

PREA Facility Audit Report: Final

Name of Facility: Screven County Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/30/2025

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: Mable P. Wheeler

Date of Signature: 07/30/2025

AUDITOR INFORMATION

Auditor name: Wheeler, Mable

Email: wheeler5p@hotmail.com

Start Date of On-Site Audit: 05/21/2025

End Date of On-Site Audit: 05/23/2025

FACILITY INFORMATION

Facility name: Screven County Prison

Facility physical address: 859 Rockyford Road, Sylvania, Georgia - 30467

Facility mailing address: PO Box 377, Sylvania , Georgia - 30467

Primary Contact

Name:	Vickie Brown
Email Address:	counselor@planters.net
Telephone Number:	912-863-4555

Warden/Jail Administrator/Sheriff/Director	
Name:	Steven Scroggins
Email Address:	warden@planters.net
Telephone Number:	912-863-4555

Facility PREA Compliance Manager	
Name:	Bennett Kight
Email Address:	bennett.kight@gdc.ga.gov
Telephone Number:	(478) 283-6105

Facility Health Service Administrator On-site	
Name:	Lakeshia Hughes
Email Address:	scpnurse@planters.net
Telephone Number:	912-863-4555

Facility Characteristics	
Designed facility capacity:	148
Current population of facility:	148
Average daily population for the past 12 months:	120
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	20-64
Facility security levels/inmate custody levels:	Medium/Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	15
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Screven County Commissioners
Governing authority or parent agency (if applicable):	
Physical Address:	216 Mims Road #100, Sylvania, Georgia - 30467
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:
--

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Steven Scroggins	Email Address:	steven.scroggins@gdc.ga.gov

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:	
0	
Number of standards met:	
45	
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:	2025-05-21
2. End date of the onsite portion of the audit:	2025-05-23

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:	Just Detention International (JDI) / Wilshire Blvd., Suite 340 Los Angeles, CA 90010. The operations officer indicated a review of their database indicates that the organization have not received any information regarding this facility. Statesboro Regional Sexual Assault Center

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	148
15. Average daily population for the past 12 months:	120
16. Number of inmate/resident/detainee housing units:	5

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:	148
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:	0
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:	0
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:	0
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:	0

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:	0
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:	0
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:	0
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:	0
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:	0
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):	The facility does not house transgender or intersex inmates.

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:	0
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:	0
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:	1
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:	No text provided.
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?	Requested an Inmate Roster with living units assignments.
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):	The Auditor had no barriers to completing interviews.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0

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:

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).

Discussions with staff and review of inmate data.

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:

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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.
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:	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).	Discussions with staff and review of inmate data.

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).	Discussions with staff and review of inmate data.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	The Auditor has no issues completing inmate interviews.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	6

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):	No text provided.
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):	17
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
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:	1
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.	No text provided.

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).	No text provided.
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.).	No text provided.
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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	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	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	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:

0

a. Explain why you were unable to review any sexual abuse investigation files:

There was no allegation of sexual abuse or sexual harassment during the 12 months preceding the audit.

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:	0
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:	0
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:	0
a. Explain why you were unable to review any sexual harassment investigation files:	There was no allegation of sexual abuse or sexual harassment during the 12 months preceding the audit.
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:	0
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:	0
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.	There was no allegation of sexual abuse or sexual harassment during the 12 months preceding the audit.

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

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

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: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: - GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program - Facility Organizational Chart Interviews: PREA Coordinator (PC) PREA Compliance Manager (PCM) - Provisions: 115.11 (a) The Agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and that outlines the agency's approach to preventing,

detecting, and responding to such conduct.

The facility complies with this provision by utilizing Georgia Department of Corrections SOP 208.06, Prison Rape Elimination Act-PREA. This policy mandates zero tolerance toward all forms of sexual misconduct and is used to prevent, detect, and respond to any form of sexual abuse and sexual harassment.

The Department will ensure that this written policy is always updated and current. Operating under GDC guidelines, the agency will refer to the Statewide PREA Coordinator to ensure that the facility is compliant with all PREA standards. The Warden will also designate a PREA Compliance Manager. Along with these positions, Warden will assign roles to staff members to fulfill the needs of the SART Team. All positions and roles regarding PREA, and the SART Team members, as well as alternate staff members, will be expressed by a written memorandum, as found in Attachment 1 of this policy.

Facility Specialized Staff: The Warden and PREA Compliance Manager confirmed the facility uses the Georgia Department of Corrections PREA related policies. The auditor reviewed a listed of Georgia Department of Corrections PREA related policies which are listed above.

A review of facility documentation indicated that the facility operates within the confines of Georgia Department of Corrections policies and procedures.

The facility is required to comply with the Georgia Department of Corrections Policies, including PREA. Not only does the facility have to comply with Georgia Department of Corrections Standard Operating Procedures but the contract (interagency agreement) with the Department to house state offenders, requires the facility to comply with the PREA Standards and to acknowledge that they will be monitored for compliance.

Policy: Georgia Department of Corrections (GDC) Policy 208.6, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, is a comprehensive PREA Policy that not only details the agency's approach to prevention, detection, reporting and responding to allegations of sexual abuse and sexual harassment but also integrates this information in a manner that flows logically and is easily understood. The policy affirms that the department will not tolerate any form of sexual abuse or sexual harassment of any offender. Policy states that the department has a zero tolerance for all forms of sexual abuse or sexual harassment of any offender. Policy states that the department has a zero tolerance for all forms of sexual abuse, sexual harassment, and sexual activity among inmates. It further indicated the purpose of the policy is to prevent all forms of sexual abuse, sexual harassment and sexual activity among inmates by implementing provisions of the PREA standards to help prevent, detect respond to sexual abuse in confinement facilities.

Policy: Georgia Department of Corrections Policy 208.06, section K (1- 4) (pp. 3-4) definitions cover Sexual Abuse by Offenders and section L (1-8) (pp. 4-5) and definitions cover Sexual Abuse by a Staff member, Contractor, or Volunteer. Section M (1-2) definitions cover Sexual Harassment.

115.11 (b)

The agency employs an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

The warden of the Screven County Prison has designated a senior level staff as the agency PREA coordinator/facility PREA compliance manager. The PREA compliance manager is a deputy superintendent who reports directly to the facility's warden. The PCM has daily contact with the warden and executive team.

Facility Specialized Staff: The agency head designee (warden) confirmed during interview, the agency has identified an agency PREA coordinator/PREA compliance manager with enough time to manage all PREA related responsibilities.

Discussion: Staff discussion and documentation regarding authority and direct access to leadership at the facility level and the Board of County Commissioners. It was indicated that she has direct access to the facility's warden and the Georgia Department of Corrections agency PREA coordinator; however, the warden will have direct access to the Board of County Commissioners. He has direct access to the facility's senior leadership team. He has comprehensive knowledge of the overall operations of the facility and all departments within the facility. He also has full access to all information related to the facility's compliance with the PREA standards.

In addition, this facility complies the Georgia Department of Corrections policies by ensuring that a DOJ certified PREA audit is conducted every three years by an approve and certify PREA auditor. The deputy warder/facility compliance manager oversees this process.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The GDC agency PREA coordinator was asked: "Do you feel that you have enough time to manage all of your PREA-related responsibilities?" Did this need an answer?

The PREA coordinator, along with her assistant coordinator, is responsible for facilities statewide.

These include all Georgia Department of Corrections State Prisons and Community Based Facilities as well as all the County Prisons in Georgia. Although the job is challenging, the coordinator, who is an energetic and intelligent staff person, indicated she makes time to complete all her PREA related responsibilities.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The GDC agency PREA coordinator was asked how many facility PREA compliance managers are there throughout your agency? How do you interact with them?

The PREA coordinator stated in an interview that there are 87 PREA compliance managers across the state. These managers oversee operations at various facilities, including GDC State Operated Prisons, Transitional Centers, Work Release Centers, Specialized Programs, Privately Operated Facilities, and County Prisons. As a Peace Officers Standards Training Certified Trainer, the PREA coordinator plays a crucial role

in ensuring compliance and training. Interaction with compliance managers occurs through multiple channels, including training sessions conducted by PREA staff—particularly for members of the facilities' Sexual Assault Response Teams—as well as through phone, email, and video communication. Additionally, the assistant PREA coordinator collaborates in these efforts, fostering effective communication and support for compliance managers statewide.

115.11 (c)

Where an agency operates more than one facility, each facility has a designated PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

The warden of the facility has designated the deputy warden to serve as the PREA compliance manager. The facility's organizational chart identifies him as the PREA compliance manager and depicts him reporting directly to the warden. The assigned PCM was not available during on-site visit. The Warden assigned PCM responsibilities to the senior counselor; she had previously served in this role.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The GDC agency PREA coordinator was asked: "If you identify an issue with complying with a PREA standard, what actions or processes do you undertake to work toward compliance with the standard?"

The PREA Coordinator indicated that if the agency identified an issue with compliance regarding a PREA Standard, she would engage subject matter experts as needed, consult with applicable parties, including legal advisors—and develop a plan for corrective action.

For example, during the initial implementation of PREA, the agency actively sought assistance from national organizations. Early on, they reached out to Just Detention International for guidance on training-related challenges. Additionally, when Georgia prisons faced difficulties in identifying external advocacy organizations to establish Memoranda of Agreements for providing advocacy services to inmate victims of sexual abuse, the agency again turned to Just Detention International for support.

The agency also collaborated with the Moss Group, seeking expertise in developing a comprehensive transgender policy and assessing gender-specific programming.

Moreover, recognizing concerns about the quality of investigations, the agency is planning to engage the Moss Group's subject matter experts to review investigative procedures and provide recommendations for improvements.

Facility Specialized Staff: The PREA compliance manager was asked: If you identify an issue with complying with a PREA standard, what actions or process do you undertake to work toward compliance with that standard?

