Shaver		Title:	Agency PREA (Coordinator		
Email address:	Shaves01@dcor.stat		Telephone				

AUDIT FINDINGS

NARRATIVE:

The audit of Macon Transitional Center was conducted on June 24, 2015 by Katherine Brown, Certified PREA auditor. The areas toured were a total of 2 housing units. There are no administrative detention/segregation unit. I also toured the satellite kitchen (all food is transported over from Central State Prison), laundry, and programs area.

An entrance meeting was held with facility staff. The following people were in attendance: Timothy Jones, Superintendent; Sharon Shaver, PREA Coordinator; Brian Sanford, Chief of Security; Enis Mitchell, Counselor, SART Team; Britton Horton, Counselor; Tamika Burney, Counselor, Retaliation Monitor; Tervonda Daniel, Counseling Secretary; Charlotte Fry, Personnel; Sharon Harrison, Accounting; Jonathan Butts, Maintenance Officer, Victim Advocate; Lena Hawkins, Accounting Clerk, Alternate Victim Advocate; Terry Jones, Employment Manager and Andrew Chratian, Intake Officer.

Following the entrance meeting I toured the Macon Transitional Center from 8:15 – 9:00. On the tour with me was, Timothy Jones, Superintendent; Sharon Shaver, PREA Coordinator; Brian Sanford, Chief of Security; Enis Mitchell, Counselor, SART Team; Jonathan Butts, Maintenance Officer, Victim Advocate and Andrew Chratian, Intake Officer.

I asked for an alpha listing of all residents housed at Macon Transitional Center and randomly selected 15 residents to interview. There were no limited English speaking or had hearing/vision impairment to be interviewed. There were no transgender/intersex. I also asked for a shift roster and randomly selected 5 staff to interview.

There was one sexual assault/harassment allegation cases, all relatively recent (within the past year) which was a harassment claim that was unsubstantiated.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Macon Transitional Center is a two level facility with housing for residents on the first and second floors. The East Wing contains A & B unit. There are 13 rooms on each floor with 3 beds per room. The West Wing contains C & D unit with the same configuration of rooms. The administrative offices, medical section and dining areas are located in the front section of the first floor. The facilities maximum capacity is 156, six (6) long term maintenance residents, ten (10) fleet maintenance residents and 140 work release residents.

Macon Transitional Center currently has 29 positions; eight (8) non-security, twenty (20) security and one (1) Superintendent.

Macon Transitional Center currently has 24 cameras, linked to a Pelco DVR system that monitors Macon Transitional Center. The cameras are monitored by the Post 1 officer and periodically reviewed by the Chief of Security and the Superintendent. A project request to add cameras in the east and west wing stairwells has been submitted.

The goal of Macon Transitional Center is to "create and maintain an organizational culture that is free from any form of sexual misconduct, harassment, or abuse. In doing so we must demand and enforce professionalism and lead by example".

SUMMARY OF AUDIT FINDINGS: (38)

Number of standards exceeded: 3

Number of standards met: 34

Number of standards not met: 0

Number of standards not applicable: 1

Standard number here	§115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	eds Standard (substantially exceeds requirement of standard)
	s Standard (substantial compliance; complies in all material ways with the standard for vant review period)
□Does	Not Meet Standard (requires corrective action)
Auditor c	omments, including corrective actions needed if does not meet standard
	GDOC SOP 208.06 IV A.1; Macon Transitional Center LOP 208.06 IV. A 1. Based ews with PREA Coordinator and PREA compliance manager.
of sexual a	epartment of Corrections has a written policy mandating zero tolerance toward all forms abuse and sexual harassment and outlines Georgia Department of Corrections' approaching, detecting, and responding to such conduct.
coordinato	epartment of Corrections employs or designates an upper-level, agency-wide PREA or with sufficient time and authority to develop, implement, and oversee agency efforts with the PREA standards.
Standard number here	§115.212 Contracting with other agencies for confinement of residents
☐ Excee	eds Standard (substantially exceeds requirement of standard)
	Standard (substantial compliance; complies in all material ways with the standard for vant review period)
□ Does	Not Meet Standard (requires corrective action)
Auditor c	omments, including corrective actions needed if does not meet standard
Reviewed	GDOC SOP 208.06 IV A.2. Based on interview with agency's contract compliance
Macon Tra	nsitional Center does not contract for the confinement of their residents.
Standard number here	§115.213 Supervision and monitoring
	ada Standard (substantially exceeds requirement of standard)
	eds Standard (substantially exceeds requirement of standard)
	Standard (substantial compliance; complies in all material ways with the standard for vant review period)
□ Does	Not Meet Standard (requires corrective action)
Auditor c	omments, including corrective actions needed if does not meet standard