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility,

	facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 2 • Intergovernmental Agreement County Capacity Provisions: 115.12 (a) A public agency that enters into contracts for the confinement of inmates with private agencies or other entities—including other government agencies—shall ensure that any new contract or contract renewal includes a mandatory provision requiring the contracted entity to adopt and comply with the standards set forth by the Prison Rape Elimination Act (PREA). Compliance with PREA standards must be explicitly outlined as an essential contractual obligation to uphold the safety, rights, and welfare of all confined individuals. Policy: Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior, Prevention and Intervention Program., A. Prevention Planning, Paragraph 2, requires the Department to ensure that contracts for the confinement of its inmates with private agencies or other entities, including governmental agencies, includes in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA Standards and that any new contract or contract renewal shall provide for Department contract monitoring to ensure that the contractor is complying with the PREA Standards. The agency maintains contracts with four private prisons, 21 county facilities, and one private transitional center. According to policy, all county facilities and privately operated institutions housing state offenders on behalf of the department must adhere to identical audit requirements. These entities are responsible for both scheduling and funding their audits, which must be certified by the Department of Justice. Each facility is accountable for demonstrating compliance with federal standards. Upon completion of the audit, a copy of the final report must be submitted to the department's PREA coordinator. Audits are required every three years. GDC 2024 Annual PREA Report:

The Georgia Department of Corrections (GDC) upholds a strict zero-tolerance policy against sexual abuse and harassment of offenders across its facilities. This policy is enforced within the agency's 35 state prisons, 12 transitional centers, and 15 specialized centers— including PDCs, RSATs, and ITFs— 21 county correctional institutions, and four private prisons. GDC remains committed to ensuring a safe and secure environment for all individuals in its care.

The agreement between the Screven County Prison and the Georgia Department of Corrections (GDC) establishes the terms governing the capacity allocation for offender confinement.

As a condition of this agreement, the Screven County Prison affirms its full compliance with the standards set forth by the Prison Rape Elimination Act (PREA). Adherence to PREA standards shall be considered a mandatory requirement for the continuation and validity of this agreement.

Furthermore, the Screven County Prison does not engage in contracts with any additional agencies or entities for the purpose of offender confinement. The provisions outlined in this agreement exclusively pertain to the arrangement with GDC and do not extend to third-party institutions.

Facility Specialized Staff The warden was asked, "Do you use the Georgia Department of Corrections PREA-related policies?" The warden confirmed that these policies are utilized within the facility. Following this confirmation, the auditor conducted a review of a list of PREA-related policies established by the Georgia Department of Corrections.

In addition, this facility adheres to the policies of the Georgia Department of Corrections by ensuring that a DOJ-certified PREA audit is conducted every three years by an approved and certified PREA auditor.

A review of facility documentation indicated that the facility generally operates with the confines of Georgia Department of Corrections policies and procedures.

Facility Specialized Staff: The PREA compliance manager indicated that the facility does not contract with other private agencies or other entities, including other government agencies to house their inmates.

Intergovernmental Agreement section 8: Prison Rape Elimination Act. County agrees that it will adopt and comply with 28 C.F.R. 115, entitled the Prison Rape Elimination Act ("PREA"). As required in 28 C.C.R. 115.12, the County further agrees to cooperate with the Department in any audit, inspection, or investigation by the Department or other entity relating to the County's compliance with PREA. Department shall monitor the County's compliance with PREA and shall have the right to inspect any documents or records relating to such audit, inspection or investigation, and County will provide such documents or records at Department's request. County acknowledges that any violation of PREA is a material breach of this agreement is cause for termination of this agreement and may lead to administrative and criminal sanctions. The County shall acknowledge in writing that the Department has advised the County of these

	matters. 115.12 (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. Facility PAQ: The number of contracts referenced in 115.12 (a)-3 that do not require the agency to monitor contractor's compliance with PREA standards: 0 GDC Agency Contract Administrator: The County Prison Coordinator was interviewed. He was asked how do you monitor new and renewed contracts for confinement services to determine if the contractor complies with required PREA practices? He indicated that monitoring is conducted by site visit, this includes random site visit. GDC Agency Contract Administrator: The County Prison Coordinator was interviewed. He was asked have contract facilities completed and submitted PREA compliance results? He indicated that all facilities are in compliance with PREA and submitted their final PREA report every three years; reports are posted on the local website and GDC Agency website. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 3 • Pre-Audit Questionnaire Screven County Prison • Facility Staffing Plan 2024 • Facility Staffing Plan 2023 • Log Books Documenting Unannounced Rounds Interviews: PCM

PC

Warden

Intermediate- or Higher-Level Facility Staff

Provisions:

115.13 (a)

The agency shall ensure that each facility under its operation develops, documents, and makes its best efforts to comply regularly with a staffing plan that provides adequate staffing levels and, where applicable, video monitoring, to protect inmates from sexual abuse. In determining appropriate staffing levels and assessing the necessity of video monitoring, facilities shall take into consideration:

Generally accepted detention and correctional practices.

Any judicial findings of inadequacy.

Any finding of inadequacy from Federal investigative agencies.

Any findings of inadequacy from internal or external oversight bodies.

All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated).

The composition of the inmate population.

The number and placement of supervisory staff.

Institution programs occurring on a particular staff.

Any applicable State, or local laws, regulations or standards.

The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and.

Any other relevant factors.

Georgia Department of Corrections Staffing Plan Policy:

The Georgia Department of Corrections (GDC) requires each facility to establish a comprehensive staffing plan that ensures adequate personnel levels and the strategic deployment of video monitoring to protect offenders from sexual abuse.

Each facility has developed and documented a staffing plan designed to maintain appropriate staffing levels for inmate safety. The staffing plan is recorded in the Facility Staffing Plan document.

Staffing plans for all GDC facilities, as well as recommended staffing plans for county facilities, are structured and reviewed using a standardized template developed by the agency's PREA Team. This template ensures compliance with the requirements set forth in the PREA Standards, facilitating a thorough and consistent approach

across all institutions.

The staffing plans are developed with input from the agency PREA Coordinator and must receive approval from the Warden and PREA Coordinator or Assistant Coordinator.

All staffing plans must be documented and must comprehensively address the items mandated by the PREA Standards to ensure the safety and well-being of offenders.

The reviewed Georgia Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program., A. Prevention Planning, Paragraph 3, requires each facility to develop, document and make its best efforts to comply on a regular basis with the established staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against sexual abuse. Facilities are required to document and justify all deviations on the Daily Post Roster. Annually, the facility, in consultation with the department's PREA coordinator, assesses, determines, and documents whether adjustments are needed to the established staffing plan and deployment of video monitoring systems. Policy requires unannounced rounds, and these rounds are required to be documented in the Duty Officer Logbook.

The facility has installed cameras as part of inmate sexual safe. The facility develops and documents a staffing plan that provide for "adequate levels of staffing, and video monitoring to protect inmates against sexual abuse. The facility considers several enumerated factors in the development of the staffing plan including the physical layout of the facility (including blind spots), facility programs, visitations, dining, etc.

The facility, in collaboration with the agency, strives to adhere to the established staffing plan, making every effort to maintain compliance. In instances where deviations occur, the facility ensures thorough documentation and provides justification for any necessary adjustments.

The department will maintain a comprehensive staffing plan to ensure appropriate supervision of the facility and uphold offender safety, particularly in preventing sexual abuse. This plan will outline staffing levels necessary to maintain security and order while considering additional protective measures. Factors such as video monitoring, blind spots, and vulnerable areas within the buildings will be assessed, along with the composition of the offender population and their movements and activities.

The staffing plan will adhere to generally accepted correctional practices as mandated by the Georgia Department of Corrections (GDC). It will be subject to regular reviews to promptly identify and address any inadequacies noted by judicial bodies, federal investigators, internal oversight entities, and external agencies.

Through this proactive approach, the department will strive to maintain a secure and well-supervised environment.

In the event of multiple vacancies on a shift due to illness, vacation, or other unforeseen circumstances, all staff members—except the Counselor—are POST

certified and required to be available through an on-call roster. Personnel from one division will serve as backup support as needed. For example, Diversion/Transition Center officers may step in for Corrections Institution officers, and vice versa.

Post deviations are strictly prohibited at SCC DOC. In cases where the scheduled officer is unable to cover their assigned post, the on-call process is initiated, requiring another officer to assume responsibility for the post.

To maintain operational continuity, an officer from the prior shift will remain on duty until the incoming shift is fully staffed. If additional personnel are necessary, support may be drawn from another division within the department or through the temporary reassignment of the Corrections Officer assigned to the Screven County Prison Fire Department, and Road Department work crew detail.

Although deviations from this staffing plan are highly improbable, any such occurrence must be documented by the shift on duty, including a detailed explanation and justification.

At least once per year or more frequently as necessary, the PREA Compliance Manager will assess the staffing plan and recommend revisions as needed. This evaluation will encompass the use of video monitoring and other security technologies, as well as the facility's resources and capacity to adhere to the current staffing plan. In accordance with Federal standards, an external agency will conduct audits to verify compliance with all PREA requirements.

Security supervisors, acting supervisors, and higher-ranking staff will perform both scheduled and unscheduled rounds throughout the facility, including housing areas and external grounds, to maintain a safe environment for the offender population. These rounds will be conducted discreetly and recorded in the Control Room Logbook upon completion. The supervising staff member responsible for the round must personally document the log entry and provide a signature or initials as verification.

These rounds will occur across all shifts to ensure continuous oversight. Any significant observations must be thoroughly documented and promptly reported to the PREA Compliance Manager. Staff members are strictly prohibited from notifying others in advance about these security rounds.

Facility Specialized Staff: Warden Question, does the facility have a staffing plan? Response yes and the follow-up questions, discuss what is included on you staff planning according to policy.

- Administrative Offices
- Main Control
- Shift Supervisor's Office
- Medical Office and Multi-Purpose Room
- General Population Housing Units
- Dormitories (4)
- Single Cell (1)
- Isolation/Segregation and Medical Cell Unit

- Administrative Segregation and Disciplinary Isolation – 7 single bed cells
- A Common area, or lobby, contains the single shower stall for this area.
- Prison Kitchen and Chow Hall
- Laundry and Intake Area
- Shakedown Room
- Storage Areas
- Storage Building
- Chapel
- Food Service

Facility Specialized Staff: The PREA Compliance Manager was asked to explain how the facility's staffing plan accounts for standard requirements when assessing adequate staffing levels and the need for video monitoring. In response, the staffing plan comprehensively considers all critical components of the facility's physical plant, including areas with limited visibility and blind spots. Additionally, the plan considers the composition of the resident population, the frequency and nature of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors that may impact safety and security.

Previously Interviewed Staff (Georgia Department of Corrections): During the interview, the agency PREA coordinator was asked whether they are consulted regarding assessments or adjustments to the staffing plan for the facility. The coordinator confirmed that they are actively involved in these evaluations, ensuring compliance with PREA standards and facility operational needs. Staffing assessments occur at regular intervals, incorporating data on resident safety, incident reports, and overall facility function. These reviews help maintain a secure environment while adapting to evolving requirements.

115.13 (b)

In situations where the staffing plan is not adhered to, the facility must formally document any deviations and provide a clear justification for such variations.

Facility Specialized Staff: Warden: How do you ensure compliance with the facility's staffing plan? Compliance is monitored through a review of staff call-outs, shift reports, post assignments, and the maintenance of safety equipment. These elements are discussed during staff meetings and briefings to ensure operational consistency and adherence to the plan.

Facility Specialized Staff: PREA Compliance Manager: Who is responsible for reviewing and following up on deviations from the staffing plan? In situations where deviations occur, facility supervisors document a written justification for the change and submit it to the PREA coordinator/compliance manager for review and follow-up.

Facility Staffing and Monitoring Assessment Protocol.

115.13 (c)

Whenever necessary, but no less frequently than once per year, the agency shall

assess, determine, and document whether adjustments are needed for each facility it operates, in consultation with the PREA Coordinator required by Standard 115.11.

This assessment shall include:

The staffing plan established pursuant to paragraph (a) of this section.

The facility's deployment of video monitoring systems and other monitoring technologies.

The resources available to the facility to ensure adherence to the staffing plan.

Facility Specialized Staff: The PREA Compliance Manager plays a crucial role in facility staffing assessments. If the staffing plan for the facility is reviewed at least once per year, are you consulted regarding any necessary adjustments?

As per protocol, the staffing plan undergoes an annual review. The PREA Compliance Manager is notified in advance if any adjustments are made to the plan to ensure effective oversight and compliance.

115.13 (d)

Each agency operating a facility has established and enforces the policy requiring intermediate-level or higher-level supervisors to conduct and document unannounced rounds. These rounds are intended to identify and prevent staff sexual abuse and sexual harassment. The policy must ensure that supervisory rounds occur during both night shifts and day shifts.

Additionally, each agency has implemented a policy prohibiting staff from notifying other employees that these supervisory rounds are taking place. Exceptions to this rule may only be made when such an announcement is necessary for legitimate operational functions within the facility.

As part of the staffing plan, supervisory staff—including sergeants, lieutenants, the captain, institutional duty officers, and the warden—are required to conduct unannounced rounds on a weekly basis. Staff are strictly prohibited from notifying others upon their arrival for duty rounds to ensure the integrity of the process. In addition to the regular unannounced rounds performed by supervisory staff during their shifts, the auditor reviewed pages from the Duty Officer's Log, confirming that unannounced rounds were conducted as required.

The staffing plan is designed to be objective in determining the number and strategic placement of staff, as well as the implementation of necessary video technology, to ensure the sexual safety of the resident population. This plan considers the unique characteristics of the facility layout, resident classifications, security requirements, and programming needs. Additionally, the staffing plan is structured to accommodate various personnel considerations, including sick leave, vacation, FMLA, unexpected callouts, training days, and military leave, ensuring operational continuity and a secure environment.

	The agency/facility makes every effort to regularly comply with the staffing plan while documenting any deviations. Annually, the agency/facility evaluates available resources and makes necessary adjustments to ensure continued adherence to the staffing plan. The agency's PREA Coordinator or facility Compliance Manager actively participates in the annual review process. Intermediate-level and upper-level supervisors within the agency/facility shall conduct unannounced rounds across all shifts to proactively prevent, detect, and respond to allegations of sexual abuse and sexual harassment. These rounds are critical to ensuring a safe and secure environment and must be carried out without prior notice to staff. Staff members are strictly prohibited from alerting others regarding the occurrence or timing of PREA-related unannounced rounds. Any attempt to undermine the integrity of these rounds through prior notification or warning is a violation of policy and will be subject to appropriate disciplinary action. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program • 2025 Corrections Institution Population Report • Pre-Audit Questionnaire Screven County Prison Provisions: 115.14 (a) A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared day-room or other common space, shower area, or sleeping quarters. This provision is N/A; the facility does not house youthful inmates.

	Observations: Youthful offenders were not observed during the tour of the facility. Nor were youthful offenders among the randomly selected or special category inmates who were interviewed. Staff decisions and documentation indicated that no youthful inmates were housed at this facility during the audit period. Facility PAQ: • In the past 12 months, the number of housing units to which youthful inmates are assigned to provide sight and sound separation between youthful and adult offenders in day-rooms, common areas, showers, and sleeping quarters: 0 • In the past 12 months, the number of youthful inmates placed in same housing unit as adults at this facility: 0 115.14 (b) In areas outside of housing units, agencies shall either: • Maintain sight and sound separation between youthful inmates and adult inmates, or • Provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact. This provision is N/A; the facility does not house youthful inmates. 115.14 (c) Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legal required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. This provision is N/A; the facility does not house youthful inmates. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- PREA – Limits to Cross-gender Viewing and Searches Policy
- B-Dorm Shower
- 2025 In-Service Lesson Plan
- POST Staff Reports – Agency Training List
- In-Service 2025
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program
- GDC Policy 226.1 Searches
- Training Module for In-Services
- Pre-Audit Questionnaire Screven County Prison

Observations: The auditor did observe announcements of female staff entering the male living areas. The auditor had opportunities to view resident and staff interaction. There was also ample time to observe the nature and quality of resident supervision throughout the on-site audit process, and in all instances the auditor observed appropriate respect on the part of both inmates and staff.

Interviews:

Random Staff

Random Inmates

Provisions:

115.15 (a)

The facility shall 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 or when performed by medical practitioners.

This facility follows Georgia Department of Corrections SOP in regard to cross-gender strip searches and visual body cavity searches. Only same sex strip searches and visual body cavity searches are utilized.

This facility houses adult male inmates and is staffed with male and female officers providing direct supervision in the living units. Female staff are prohibited from conducting searches absent “exigent” circumstances. They are allowed to conduct “frisk” searches and have been trained to use the back of their hands in conducting a “frisk” search.

Policy: Georgia Department of Corrections (GDC) Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, prohibits cross-gender strip or visual body cavity searches except in exigent circumstances or when performed by medical practitioners.

The Department is an equal-opportunity employer. However, it will not allow staff to conduct cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or when performed by medical practitioners, and never for the sole purpose of determining the offender's genital status. Exigent circumstances will always be accompanied by a logbook entry and an incident report or witness report, and these documents will be forwarded to the PREA Compliance Manager by the next day of business for review of preventative measures.

Staff of the opposite gender (i.e., female staff in a male offender facility) will announce their presence immediately prior to entering a housing unit. This announcement will be made clearly using the public address system or spoken in a loud, clear tone from the housing unit's entry point. The housing unit, or dormitory, restroom and shower areas will provide a layout and covering that enables offenders to shower, perform bodily functions, and change their clothing without non-medical staff of the opposite gender viewing their buttocks or genitalia, except in exigent circumstances. Basic security procedures should be upheld, including routine and irregular dormitory checks. However, dorm patrols made by staff of the opposite gender assigned to that living area must be documented in the logbook.

The PREA Compliance Manager will ensure that the training staff responsible for training staff members of this facility conduct routine training sessions regarding cross-gender pat-down searches, as well as searches of transgender and intersex offenders. These searches will be conducted in a professional and respectful manner. Additionally, the PREA Compliance Manager will ensure that all such training is documented and maintained in their PREA training files, to include the training officers, staff member receiving the training, the dates of training, and the specific information reviewed. The PREA Compliance Manager will also conduct random reviews of cross-gender searches and document these observations for their annual review.

Discussion: Officers shall not conduct any searches for the sole purpose of gender ID or status. In the event of an unavoidable emergency crisis whereby a cross- gender search would be necessary medical staff would be called in to supervise the situation with appropriate documentation because the incident occurred.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: Have you received training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs?

Interviewed random staff reported that they are not allowed to conduct cross-gender pat down searches. 100% of the staff interviewed could articulate that they are to search in a professional and respectful manner and that they receive training that is conducted every year during in-service training or POST.

Facility PAQ:

- In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0

- In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff: 0

115.15 (b)

As of August 20, 2015, or August 20, 2017, for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

Facility PAQ:

- The number of pat-down searches of female inmates that were conducted by male staff: 0
- The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance (s): 0

This facility does not house female inmates.

115.15 (c)

The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female inmates.

The facility follows Georgia Department of Corrections policy in regard to cross-gender strip searches and visual body cavity searches and documents any situation when these types of searches are utilized.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 9, states, the facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female offenders via an incident report.

115.15 (d)

The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical 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 shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

The facility staff announce at the beginning of each shift if they will have female staff members working within the housing/living areas of the unit and the duration they will be working. This announcement is supported by documentation in the official shift logbook. Female staff are instructed that policies require them to announce their

intention to enter restroom, shower areas prior to entry.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 9, states, the facility shall implement procedures that enable offenders to shower, perform bodily functions, and change clothing without nonmedical staff members of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Offenders should only shower, perform bodily functions, and change clothing in designated areas (e.g., cells, shower rooms and bathrooms).

GDC Policy 208.07, Bodily Privacy, states, before an opposite sex staff member or visitor enters an area where inmates may be undressed, he or she will request that the correctional officer in charge announces that he or she will be entering the area.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: Are inmates able to dress, shower, and toilet without being viewed by staff of the opposite gender?

One hundred percent of staff interviewed stated that inmates are allowed to dress, shower, and toilet without being viewed by staff of the opposite gender. However, it should be noted that several staff reported that female staff are not allowed in the areas when showering. Several staff also reported that there are exigent circumstances in that the shower area is open, and if the female staff needed to navigate to a different part of the building, they may have to walk through the shower area; hence possibly seeing an inmate fully naked.

During the facility tour, the showers and restroom were observed. Staff explained the process of the opposite gender not entering the area where inmates returning from outside details being searched.

Resident Interviews: Twenty (20) random inmates and zero (0) targeted were interviewed. They were asked: Are you and other inmates ever naked in full view of female staff (not including medical staff such as doctors, nurses)?

Twenty (20) of the interviewed inmates related they were never naked in full view of female staff while showering, dressing, or while using the restroom.

The auditor observed the shakedown room.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: "Do you or other officers announce your presence when entering a housing unit that houses residents of the opposite gender (from yourself)?"

Six (6) interviewed staff reported that opposite gender staff announces their presence when entering the housing unit. The staff reported that they will make announcement by saying "female on deck" or "female on the unit"; "male on the unit". During the facility tour the auditor observed staff on the tour announcing their presence when entering the male or female housing areas. It should also be noted that several staff

reported that the announcement is made at the beginning of the shift.