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Reviewed GDOC SOP 208.06 IV A. 3; Annual Staffing Plan; Memo from Superintendent; staffing schedule. Based on interview with Superintendent: PREA Compliance Manager and PREA Coordinator.

Georgia Department of Corrections has developed, documented, and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring, to protect residents against sexual abuse.

In circumstances where the staffing plan was not complied with, Macon Transitional Center documented and justified all deviations from the plan.

Georgia Department of Corrections completes an annual review, in consultation with the PREA coordinator required by § 115.11, to assess, determine, and document whether adjustments are needed.

Standard number here

§115.215 Limits to cross gender viewing and searches

□ Exceeds Standard	(substantially	exceeds rec	quirement	of standard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV A. 5. (a-g); Macon Transitional Center LOP 208.06 IV. A.; power point; staff training roster.

Macon Transitional Center does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances. Macon Transitional Center documents all cross gender strip searches and cross gender visual body cavity searches, pat down searches of female residents.

Macon Transitional Center has policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures require staff of the opposite gender to announce their presence when entering a resident housing unit. Macon Transitional Center makes and announcement over the PA system advising the residents what wing the female is entering and then another announcement is made by staff or residents when the female enters the housing unit.

Macon Transitional Center does not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it is determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

Georgia Department of Corrections trains security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Macon Transitional Center does not conduct cross gender pat down searches of its residents.

Standard number here	§115.216 Residents with disabilities and limited English speaking

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV A. 6 (a & b). Based on random resident and staff interviews.

Georgia Department of Corrections takes appropriate steps to ensure residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of Georgia Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Macon Transitional Center has not had a disabled resident but in the event they received one they would contact Central State Prison for materials.

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

Standard number here §115.217 Hiring and promotion decisions

X Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV A. 7 (a-d). Based on interview with Human Resource Director Review of personnel files.

Georgia Department of Corrections does not hire or promote anyone who may have contact with residents, and does not enlist the services of any contractor who may have contact with residents, who has engaged in sexual abuse in any criminal justice facility, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied

threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above.

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

Georgia Department of Corrections performs a criminal background records check before enlisting the services of any contractor who may have contact with residents performs a records check annually on current employees and contractors who may have contact with residents.

Based on annual background checks being performed I find Macon TC exceeds in this standard.

Standard number here §115.218 Upgrades to facilities and technology

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

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

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, Georgia Department of Corrections considers how such technology may enhance Georgia Department of Corrections' ability to protect residents from sexual abuse. There have been no substantial or modifications to existing facilities. The Macon Transitional Center has a total of 24 cameras, a project request to add camera's in the east and west wing stairwells has been submitted.

Standard number here §115.221 Evidence protocol and forensic medical exams

∃ Exceeds Standard (su	ubstantially exceeds	s requirement o	f standa	ırd)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV B. 1 (a-f); Sexual Abuse Response Checklist; SANE Nurse Call Roster; MOU with WINGS; Certificate — Sexual Assault Response Team; SANE Nurse On Call Roster from Global Diagnostic. Based on interview with SANE/SAFE staff and PREA compliance manager.

To the extent Georgia Department of Corrections is responsible for investigating allegations of sexual abuse; Georgia Department of Corrections follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. GDOC Office of Investigations Compliance investigates all allegations.

Georgia Department of Corrections offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations are be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) from Crisis Line & Safe House of Central Georgia. There are also two staff members trained as Victim Advocates, who have been trained by the Director of the Safe House.

Georgia Department of Corrections makes available to the victim a victim advocate from a rape crisis center from Crisis Line & Safe House of Central Georgia.

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

Standard §115.222 Policies to ensure referrals of allegations for investigations

	П	Exceeds	Standard ((substantially	exceeds re	auirement	of standard
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV B. 1; IK01-0006 Investigations of Allegations of Sexual Contact. Based on interview with agency head and investigative staff.

Georgia Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

Georgia Department of Corrections has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Georgia Department of Corrections publishes such policy on its website. Georgia Department of Corrections documents all such referrals. The Office of Investigations Compliance conducts all investigations.

Standard number here §115.231 Employee training

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

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

Reviewed GDOC SOP 208.06 IV C. 2; Lesson Plan; PowerPoint; and Signed Training Roster, Based on interview with random staff.

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

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

The training is tailored to the gender of the residents at Macon Transitional Center. The employees receive additional training if the employee is reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa.

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

Standard number here

§115.232 Volunteer and contractors training

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

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

Reviewed GDOC SOP 208.06 IV C. 3 (a-c); Lesson Plan. Based on interview with volunteer.

Macon TC does not utilize contractors. All volunteers are trained by the Chaplain from Central State Prison.

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

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

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Georgia Department of Corrections has documentation confirming that volunteers and contractors understand the training they have received.

All supervised outside vendors are required to sign the Sexual Assault/Sexual Misconduct Acknowledgment Statement for Supervised Visitors.

Based on Macon TC requirement of all Supervised Visitors signing the Sexual Assault/Sexual Misconduct Acknowledgement form I find they exceed in this standard.

Standard number here §115.233 Resident education

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV C. 4; Responding to Prison Rape brochure; Resident Handbook; video. Based on interview with random residents and intake staff.

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

Georgia Department of Corrections provides refresher information whenever a resident is transferred to a different facility.

Georgia Department of Corrections provides resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills. There is documentation of resident participation in these education sessions. Macon TC has not received a resident that was disabled or limited English speaking but they would contact Central State Prison for materials needed.

Standard number here	§115.234 Specialized training: Investigators

		Exceeds	Standard	(substantially	exceeds req	uirement of	f standard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV C. 5; SART Investigator Training. Based on interview with investigative staff

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

Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Georgia Department of Corrections maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. OIC conducts all investigations that appear to be criminal.

Standard sta

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Reviewed GDOC SOP 208.06 IV. C 6; certificates from NIC for Specialized Medical Health Care for Sexual Assault Victims in a Confinement Setting.

Medical staff from Central State Prison comes to Macon TC to provide medical services.

Georgia Department of Corrections ensures that all full and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to: detect and assess signs of sexual abuse and sexual harassment; preserve physical evidence of sexual abuse; respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

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

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

Standard number here §115.241 Screening for risk of victimization and abusiveness

X Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV D. 1 (a-h). Reviewed Offender PREA Classification Detail. Based on interview with random residents and intake staff responsible for screening. Only the Counselors and Chief of Security have access to the risk screening form.

All residents are assessed during intake screening and upon transfer to another facility for risk of being sexually abused by other residents or sexually abusive toward other residents. On the count board a blue circle on the residents name tag signifies a victim and red dot on the residents name tag signifies an aggressor. This is an easily identifiable way to ensure the victim and aggressors are not housed together.

Intake screenings take place immediately upon arrival at Macon Transitional Center.

Macon Transitional Center uses an objective screening instrument.

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

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

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

Within 30 days from the resident's arrival at Macon Transitional Center, Macon Transitional Center reassesses the resident's risk of victimization or abusiveness based upon any additional, relevant information received by Macon Transitional Center since the intake screening.

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

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

Georgia Department of Corrections implements appropriate controls on the dissemination within Macon Transitional Center of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents.

Based on the screening being performed immediately upon arrival and the red and blue dot codes they have on the count board I find Macon TC exceeds in this standard.