Resident Interviews: Twenty (20) inmates were randomly interviewed and zero (0) targeted. They were asked: Do female staff announce their presence when entering your housing area?

Twenty (20) said female staff announces their presence, by saying something like "female staff on the floor".

115.15 (e)

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

The facility follows Georgia Department of Corrections policy regarding cross- gender strip searches and visual body cavity searches. These searches are only performed by medical practitioners in exigent circumstances and the searches are documented. If gender verification is required, the verification of gender is conducted through an interview/records research process.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 10, states, the facility shall not search or physically examine a Transgender or Intersex offender for the sole purpose of determining the offender's genital status. If the offender's genital status is unknown, it may be determined during conversations with the offender, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. The provision does not limit searchers of offenders to ensure the safe and orderly running of the institution.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: "Are you aware of the policy prohibiting staff from searching or physically examining a transgender or intersex for the purpose of determining that inmate's genital status?"

Six (6) reported yes, that they were aware of the policy prohibiting staff from searching or physically examining a transgender or intersex for the purpose of determining the inmate's genital status. All staff were able to further articulate that such determination would be addressed with medical staff.

115.15 (f)

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

	The staff receives training in conducting pat-searches of all offenders during POST certification training and/or during POST In-Service training. Facility Specialized Staff: The PREA compliance manager question, do security staff receive training on 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? When do they receive this training? Yes, as a part of their In-service. Discussion: The agency/facility prohibit cross-gender pat-down searches of female resident (facility only house male residents), absent exigent circumstances. If an exigent circumstance occurs the facility will document the process. The facility does not restrict access to programming and other opportunities to comply with this provision. The facility also has a policy prohibiting cross-gender strip searches and cross-gender visual body cavity searches. Again, if and exigent circumstance occur the facility will document the process. The facility policy, procedures and practices allow residents to shower, perform bodily functions, and change clothes without being viewed by non-medical staff of the opposite gender. Staff of the opposite gender announce their presence when entering a resident housing unit, room, bathroom, or shower; thus, allowing the resident to cover up. Facility security staff are trained in how to conduct cross-gender pat-down searches, and searches of transgender and intersex resident in a professional and respectful manner. If warranted the facility will make a case-by-case determination of the most appropriate staff member to conduct the search as necessary, and takes into consideration the gender expression of the resident. During the audit period, the facility did not have transgender or intersex residents. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Supporting Documents, Interviews and Observations:

- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 6
- Unified Government of Athens Clack with GDC Agreement
- Facility PREA Policy
- MOU – Language Line Solutions
- PREA – Equal Opportunity Education Policy
- Staffing Plan 2024
- PREA Brochures English
- GDC PREA Offender Brochure Spanish
- PREA Brochures Spanish
- GDC TC PREA Brochure Spanish
- Offender Handbook
- List of Inmates who are Blind, Deaf, or Hard of Hearing – 0
- List of Inmates who are LEP – 0
- List of Inmates with Cognitive Disabilities – 0
- List of Inmates with Physical Disabilities (Wheel Chair, etc.) - 0
- DOC Administrative Services Statewide Contracts for Provision of American Sign Language for Hearing
- Pre-Audit Questionnaire Screven County Prison

Interviews:

Agency Head

Inmates (with disabilities or who are limited English proficient) NA

Random Staff

Provisions:

115.16 (a)

The agency shall take all necessary measures to ensure that inmates with disabilities—including those who are deaf or hard of hearing, blind or have low vision, or have intellectual, psychiatric, or speech disabilities—are afforded an equal opportunity to participate in and benefit from all aspects of the agency’s initiatives to prevent, detect, and respond to sexual abuse and harassment.

To achieve this, the agency shall, when required for effective communication, provide access to qualified interpreters who can accurately and impartially facilitate communication, both receptively and expressively, using any specialized vocabulary necessary. Additionally, the agency shall ensure that written materials are available in accessible formats or through alternative methods that accommodate inmates with disabilities, such as those with intellectual impairments, limited reading proficiency, or visual impairments.

However, the agency is not obligated to implement measures that would fundamentally alter the nature of a service, program, or activity, nor those that would

impose undue financial or administrative burdens, as defined by Title II of the Americans with Disabilities Act (28 CFR 35.164).

Policy: GDC Policy 103.6, Americans with Disabilities Act (ADA), Title II Provisions defines the following:

- Americans with Disabilities Act (ADA) – ensures that all individuals with disabilities are guaranteed the same rights and privileges as those without disabilities.
- Qualified Interpreter – Someone who can interpret effectively, accurately, and impartially, both receptively (i.e., understanding what the person with the disability is saying) and expressively (i.e., having the skill needed to convey information back to the person) using any necessary specialized vocabulary.
- Telecommunications Device for the Deaf (TDD also known as TTY) – An electronic device for text communication over a telephone line, that is designed for use by persons with hearing or speech difficulties. A typewriter.
- Mental Impairment – Any mental or psychological disorder to include, but not limited to, intellectual and developmental disabilities, organic brain syndrome, emotional or mental illness, traumatic brain injuries, and learning disabilities.
- Physical Impairment – Any physiological disorder or condition, to include but not limited to cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs). Cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine.

Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 6, Inmates with disabilities and inmates who are limited English proficient, requires the local PREA compliance manager to ensure that appropriate resources are made available to ensure the facility is providing effective communication accommodations when a need for such an accommodation is known. It also prohibits the facility from relying on inmate interpreters, readers or other types of inmate assistants except in exigent circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first response duties or the investigation of the inmates' allegation.

Overview of the "Language Line Solutions Interpreter User Guide": Call the toll-free Language Line Solutions interpretations hotline (1-800-752-6096).

The Department is committed to ensuring that every resident has equal access—both verbally and in writing—to the resources and initiatives designed to prevent, detect, and respond to sexual abuse and harassment. Upholding the safety and dignity of every offender, the Department will provide necessary accommodations for individuals with limitations in literacy, hearing, vision, comprehension, or English proficiency. The identification of such limitations, along with the strategies implemented to effectively address them, will be documented in the PREA

Compliance Manager's records.

Upon arrival to the Screven County Prison, staff are dedicated to ensuring that every individual has an equal opportunity to comprehend and benefit from the facility's commitment to maintaining an environment free from sexual abuse and harassment.

To reinforce this zero-tolerance stance, signage in both English and Spanish will be prominently displayed at all entrance points, clearly conveying the facility's commitment to eliminating sexual abuse and harassment. Additionally, dual-language signs will be placed near dormitory telephones, providing essential contact information for reporting incidents to an external party—separate from facility staff—to ensure confidentiality and accessibility.

Additionally, the intake officer on duty will formally announce the facility's zero-tolerance policy to the offender upon their initial intake. This announcement will take place immediately before the offender is instructed to submit to any type of search. To ensure understanding, the officer will verbally confirm with the offender that they comprehend the statement and will request that they initial the first line on their PREA orientation form.

For offenders who are deaf or hard of hearing, the officer will repeat the statement at a higher volume and provide a large-print copy of the zero-tolerance policy. Spanish-speaking residents will receive the same statement from a Spanish-speaking staff member when available, or alternatively, in a large-print copy translated into Spanish.

Translation Resources and Resident Interpreters: Due to the availability of designated translation resources, SCC DOC policy does not incorporate the use of resident interpreters. Their involvement is strictly limited to unforeseen exigent circumstances where the absence of an available interpreter may compromise resident safety—for instance, if it impedes a first responder's ability to perform their duties. However, resident interpreters are never considered a resource for PREA-related matters.

Facility Specialized Staff and PREA Compliance In response to the PREA compliance manager's inquiry regarding accommodations for residents with disabilities and those with limited English proficiency, the facility ensures access to PREA-related resources through established methods. As a designated "work camp," this facility receives residents who can understand instructions and participating in assigned work details, whether inside or outside the facility.

Discussion: The auditor requested a list of inmates with disabilities and or LEP inmates at facility. The report indicated the facility has no disabled inmates or any LEP inmates at the facility during the audit period. The agency and the prison appear to be committed to ensuring inmates with disabilities, including inmates who are deaf/hard of hearing, blind or low vision, intellectually disabled, psychiatric-ally disabled or speech disabled have access to interpretive services that are provided expeditiously through professional interpretive services. They also appear to be committed to ensuring inmates with limited English proficiency have access to interpretive services.

GED Teachers and Literacy Remedial staff play a crucial role in ensuring that inmates with limited educational skills can fully access and understand all aspects of the Prison Rape Elimination Act (PREA), including prevention, detection, response, and reporting.

Upon admission, staff read PREA information to inmates to ensure comprehension. In addition, PREA education is reinforced through dedicated PREA video and oral explanations to clarify any concerns.

To accommodate language barriers, the facility provides access to Language Line services, which include telephone interpretive assistance, video interpretation, on-site interpretation, and translation services. These resources ensure that all inmates, regardless of their literacy level or language proficiency, receive the necessary education and support to understand their rights and protections under PREA. Auditor was able to test and verify facility access to Language Line services while on site.

An interview with the Assistant PREA Coordinator confirmed his availability to support facilities in securing appropriate interpreters when necessary. This ensures that disabled or limited English proficient inmates have full access to all aspects of the agency's PREA prevention, detection, reporting, and response programs. The state maintains multiple contracts with interpretive services, covering a wide range of disabilities. Additionally, the Assistant PREA Coordinator discussed ADA contracts that further strengthen the agency's PREA initiatives.

115.16 (b)

The agency shall take reasonable measures to guarantee meaningful access to all aspects of its initiatives aimed at preventing, detecting, and addressing sexual abuse and harassment for inmates with limited English proficiency. This includes ensuring the availability of interpreters capable of interpreting effectively, accurately, and impartially—both receptively and expressively—while utilizing any necessary specialized vocabulary.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 11, states the facility shall not rely on offender interpreters, offender readers, or other types of offender assistants except in exigent circumstances where and extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first response duties under 28 CFR 115.64, or the investigation of the offender's allegations.

A total of Six (6) staff members, representing all shifts, were randomly interviewed to assess agency practices regarding inmate assistance. During the interviews, staff were asked whether the agency permits the use of inmate interpreters, inmate readers, or other inmate assistants to support inmates with disabilities or those with limited English proficiency when making allegations of sexual abuse or sexual harassment.

Six (6) staff members independently reported that inmate interpreters are strictly

	prohibited. None of them have witnessed or participated in the use of inmate interpreters, inmate readers, or any other type of inmate assistants in cases involving allegations of sexual abuse or sexual harassment. All staff confirmed that, when interpretation services are needed, the facility provides a qualified interpreter rather than permitting an inmate to fulfill that role. 115.16 (c) The agency shall not depend on inmate interpreters, readers, or assistants, except in exceptional cases where a significant delay in securing a qualified interpreter could jeopardize an inmate's safety, hinder first-response duties as outlined in the standard, or obstruct the investigation of the inmate's claims. Facility PAQ: • In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmates' safety, the performance of first-response duties under 115.64, or the investigation of the inmate's allegations: 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 7, Hiring and Promotion Decisions • Facility PREA Policy • Criminal History Consent Form • PREA - Equal Opportunity Employment • Applicant 3 Questions • Contractor and County Employees Background Spreadsheet Checks • Officers Background Check Spread Sheet • Staff Roster

- Pre-Audit Questionnaire Screven County Prison

Interview:

HR Staff

Provisions:

115.17 (a)

Policy on Hiring and Contracting Standards: The agency shall neither hire nor promote any individual who may have contact with inmates, nor enlist the services of any contractor who may have contact with inmates, if such individual:

- Has engaged in sexual abuse within a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42 U.S.C. § 1997;
- Has been convicted of engaging in or attempting to engage in sexual activity in the community where such conduct was facilitated by force, threats of force (overt or implied), coercion, or circumstances in which the victim did not or could not consent or refuse; or
- Has been civilly or administratively adjudicated to have engaged in conduct as described in the second provision above.

The facility requires consents in writing (Form SOPHA21-0001 ATT 1), to a criminal background check being conducted prior to official hire. If it is found that a potential employee or contractor has been found to be in violation of a provision set forth in the PREA, the individual is not eligible for hire at the facility. If the PREA violations occur during time of employment at the facility – the employee will be subject to termination and prosecution and all data will be made available for review by other potential employees.

Policy: Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A. Prevention Planning, Paragraph 7, Hiring and Promotion Decisions, complies with the PREA Standards. DOC does not hire or promote anyone or contract for services with anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution defined in 42USC 1997; who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent; of who has been civilly or administratively adjudicated to have engaged in the activity described in the above.

Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-A7.

The Screven County Prison Human Resources Department will include an addendum for all applicants seeking employment with the Department of Corrections or positions involving the supervision of offenders. This addendum will assess whether

the applicant has a history of sexual abuse or sexual harassment. Any substantiated incidents involving offenders or individuals under an applicant's supervision will disqualify the applicant from consideration. Additionally, discovery of related events—including civil or administrative findings—may be considered in hiring and promotion decisions.

As part of the hiring process, Human Resources will conduct a criminal background check on all candidates and make a good faith effort to contact all former institutional employers. This effort aims to obtain information regarding substantiated allegations of sexual abuse or any resignation that occurred during an ongoing investigation into such allegations.

The Department of Corrections will conduct criminal background checks on all staff members and facility volunteers at least once every five years. Access to the GCIC terminal will be restricted to designated administrative personnel, who will be responsible for conducting background checks in accordance with Federal, State, and local laws.

The PREA Compliance Manager will maintain a comprehensive log of all staff, contractors, and volunteers requiring background checks. This log will include the date of the last completed check and the scheduled date of the next required check. Additionally, the PREA Compliance Manager will be responsible for distributing the necessary authorization forms to staff, contractors, and visitors, allowing the county to conduct criminal background checks.

Any discovery of an offense will be promptly reported to the PREA Compliance Manager, Warden, and Human Resources. All incidents will be addressed in accordance with PREA standards and county policies.

Additionally, the department will retain records of substantiated allegations of sexual abuse and sexual harassment involving former employees. If a potential employer requests such information, the department will consult the Screven County Prison Human Resources Department to ensure the most appropriate and lawful disclosure of these allegations.

Facility Specialized Staff Superintendent/Administrative HR Staff Question: Does the facility conduct criminal record background checks or review relevant civil or administrative adjudications for all newly hired employees who may have contact with residents, as well as for employees considered for promotions? Additionally, does the facility implement these checks for any contractor who may have contact with residents?

Staff indicated that the agency performs comprehensive background checks on all new hires and contractors working with program participants. This process includes reviews at the state, national, and federal levels, as well as motor vehicle records and sex offender registries. Furthermore, the facility has designated staff trained to conduct and process these background checks onsite.

The facility uses Georgia Department of Corrections SOP 104.09 Attachment 4,

Applicant Verification. At the interview staff complete this form which states "PREA Prohibitions: The Georgia Department of Corrections must adhere to the United States Department of Justice Final Rule on the National Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) Standards at 28

C.F.R. Part 115 Docket No. OAG-131. GDC may not hire or promote anyone who may have contact with inmates, residents or offenders under supervision who answer "yes" to any of the following questions:

- Have you ever engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution?
- Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse?
- Have you been civilly or administratively adjudicated to have engaged in the activities described?

115.17 (b)

The agency shall consider 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.

Facility Specialized Staff: Superintendent/Administrative HR staff question, does the facility consider prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents? The HR staff indicated yes that they consider any prior incidents of sexual abuse or sexual harassment.

Staff indicated yes, if the facility receives any information regarding a new hire or any staff being promoted having prior incidents of sexual harassment they may not be consider for the position. However, the overall decision will come from the upper management team.

115.17 (c)

Before hiring new employees, who may have contact with inmates, the agency shall:

- Perform a criminal background records check; and.
- Consistent with Federal, State, and local law, makes 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.

The agency/facility ensures thorough background screening for all personnel with resident contact. A criminal record background check is conducted for every new hire and contractor brought in to provide services to residents. To facilitate this process, the agency/facility has partnered with Employee Reference Source for comprehensive

background screenings. Additionally, an annual motor vehicle check is conducted for all staff. Furthermore, in compliance with POST requirements, all certified officers undergo a full background check every four years.

PAQ

In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks: 11

115.17 (d)

The agency shall conduct a criminal background check prior to engaging the services of any contractor who may have direct or indirect contact with inmates.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 13, requires the facility to perform a criminal history record check before enlisting the services of any contractor who may have contact with offenders and at least every five years thereafter.

115.17 (e)

The agency shall 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.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 12, requires the facility to perform a criminal history record checks on all employees and volunteers prior to start date and again within at least every five years. A tracking system shall be implemented at each local facility to ensure the criminal history checks are conducted within the appropriate time frames, according to policy, for each person with access to the facility.

Interviewed HR Staff indicated that the facility conducts background checks using Georgia Crime Information Center (GCIC) and National Crime Information Center (NCIC). The security staff background checks for POST and non-security are conducted every five years.

115.17 (f)

The agency requires all applicants and employees with direct inmate contact to disclose any prior misconduct as outlined in paragraph (a) of this section. This disclosure must be made through written applications, interviews for hiring or promotion, and any self-evaluations or interviews conducted during employee reviews. Additionally, the agency shall impose an ongoing affirmative duty on employees to report any such misconduct as it arises.

Facility Specialized Staff: Superintendent/Administrative HR staff question, does the

agency/facility ask all applicants and employees who may have contact with residents about previous misconduct described in section (a) in written applications for hiring or promotions, and in any interviews or written self—evaluations conducted as part of reviews of current employees? The HR staff indicated yes. This information can be found in the employment application. Staff complete a form requiring each staff to respond to all three sub-provisions in section (a.1-3). This information is located on the facility applicant verification.

Facility Specialized Staff: Superintendent/Administrative HR staff question, does the agency/facility impose upon employees a continuing affirmative duty to disclose any such previous misconduct? HR staff indicated yes, employees are required to notify their supervisors of any federal, state or local arrest of conviction no later than five days after such arrest or conviction.

115.17 (g)

Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 12, states, material omissions regarding misconduct or the provision of materially false information shall be grounds for termination.

115.17 (h)

Unless legally prohibited, the agency shall disclose information regarding substantiated allegations of sexual abuse or sexual harassment involving a former employee upon request from an institutional employer to whom the individual has applied for employment.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 13, states, unless prohibited by law, the Department 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 such employee has applied to work. The Department complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations.

Facility Specialized Staff: Superintendent/HR were asked: “When a former employee applies for work at another institution, upon request from that institution, does the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving the former employee, unless prohibited by law?” Staff indicated yes. However, only if it is permitted by law.

Verification of Background Check Process: The agency/facility verifies its process for receiving and responding to background check results. As part of this verification, the agency/facility maintains a spreadsheet that tracks key elements such as NCIC, MV records, and clear status for applicants. In response to the auditor’s request, the

	facility has provided documentation outlining the criteria used to determine whether an applicant is cleared or not cleared for hire. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, A. Prevention Planning, Paragraph 8 • Online PREA Audit: Pre-Audit Questionnaire Screven County Prison Interviews: Agency Head Warden Provisions: 115.18 (a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Policy: Department of Corrections Policy 208.6, Prisons Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, A, Prevention Planning, Paragraph 8, requires all new or existing facility designs and modifications and upgrades of technology will include consideration of how it could enhance the department's ability to protect inmates against sexual abuse. The PREA coordinator must be consulted in the planning process. Policy: Screven County Prison, PREA - Sexually Abusive Behavior Prevention and

Intervention Program effective date: April 11, 2022, Section V-A8.

PREA standards will be considered when making alterations to existing facility space, including repurposing an existing space. The layout of furniture and fixtures, video and audio monitoring devices, staff assignments, as well as renovations and new constructions will be reviewed for PREA standards before, during, and after the changes or additions are made. The PREA Compliance Manager, when applicable, will conduct routine inspections of blueprints and designs, as well as the physical areas and document any PREA considerations and concerns. These documentations will remain in the PREA Compliance Manager's secured file system.

Exigent concerns or issues will be dealt with immediately. Otherwise, issues will be addressed at the annual review.

Facility Specialized Staff: The agency head designee (warden) question, when designing, acquiring, or planning substantial modifications to facilities, how does the agency consider the effects of such changes on its ability to protect residents from sexual abuse? The agency/facility ensures PREA standards are considered when designing or acquiring or upgrading facilities and technologies.

Facility Specialized Staff: The PREA compliance manager question, "when designing, acquiring, or planning substantial modifications to facilities, how the agency considers the effects of such changes on its ability to protect inmates from sexual abuse?" If new modifications are added to the facility, the team will consider inmate sexual safety. The team considers blind spots, building structure, placement of video monitoring, and bathroom and showers designed for non-gender viewing.

The facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit.

115.18 (b)

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.

Facility Specialized Staff: Specialized staff were asked: "how does the agency use monitoring technology to enhance the protection of inmates from incidents of sexual abuse?"