Standard number here

§115.242 Use of screening information

X Meets Standard (substantial complete relevant review period) Does Not Meet Standard (requires and interview with PREA compliance managed and in making other housing corrections considers on a case-by-case health and safety, and whether the place at least twice each year to review any the actions consideration. Transgender and intersex residents are residents. Georgia Department of Corrections makes a case-by-case health and safety, and whether the place at least twice each year to review any the actions consideration. Transgender and intersex residents are residents. Georgia Department of Corrections does residents in dedicated facilities, units, or unless such placement is in a dedicated facilities, units, or unless such placement is in a dedicated facilities.	ing
X Meets Standard (substantial complete the relevant review period) Does Not Meet Standard (requires and the relevant review period) Reviewed GDOC SOP 208.06 IV D. 2 (actor interview with PREA compliance managed by the properties of the program assigns at high risk of being sexually victimized are high risk of being sexually victimized assigns a period of the program assigns at high risk of being sexually victimized assigns a period of the programment of the program assigns a period of the programment of the programming assignment and programming assignment at least twice each year to review any the programming assignment at least twice each year to review any the programming consideration.	s not place lesbian, gay, bisexual, transgender, or intersex r wings solely on the basis of such identification or status, d facility, unit, or wing established in connection with a al judgment for the purpose of protecting such residents.
X Meets Standard (substantial complete the relevant review period) Does Not Meet Standard (requires and the relevant review period) Reviewed GDOC SOP 208.06 IV D. 2 (and the review with PREA compliance mandates are the period of the resident of the resident of the resident of the resident of the resident. In deciding whether to assign a transgence of the resident of the reside	e given the opportunity to shower separately from other
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X Meets Standard (substantial complete the relevant review period) Does Not Meet Standard (requires Auditor comments, including correct Reviewed GDOC SOP 208.06 IV D. 2 (and interview with PREA compliance management) Georgia Department of Corrections used bed, work, education, and program assigned.	es individualized determinations about how to ensure the
X Meets Standard (substantial complete the relevant review period) ☐ Does Not Meet Standard (requires Auditor comments, including corrected Reviewed GDOC SOP 208.06 IV D. 2 (a-	is information from the risk screening to decide housing, gnments with the goal of keeping separate those residents from those at high risk of being sexually abusive.
X Meets Standard (substantial complethe relevant review period)□ Does Not Meet Standard (requires	-d). Reviewed Offender PREA Classification Detail. Based nager and staff responsible for risk screening.
X Meets Standard (substantial compl the relevant review period)	ctive actions needed if does not meet standard
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☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV E. 1. (a-e); Resident Handbook; Responding to Prison Rape brochure English/Spanish. Based on interviews with random staff and residents.

Georgia Department of Corrections provides multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Georgia Department of Corrections provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of Georgia Department of Corrections, and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials, allowing the resident to remain anonymous upon request. Offenders can dial *80 to call the hotline; call the Ombudsmen 478-992-5358 or write Parole Board of Pardons and Parole Victim Services or the Safe House of Central GA.

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

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

Standard number here

§115.252 exhaustion of administrative remedies

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV. E. 2; SOP IIB05-0001 Statewide Grievance Procedure. Georgia Department of Corrections does not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.

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

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

Georgia Department of Corrections issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.

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

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

After receiving an emergency grievance alleging a substantial risk of imminent sexual abuse, Georgia Department of Corrections immediately forwards the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action is taken, and provides an initial response within 48 hours, and issues a final agency decision within 5 calendar days. The initial response and final agency decision documents Georgia Department of Corrections' determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

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

Standard number here §115.253 Resident access to outside confidential support services
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Reviewed Macon Transitional Center LOP 208.06 pg. 10 (d); Responding to Prison Rape brochure. Based on interview with random residents.
Macon Transitional Center provides residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers for Crisis Line & Safe House. Macon Transitional Center enables reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.
Macon Transitional Center informs residents, 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.
Georgia Department of Corrections maintains a memoranda of understanding with Crisis Line & Safe House.
Standard number here §115.254 Third party reporting
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

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

Reviewed GDOC SOP 208.06 IV E. 4.

☐ Does Not Meet Standard (requires corrective action)

Georgia Department of Corrections has a method to receive third-party reports of sexual abuse/harassment and distributes publicly, information on how to report sexual abuse and sexual harassment on behalf of a resident. Residents can contact the Ombudsman Office or State Board of Pardons and Paroles Office of Victim Services.