If new modifications are added to the facility, the team will consider inmate sexual safety. The team considers blind spots, building structure, placement of video monitoring, and bathroom and showers designed for non-gender viewing.

Facility Specialized Staff: The agency head designee (warden) question how does the agency use monitoring technology to enhance the protection of residents from incidents of sexual abuse? When installing or updating a video monitoring system, electronic surveillance system, or other technology, the agency considers how such technology may enhance the agency/facility's ability to protect residents from sexual abuse.

	Discussion: The PREA coordinator/PREA compliance manager or designee is responsible for ensuring PREA is considered whenever the agency/facility designs, acquires or requests specific upgrades to facility and technologies. The recipient of such requests will depend on the nature of the request. There have been no upgrades or modifications to the physical plant, nor have there been any upgrades to the monitoring technology. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • NIC Certificates: PREA Investigating Sexual Abuse in a Confinement Setting • Procedure for SANE Evaluation/Forensic Collection • PREA Sexual Abuse Response Team (SART) Team • Serious Violent Felony Evidence Post-Conviction Transfer Form • National Protocol for Sexual Assault Medical Forensic Exams 2013 • Coordinated Response Plan • Coordinated Response and Notification List • MOU-Sexual Assault Victim Advocacy Agreement / Statesboro Regional Sexual Assault Center • Required List Prior to On Site Visit • Sample of SART Correspondence Regarding Advocate Services • Sexual Violence Victim Advocacy Training – Staff Certificate • Medical PREA Log • Designating Members of the Sexual Assault Response Team • Designating the Facility Based Staff Advocate • YTD Totals Facility PREA Checklist • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, B. Responsive Planning • SOP 103.10 Evidence Handling and Crime Scene Processing • SOP 103.06 Investigations of Allegations of Sexual Contract, Sexual Harassment of Offenders • GDC Policy VH07-001 Health Services, E, Medical Services Deemed Necessary

Exempt from Fee

- Online PREA Audit: Pre-Audit Questionnaire Screven County Prison

Provisions:

115.21 (a)

To the extent the agency is responsible for investigating allegations of sexual abuse; the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 14 describes the agency's expectations regarding the evidence protocols and forensic examinations. Facilities are required to follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions. These procedures are covered and GDC's response to sexual assault follows the US Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents". The department requires that upon receiving a report of a recent incident of sexual abuse, or a strong suspicion that a recent serious assault may have been sexual in nature, a physical exam of the alleged victim is performed, and the Sexual Assault Nurse Examiner's (SANE) protocol initiated.

The facility follows the Georgia Department of Corrections policies.

Policy: Screven County Prison, PREA - Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-B1. Every staff person employed by the department will receive training to appropriately act as a first responder in a variety of emergencies, including observed and reported PREA incidents. Additionally, each staff person will be trained in the preservation of crime scenes, protection of evidence, and upholding the chain of custody for evidence.

In direct response to an observed or reported PREA incident, staff will immediately separate the victim(s) from the aggressor(s). The chain of command will be promptly notified. The Control Room officer will assist with the documentation of the response and ensuring additional staff members respond to the scene, depending on the severity of the circumstances. The ranking officer on duty will ensure that a member of SART is immediately notified.

In the event of a sexual assault, offenders involved will be instructed not to eat, wash, brush teeth, use the restroom, changes clothes, or other activities that may damage evidence. The immediate scene will be cordoned-off and treated as a crime scene, ensuring that no staff members, visitors, or offenders enter the area until the Athens-Clarke County Police Department's Crime Scene Investigator and/or the local Georgia Bureau of Investigations (GBI) field officer has the chance to fully examine the area.

Once staff has ensured the safety of the population, the alleged victim of a sexual

assault will be escorted to the medical unit for an examination. An offender may refuse to be examined without reprisal. The medical examination, including the use of a rape test kit, will be conducted by the designated SANE as outlined in the department's agreement with their SANE provider. The Victim's Advocate will be notified, and the alleged victim will have the opportunity to meet with them in a confidential setting. The Victim's Advocate is outlined in the department's agreement with that provider.

In all instances of an alleged PREA incident, the PREA Compliance Manager will ensure that the Georgia Department of Corrections' PREA Coordinator is first notified of the incident. Following a complete investigation, the PREA Coordinator will be notified of the findings.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: Does the agency ever allow the use of inmate interpreters, inmate readers, or other types of inmate assistants to assist inmates with disabilities who are limited English proficient when making an allegation of sexual abuse or sexual harassment?

Six (6) random staff reported that inmate interpreters are not allowed; nor have inmate interpreters, inmate readers, or other type of inmate assistants been used in relation to allegations of sexual abuse or sexual harassment. All reported that the facility would get an interpreter rather than allowing an inmate to serve as an interpreter.

115.21 (b)

The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be 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.

The facility does not house youth in its facility although it does adhere to the provision set by the U.S. Department of Justice's Office on Violence against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents."

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 14, states, when there is a report of an incident of sexual abuse that was alleged to have occurred within the previous 72 hours, or there is a strong suspicion that an assault may have been sexual in nature, a physical examination of the alleged victim shall be conducted to determine if immediate medical attention is necessary and if the SANE protocol should be initiated, (Attachment 5, Procedure for SANE Evaluation/Forensic Collection). The SANE examination shall be provided at no cost to the offender.

Physical evidence from the suspected perpetrator (s) will be collected and may also

include an examination. Offender consent must be collected and may also include an examination. Offender consent must be obtained prior to initiating the SANE protocol, in accordance with policy 507.04.85 Informed Consent.

115.21 (c)

The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.

The alleged victim is immediately taken to the Medical for an initial evaluation and any immediate first aid. If the Medical Department is the first to be made aware of a sexual assault by an alleged victim, then they are to notify the shift supervisor.

The nurse at Screven County Prison Corrections Department of Corrections is not permitted to gather forensic evidence. The alleged victim will be transported to the local hospital where he can be examined by a Sexual Assault Nurse Examiner (SANE).

Any non-criminal cases will be handled administratively by the Institution Investigator or reported to the local police department. Upon receiving any allegation of sexual abuse, the PREA compliance manager or whomever is designated by the warden will promptly contact the Department of Corrections regarding the allegation. In every case where the alleged aggressor is a staff member, volunteer or contractor, there will be no contact with the alleged victim under any circumstances

The auditor reviewed the Medical PREA Log and there were zero inmates listed on the PREA log for the past 12 months. Facility PAQ:

- The number of exams of forensic medical exams conducted during the past 12 months: 0
- The number exams performed by SANs/SAFEs during the past 12 months: 0
- The number of exams performed by a qualified medical practitioner during the past 12 months: 0

115.21 (d)

The agency shall attempt to make available to the victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(c), to victims of sexual assault of all ages. The agency may utilize a

rape crisis center that is part of governmental unit if the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

Email: The facility will utilize the emergency rooms at local hospital for SANE, but the facility updated their MOU for advocacy services with Statesboro Reginal Sexual Assault Center, who is currently searching for a permanent Executive Director (April 14, 2022).

The facility provided a copy of the following MOUs:

Sexual Assault Victim Advocacy Agreement:

The Screven County Prison has an MOU with Statesboro Reginal Sexual Assault Center, to provide Victim Advocacy Services for issues related to the Prison rape Elimination Act (PREA) in the event those services are needed. As a member of the Rape, Abuse & Incest National Network and a Georgia Criminal Justice Coordinating Council certified victim assistance agency, Statesboro Reginal Sexual Assault Center, may receive hotline crisis calls from residents housed at the Screven County Prison.

Additionally, Advocacy services may be provided at an area hospital's emergency services by Statesboro Reginal Sexual Assault Center, if the returning citizen is there for a Sexual Assault Forensic Medical and Evidentiary Examination (Dated 4/12/2022). Services provided by advocacy center was verified by auditor via phone with "Statesboro Reginal Sexual Assault Center" program director

Facility Specialized Staff: The PREA compliance manager question, in what ways does the agency or facility attempt to make available a victim advocate from a rape crisis center? The facility PREA compliance manager provided the auditor with MOU from outside organizations.

115.21 (e)

As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

Facility Specialized Staff: The PREA compliance manager question, "if requested by the victim, does a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and provide emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews?" Sexual Assault Response Team members are facility-based staff, composed generally of a facility-based investigator who has completed the National Institute of Corrections on-line course, "PREA: Conducting Sexual Abuse Investigations in Confinement Setting", a medical staff, counseling (one of whom may serve as a staff advocate), and often the retaliation

monitor. Their role, in the event of an allegation that appeared to be criminal, is limited to ensuring the protection of the evidence and if an assault is alleged, getting the inmate medical attention immediately, all the while protecting evidence insofar as possible.

Discussion: All resident victims of sexual abuse are offered a forensic exam at no cost to the resident.

If a resident refuses an exam or recants, the nurse completes another log, entitled, "Refusal/Recant Medical PREA Log" documenting the refusal, recanting, and notifications to the SANEs. Additionally, the SANEs follow Georgia Department of Corrections, 208.06, Procedure for SANE Evaluation/Forensic Collection covering the following:

- Initial Report of Sexual Abuse/Assault
- Collection of evidence by SANE Nurse on-site
- SANE Assessment/Forensic Collection
- Referrals for Mental Health Evaluation and Counseling
- Medical PREA Log and SANE Invoice

115.21 (f)

To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

Investigators are trained to follow a uniform process. Georgia Department of Corrections Standard Operating Procedures, 103.10, Evidence Handling and Crime Scene Processing (thirteen pages), provides extensive guidance in evaluating a crime scene, examining a crime scene, still/video photography, crime scene sketches, handling and collecting evidence (and storage of evidence), digital evidence, latent prints, collection of known samples, crime scene documentation, submission of evidence, equipment requirements and record retention.

115.21 (g)

The requirements of paragraphs (a) through (f) of this section shall also apply to:

- Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and
- Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

The facility conducts administrative investigations, and the Georgia Department of Corrections conducts criminal investigations using the standard requirements.

	115.21 (h) For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. Sexual Assault Response Team members are facility-based staff, composed generally of a facility-based investigator who has completed the National Institute of Corrections on-line course, "PREA: Conducting Sexual Abuse Investigations in Confinement Setting", a medical staff, counseling (one of whom may serve as a staff advocate), and often the retaliation monitor. The facility utilizes a qualified staff member for support through the process. Staff were asked: "does the agency ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment?" The response was yes, GDC policy and the Facility policy requires it. Facility Specialized Staff: Staff who conducts investigations were asked: "does agency policy require that allegation of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?" Staff indicated that all administrative cases are conducted by the facility, and potentially criminal cases are referred to GDC or the local police department. All PREA cases are submitted the Georgia Department of Corrections as required by contract agreement. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Supporting Documents, Interviews and Observations: • Facility PREA Policy • Case (0) • Facility Annual Report • Facility Website

- FY2023 County Prison Compstat Report
- FY2024 County Prison Compstat Report
- YTD Totals Facility PREA Checklist
- MOU: Advocacy Agreement Statesboro Reginal Sexual Assault Center
- PREA Investigation Packages for past 12 months 0
- Coordinated Response Plan
- Sexual Abuse and Harassment Allegation Overview
- Statesboro Reginal Sexual Assault Center Brochures and Card
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program
- GDC SOP IK01-0006 – Investigation of Allegations of Sexual Contact, Sexual Abuse and Sexual Harassment
- Online PREA Audit: Pre-Audit Questionnaire Screven County Prison

Interviews:

Agency Head

Investigator

Provisions:

115.22 (a)

The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

The facility warden and the facility PREA compliance manager ensure that all PREA allegations are process according to Georgia Department of Corrections policies.

Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-B2.

In instances of a PREA allegation, including sexual harassment or an alleged assault after-the fact and without the exigent need for medical treatment, the officer who receives the first report will ensure the SART is notified. The designated SART Investigator or alternate investigator will conduct a full investigation to include review of activity logs, witness statements, evidence collection, video recordings, interviews of all involved persons, and any other available materials. The investigator will report the findings of the investigation to the members of SART. The SART members will then review the investigative findings and provide Warden with a determination of substantiated, unsubstantiated, or unfounded.

In the event of a substantiated or unfounded investigation, the Warden will forward the findings to an outside agency for a thorough and detailed investigation. If the incident involved a state felon, the in-house investigation will be forwarded to the GDC Criminal Investigations Division (CID). If an allegation or incident involves a county offender, sentenced by the Screven County Prison courts, the Screven County Prison Police Department's Centralized Criminal Investigations Division will be notified. Once an outside agency is involved, the department will make every effort to

ensure the outside agency is able to conduct a thorough and comprehensive investigation.

Facility PAQ:

- In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received: 0
- In the past 12 months, the number of allegations resulting in an administrative investigation: 0
- In the past 12 months, the number of allegations referred for criminal investigation: 0 Discussion: Below are the results of the investigation package reviewed:

GDC 2024 Annual PREA Report:

NOTE: The county facilities are included in GDC 2024 Annual PREA Report.

115.22 (b)

The agency shall have in place a policy 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. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.

Whenever an allegation is made, the warden or designate will notify the Georgia Department of Corrections Internal Investigations Unit, PREA Unit and local or state police department if needed. The notification will be made in writing, and the notification becomes a part of the PREA investigation package.

2023 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the Inspector of the Criminal Investigations Division indicated that the agency policy requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. He indicated that GDC maintains a certified Criminal Investigations Division staffed by Special Agents who are Peace Officer Standards Training (POST) Mandated with full statewide arrest powers.

115.22 (c)

If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.

Staff indicated that all administrative cases are conducted by the facility, and potentially criminal cases are referred to GDC or the local police department. All PREA cases are submitted the Georgia Department of Corrections as required by contract

	agreement. 115.22 (d) Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations. Staff indicated that all administrative cases are conducted by the facility, and potentially criminal cases are referred to GDC or the local police department. All PREA cases are submitted the Georgia Department of Corrections as required by contract agreement. The Georgia Department of Corrections complies with this standard by implementing GDC SOP 208.06 and IK.01-005 which governs the conduct of PREA investigations. The Auditor is not required to audit this provision. 115.22 (e) Any department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations. Discussion: Staff indicated that any department of Justice component responsible for conducting administrative or criminal investigation of sexual abuse or sexual harassment in this facility will use the same policies governing the conduct of agency investigations. The Department of Justice has not conducted any PREA investigations regarding sexual abuse or sexual harassment. The Auditor is not required to audit this provision. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- Lesson Plan – In-Service
- Power Point Slides
- Staff ID Card First Responder Instruction
- Coordinated Response Plan
- Staff PREA Acknowledgement
- Staff Roster
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program C. Training and Education
- Pre-Audit Questionnaire Screven County Prison

Interviews:

Random Staff

Provisions:

115.31 (a)

The agency shall train all employees who may have contact with inmates on:

- Its zero-tolerance policy for sexual abuse and sexual harassment.
- How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
- Inmates' right to be free from sexual abuse and sexual harassment.
- The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- The dynamics of sexual abuse and sexual harassment in confinement.
- The common reactions of sexual abuse and sexual harassment victims.
- How to detect and respond to signs threatened and actual sexual abuse.
- How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Policy: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program, C. Training and Education, requires annual training that includes the following: The Department's zero-tolerance policy, how to fulfill their responsibilities under the sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures, inmates' right to be free from sexual abuse and sexual harassment, the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment, the dynamics of sexual abuse and sexual harassment victims, how to

detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender non-gender conforming inmates, how to avoid inappropriate relationships with inmates and how to comply with relevant laws related to mandatory reporting of sexual abuse and sexual harassment.

Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-C1.

All staff members of this department will receive PREA training on an annual basis to include annual in-service training, online training, and additional policy and procedure reviews.

Evidence of completed training will be maintained in each staff person's employee records, as well as in the PREA Compliance Manager's records. Every staff person will review and sign the PREA Education Acknowledgement Statement (Attachment 1) in the GDC Prison Rape Elimination Act policy (208.06) and these acknowledgements will remain in each employee's file as well as in the PREA Compliance Manager's files.

Training will focus on the department's policy to ensure a safe environment against sexual harassment, abuse, and assault. Additional topics will include methods to detect and respond to sexual abuse and assault; effective communication with offenders in the LGBTI+ community; compliance with relevant laws and policies; and training specific to each employee's position and, where applicable, role in SART.

Discussion: All employees will receive training upon their initial hiring and through yearly refresher training thereafter. Documentation through signature of each employee will be maintained by the institution's Training Department.

Facility Specialized Staff: The PREA compliance manager question, does your staff receive PREA training from Georgia Department of Corrections? Yes.

Facility Staff: The staff interviewed described for the auditor the ways the facility staff receive PREA Training from GDC. The training was confirmed in reviewed documentation and previously interviewed with GDC staff. These ways included:

The auditor reviewed the PREA – Prison Rape Elimination Act (Supervision of Offenders including Sexual Abuse & Assault) (Georgia Department of Corrections). The following are the contents:

- Terminal Performance Objective
- Enabling Objectives
- Defining PREA
- Title 42 of U.S.C. Section 1983 O.C.G.A 16-6-5.1
- SOP 208.06 Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program

- Zero-Tolerance Policy
- PREA Terms
- Staff Prevention
- Offender Prevention
- Detection Responsibilities
- Reporting Responsibilities – Staff
- Reporting Responsibilities – Offender
- Reporting Responsibilities – Protection Against Retaliation
- Responsive Planning – First Responder Duties
- Offender Education
- Risk Screening
- Dynamics In Confinement
- Investigations
- Staff Discipline
- Offender Discipline
- Federal Audit Process
- Sexual Orientation Gender Identity Expression (S.O.G.I.E.)
- Effective Communication (LGBTI)
- Search Procedures
- PREA Training & Forms (Sexual Assault/Sexual Misconduct PREA Training Acknowledgement Statement

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: “have you received PREA training? And what are some of the topics?”

Eighteen random staff were interviewed, all staff indicated that they received PREA training. They also indicated that they did some online training. Staff were aware of the Zero Tolerance Policy, employee and inmate rights, signs and symptoms of sexual abuse, reporting and responding. One hundred percent of the direct care staff reported being knowledgeable of the topics they had been trained in. When probed, staff were able to describe the training on zero tolerance, inmate and staff rights, dynamics of sexual abuse and sexual harassment, prevention and response protocol as well supportive services available to inmates. Staff indicated they have received

training on working with vulnerable populations (LGBTQI, prior history of sexual victimization). The staff reported receiving training in person and online.

During documentation review, the auditor reviewed staff acknowledgement statements of training and certificates.

115.31 (b)

Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.

115.31 (C)

All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

115.31 (d)

The agency shall document, through employee signature or electronic verification that employees understand the training they have received.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 16, states that participation in training must be documented through employee signature or electronic verification. Participation documentation indicates, by signature, that the employee understood the training they have received. This is documented on Attachment 1, Sexual Abuse/Sexual Harassment Prison Rape Eliminate Act (PREA) Education Acknowledgement Statement. This form shall be retained in the employee's local personnel file. At the conclusion of the training, employees are asked to seek additional supervisory direction, if necessary, to ensure understanding of the training.

Discussion: The agency/facility trains all employees who may have contact with residents on PREA training topics. Employees receive this training prior to having contact with residents. The agency/facility provides the PREA training as a part of pre-service/orientation. Training is also reinforced and enhanced by on-the-job training, shift briefings, staff meetings and management meetings where experienced and knowledgeable staff members work with new hires to educate them further about PREA practices. The PREA training is documented through rosters (staff signatures or electronic verification), meeting minutes, shift briefing notes.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility

	documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • PREA In-Service Slides • Contractor and County Employees Background Checks • Required List Prior to On Site Visit • Volunteer Background Checks • Volunteer Service Agreement • Training Roster • Volunteers and Contractors Acknowledgement Statements • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program C. Training and Education, Paragraph 3 • Pre-Audit Questionnaire Screven County Prison Interview: Contractor (medical) Provisions: 115.32 (a) The agency shall ensure 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. Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 17, states that the Department shall ensure that all volunteers and contractors who have contact with offenders are provided with a copy of the policy and have been trained on their responsibilities under the Department’s PREA policies and procedures. Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-C2. The department will utilize certified instructors to provide training for all volunteers

and contractors who have contact with offenders in any manner. This training will be recorded on training logs and maintained in both the training files as well as the PREA Compliance Manager's files. During training, volunteers and contractors will complete a criminal background check.

The background check will be completed and reviewed prior to a volunteer or contractor beginning their business. The PREA Education Acknowledgement Statement (Attachment 1) in the GDC Prison Rape Elimination Act policy (208.06) will be signed and a copy will be retained in the PREA Coordinator's files.