Standard number here §115.261 Staff and agency reporting duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Reviewed GDOC SOP 208.06 IV F. 1. (g-i). Based on interviews with random staff; Superintendent and medical/mental health staff from Central State Prison.
Georgia Department of Corrections requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of Georgia Department of Corrections; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
Apart from reporting to designated supervisors or officials, staff do not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.
Macon Transitional Center reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to Macon Transitional Center's designated investigators.
Standard number here §115.262 Agency protection duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Reviewed SOP 208.06 IV. F. 2. Based on interviews with random staff, and Superintendent.
Immediate action is taken to protect residents when Georgia Department of Corrections learns that a resident is subject to a substantial risk of imminent sexual abuse.
Standard number here §115.263 Reporting to other confinement facilities

☐ Exceeds Standard (substantially exceeds requirement of standard)

$\hfill \square$ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Reviewed GDOC SOP 208.06 IV F. 3 (a-d). Based on interview with agency head and Superintendent.
Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of Macon Transitional Center that received the allegation notifies the head or appropriate office where the alleged abuse occurred. Such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented.
Standard number here §115.264 Staff first responder duties
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (requires corrective action)
Auditor comments, including corrective actions needed if does not meet standard
Reviewed GDOC SOP 208.06 IV F. 4. Based on interview with security staff who are first responders and random staff.
Upon learning of an allegation that a resident was sexually abused, the first security staff member to respond separates the alleged victim and abuser; preserves and protects any crime scene until appropriate steps can be taken to collect any evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
If the first staff responder is not a security staff member, the responder request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.
Standard number here §115.265 Coordinated response
☐ Exceeds Standard (substantially exceeds requirement of standard)
X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV F.5; Macon Transitional Center LOP 208.06 ATT9. Reviewed Coordinated Response Plan. Based on interview with Superintendent.

Macon Transitional Center has a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Standard number here	§115.266 Preservation of ability to protect residents from contact with abusers
□ Exce	eeds Standard (substantially exceeds requirement of standard)
	ts Standard (substantial compliance; complies in all material ways with the standard for evant review period)
□ Doe	s Not Meet Standard (requires corrective action)
X Not	applicable
Auditor	comments, including corrective actions needed if does not meet standard
Georgia	Department of Corrections does not participate in collective bargaining.
Standard number here	§115.267 Agency protection against retaliation
□ Exce	eeds Standard (substantially exceeds requirement of standard)
	s Standard (substantial compliance; complies in all material ways with the standard for evant review period)

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

☐ Does Not Meet Standard (requires corrective action)

Reviewed GDOC SOP 208.06 IV F. 6 (a-e); Macon Transitional Center LOP II A21-0001 ATT9. Based on interview with agency head, Superintendent and designated staff member with monitoring retaliation.

Georgia Department of Corrections has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff, and designate which staff members or departments are charged with monitoring retaliation.

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

For at least 90 days following a report of sexual abuse, Georgia Department of Corrections monitors the conduct and treatment of residents or staff who reported the sexual abuse and of

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

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

Standard number here	§115.271 Criminal and administrative agency investigation	

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV G. 3. Based on interview with investigative staff.

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

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

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

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

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

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

Substantiated allegations of conduct that appears to be criminal are referred for prosecution. GDOC Office of Investigations Compliance investigates all allegations.

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

The departure of the alleged abuser or victim from the employment or control of Macon Transitional Center or agency does not provide a basis for terminating an investigation.

Standard §115.272 Evidentiary standard for administrative investigation number here ☐ Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Reviewed GDOC SOP 208.06 IV G. 14. Based on interview with investigative staff. Georgia Department of Corrections imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Standard **§115.273** Reporting to residents number here ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

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

☐ Does Not Meet Standard (requires corrective action)

Reviewed GDOC SOP 208.06 IV G. 15. Based on interview with Superintendent and investigative staff.

Following an investigation into a resident's allegation that they suffered sexual abuse in an agency facility, Georgia Department of Corrections informs the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

If Georgia Department of Corrections did not conduct the investigation, it requests the relevant information from the investigative agency in order to inform the resident.

Following a resident's allegation that a staff member has committed sexual abuse against the resident, Georgia Department of Corrections subsequently informs the resident (unless Georgia Department of Corrections has determined that the allegation is unfounded) whenever the staff member is no longer posted within the resident's unit; the staff member is no longer employed at Macon Transitional Center; Georgia Department of Corrections learns that the staff member has been indicted on a charge related to sexual abuse within Macon Transitional Center; or

Georgia Department of Corrections learns that the staff member has been convicted on a charge related to sexual abuse within Macon Transitional Center.

Following a resident's allegation that they had been sexually abused by another resident, Georgia Department of Corrections subsequently informs the alleged victim whenever Georgia Department of Corrections learns that the alleged abuser has been indicted on a charge related to sexual abuse within Macon Transitional Center; or Georgia Department of Corrections learns that the alleged abuser has been convicted on a charge related to sexual abuse within Macon Transitional Center.

All such notifications or attempted notifications are documented.

An agency's obligation to report under this standard is terminated if the resident is released from Georgia Department of Corrections' custody.

Standard number here §115.276 Disciplinary sanctions for staff

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV H.

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

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Standard number here §115.277 Corrective action for contractors and volunteers

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

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

Reviewed GDOC SOP 208.06 IV H. 2. Based on interview with Superintendent

Macon TC does not have contractors.

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

Macon Transitional Center takes appropriate remedial measures, and considers whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Standard number here

§115.278 Disciplinary sanctions for residents

□ Exceeds Standard	(substantially	exceeds requirement o	f standard)
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X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV H.3. Based on interview with medical/mental health staff from Central State Prison.

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

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

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

Macon Transitional Center does not offer therapy however therapy is provided by Central State Prison. Central State Prison offers Individual; Trauma Group; PTS Group and anxiety group therapy.

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

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

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

Standard	
number he	re

§115.282 Access to emergency medical and mental health services

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

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

Reviewed Case Notes from an alleged allegation. Based on interview with medical and mental health staff from Central State Prison.

No on-site medical care is provided at Macon TC; all medical and mental health care is provided by Central State Prison. If immediate medical attention is required the resident is transported to Coliseum General Hospital in Macon.

Resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

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

Resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

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

Standard number here

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

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

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

Reviewed Case Notes from an alleged allegation. Based on interview with medical/mental health staff from Central State Prison.

No on-site medical care is provided at Macon TC; all medical and mental health care is provided by Central State Prison. If immediate medical attention is required the resident is transported to Coliseum General Hospital in Macon.

Central State Prison offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The residents are transferred to Central State Prison for all follow up care.

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.

Georgia Department of Corrections provides such victims with medical and mental health services consistent with the community level of care.

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

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

Standard number here §115.286 Sexual abuse incident reviews

□ Exceeds Standard (substantially exceeds requirem)

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

☐ Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV J; SART team monthly logs. Based on interview with Superntendent, PREA compliance manager; incident review team.

Macon Transitional Center conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. This review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

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

Standard number here	§115.287 Data collection

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

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

Reviewed GDOC SOP 208.06 IV J; SART team monthly logs. Based on interview with Superintendent, PREA compliance manager; incident review team.

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

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

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

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

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

Standard §11 number here

§115.288 Data review for corrective action

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

☐ Does Not Meet Standard (requires corrective action)

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

Based on interview with PREA coordinator.

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

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

Georgia Department of Corrections' report is approved by Georgia Department of Corrections head and made readily available to the public through its website http://www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2013.pdf

Standard number here Exceeds Standard (substantially exceeds requirement of standard) X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (requires corrective action) Auditor comments, including corrective actions needed if does not meet standard Georgia Department of Corrections makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website http://www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2013.pdf All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires. AUDITOR CERTIFICATION: The auditor certifies that the contents of the report are accurate to the best of her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of Georgia Department of Corrections under review. Statherine Brown			
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conflict of interest exists with respect to his or her ability to conduct an audit of Georgia Department of Corrections under review.	AUDITOR CERT	IFICATION:	
Katherine Brown June 27, 2015	conflict of interest	t exists with respect to his or	
	<u> Kathere</u>	ae Browa	June 27, 2015

Auditor Signature

Date