Training will highlight the department's zero-tolerance policy towards sexual harassment, abuse, and assault. Additionally, the responsibilities of a contractor and volunteer while working within a guard line, as well as the penalties for violating PREA will be expressed. Every person receiving training will be made aware of their opportunities to report a PREA incident, to include use of the department's public website, verbal notification, and options to report via mailing addresses.

These opportunities will be further elaborated in section 115.54: Third-Party Reporting.

115.32 (b)

The level and type of training provided to volunteers and contractors shall be based on the services they provided and level of contact they have with inmates, but all volunteer and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Policy: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 3, Volunteer and Contractor Training, requires all volunteers and contractors who have contact with inmates to be trained on their responsibilities under the department's PREA policies and procedures. This training is based on the services being provided and the level of contact with inmates, however all volunteers and contractors are required to be notified of the department's zero-tolerance policy and informed how to report such incidents.

Participation must be documented and indicates understanding the training they received.

115.32 (c)

The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

Documentation through signatures for volunteers and contractors will be maintained by the deputy warden of security.

Discussion: The agency/facility ensure that volunteers and contractors who have contact with residents are trained in their responsibilities regarding sexual abuse and

	sexual harassment prevention, detection, response policies and procedures at the agency/facility in with they are volunteering or working. The agency/facility also ensures that everyone in the facility, including volunteers and contractors, understand of the agency's zero-tolerance policy toward sexual abuse and sexual harassment, that the agency prohibits them from engaging in sexual relations with residents and that sexual abuse and sexual harassment is always reported. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • County Inmate PREA Orientation • Inmate ID w PREA Information Printed of Back • Inmate Roster • Orientation Checklist • PREA Orientation Acknowledgement Statements • Required List Prior to On Site Visit • Require Number of Resident Interviewed • Security Intake Procedures • Screven County Prison Inmate Handbook/Spanish • Notice - Opposite Gender Must Announce Upon Entry • Zero Tolerance Notice • Inmate ID Card with PREA information Printed on Back (Part of the ID System) • PREA Brochure - English • PREA Brochure - Spanish • GDC PREA Pamphlet - Sexual Assault Sexual Harassment Prison Rape Elimination Act English • GDC PREA Pamphlet - Sexual Assault Sexual Harassment Prison Rape Elimination Act Spanish • Equal Opportunity Policy

- Offender Handbook
- PREA Posters (English)
- PREA Posters (Spanish)
- List of Random Resident Selected for Interviews – 20
- List of Targeted Resident Selected for Interviews – 0
- Informal Conversations with Residents During Tour – 12
- Resident Data Sheet
- Facility Tour
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, C. Training and Education, Paragraph 4, Offender Education
- LOP Inmate Education
- GDC Policy 220.04, Offender Orientation
- Pre-Audit Questionnaire Screven County Prison

Observations:

During the on-site review, the Auditor observed PREA related information posted on the walls, explaining sexual abuse and sexual harassment and how to report both throughout the facility. The facility has PREA information posted on the walls, i.e., the hotline numbers to report sexual abuse to the GDC PREA Unit (internal reporting), as well as (external reporting), Zero Tolerance, etc. Outside Confidential Support Services Agency information. PREA related information was posted in each living unit near telephones for easy accessibility. During the site tour, the Auditor informally interviewed inmates regarding PREA educations and if they felt safe at the facility. All confirmed receiving the training during intake.

Interviews:

Intake Staff

Random Inmates

Provisions:

Provisions:

115.33 (a)

During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Policy: Georgia DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 4, Offender Education, requires notification of the GDC Zero-Training Policy for Sexual Abuse and Harassment and information on how to report an allegation at the receiving facility. This is required to be provided to every Inmate upon arrival at the facility. It requires in addition to verbal notification; offenders are required to be provided with a GCD PREA pamphlet.

The PREA Education included:

1. The Department's zero -tolerance of sexual abuse and sexual harassment.
2. Definitions of sexually abuse behavior and sexual harassment.
3. Prevention strategies the offender can take to minimize his/her risk of sexual victimization while in the Department Custody.
4. Methods of reporting.
5. Treatment options and programs available to offender victims of sexual abuse and sexual harassment.
6. Monitoring, discipline, and prosecution of sexual perpetrators.
7. Notice that male and female routinely work and visit housing area.

The Inmate Handbook included:

1. Prisoner Grievances
2. Foreign Consular Listing Direction
3. PREA
4. Disciplinary Violations

The Inmate Awareness and Education Brochure include:

1. Reporting is the First Step!
2. What to do if you've been sexually assaulted
3. What will happen to me if I make allegations knowing them to be false?
4. Examples of sexual assault
5. What is sexual assault?
6. Inmates: Call *7732
7. Probationers: Call 1 - 888-992-7849
8. The Department will not tolerate Retaliation
9. It is not your fault if you were sexually assaulted: Sexual assault is not part of your sentence!
10. Avoid Sexual Abuse

PREA Education is required to be provided in formats, accessible to all offenders, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as those with limited reading skills.

Inmate Education, according to GDC policy requires the facility to maintain documentation of offender participation in education sessions in the offender's institutional file. Policy requires that the following are posted in each housing unit:

1. Notice of male and female staff routinely working and visiting housing areas.
2. A poster reflecting the department's zero tolerance (must be posted in common areas, as well as throughout the facility, including entry, visitation, and staff areas.

Inmates confirm their orientation on several documents:

1. Acknowledgement of having received the PREA Orientation (to include the PREA Video on sexual assault and sexual harassment).
2. Offender Orientation Checklist (documenting Sexual Abuse and Harassment and Viewed the PREA Video).

Facility Specialized Staff: The PREA compliance manager question, what type of PREA education is provided to the residents? The facility provides PREA videos, audio, and written formats in both English and Spanish.

Observation: During the facility tour, formal and informal discussions with residents and staff indicated that during the intake process, inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment. Staff ensure that key information is continuously and readily available or visible to inmates through posters and PREA information on the kiosk system.

Every offender who first enters the Corrections Institution and/or Diversion/Transition Center will immediately be verbally notified by the intake security officer of this department's zero-tolerance policy towards sexual harassment, abuse, and assault. Arriving offenders will also receive an explanation of this department's commitment to providing a safe environment from these dangers.

Offenders will receive a trifocals PREA pamphlet containing information about the department's policy regarding PREA, reporting and contact information and methods, safety and prevention methods, and the department's commitment to providing a safe environment. At this time, the designated staff person the Counselor or designee, and the Lieutenant of security or Case Worker at the (SCC) will give a thorough explanation of the department's commitment to a safe environment, show the current male-offender version awareness video, and have each offender sign an acknowledgment of their training and understanding of PREA. These acknowledgements will be maintained in the offender's file.

Additionally, offenders will be shown the location of PREA information in the Offender's Handbook and directed to the PREA- related signage throughout the facility. Signs include reporting phone numbers, the department's commitment to a safe environment, and the presence of both male and female staff in the facility.

In exigent circumstances, this process may be delayed by no more than ten business days. In the absence of the Counselor, the Case Workers may provide this process to

the offenders.

The department will make every reasonable effort to communicate its commitment to a safe environment with a zero- tolerance policy towards sexual abuse and assault to every offender. In accommodating physical limitations, mental limitations, and limited English-language proficiency, the department has established a Local Operating Policy to comply with federal standard 115.16: Inmates with disabilities and inmates who are limited English proficient, titled (PREA) Equal Opportunity Education.

Discussion: Within ten days of their initial orientation, residents receive education regarding their rights to be free from sexual abuse, sexual harassment and to be free from retaliation for reporting such incidents, documentation of the inmate's participation in PREA education classes are maintained in the inmate's institutional file.

Facility Specialized Staff: Intake staff were asked: "do you provide inmates with information about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment?" Policy requires that incoming inmates, during intake, are provided notification of the GDC's zero-tolerance policy for sexual abuse and harassment and information on how to report an allegation is provided to the inmate upon arrival at the facility. In addition to the verbal notification, inmates are given a GDC PREA Pamphlet. Arriving inmates are provided initial PREA information and are given the orientation the same day they arrive.

Resident Interviews: Twenty (20) inmates were randomly interviewed. They were asked: When you first came here, did you get information about the facility's rules against sexual abuse and harassment?

Twenty (20) inmates related they were given some information related to PREA on admission.

When asked how that information was given, inmates indicated they were given a PREA brochure or pamphlet and handbook. Some said they were given a sheet with information on it. Others said they were given the information orally. Virtually every inmate said they had received PREA information in every facility they have been in and they already knew about PREA and how to report allegations if they needed to. They also said the information is on the walls in this facility.

Discussion: The facility provides basic, critical information to every resident upon intake. This information includes some verbal and written regarding the facility's no-tolerance policy toward sexual abuse and sexual harassment and information about the ways to report sexual abuse and sexual harassment. Residents can report externally and internally using phone numbers, verbally, and in writing.

The facility provides residents education, both critical information at intake and more comprehensive education within 30 days upon resident arrival or transfer from a different facility. If a resident is release and return to the facility, the resident is given the same PREA education again.

Facility PAQ:

The number of inmates admitted during past 12 months who were given this information at intake: 223

The number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their right to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake: 223

Discussion: Information collected by the auditor's "Residents' Information Spreadsheet".

- Resident Arrival Date
- Resident Initial PREA Screening Date
- Screening within 72 hours
- Resident Initial PREA Education Session Date
- Facility Orientation
- PREA Acknowledgement Statement
- Reassessments
- Residents Selected for Random Interview
- Resident Refusal to Interview

115.33 (b)

Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

Facility Specialized Staff: Intake staff were asked "how does the agency ensure that inmates are educated regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents?"

Facility Specialized Staff: Intake staff were asked, "in general, how long from the date of intake are inmates made aware of these rights?" Arriving inmates are provided initial PREA information and are given the orientation the same day they arrive, but always within 72 hours.

Resident Interviews: Twenty (20) inmates were randomly interviewed, and zero (0) targeted. They were asked: When you came here, were you told about:

- Your right to not be sexually abused or sexually harassed? Twenty (20) inmates stated they had been made aware of their rights.
- How to report sexual abuse or sexual harassment? Twenty (20) interviewed inmate stated they had been made aware of how to report.

- Your right not to be punished for reporting sexual abuse or sexual harassment? All of the (20) interviewed inmates stated they are aware of their rights not to be punished for reporting.

About how long after coming here did you get the information above? When asked this question, all inmates said they received the information the same day they were admitted. Discussion: The facility gives residents refresher information whenever they are transferred to the facility, as well as through PREA posters, sessions with case managers.

115.33 (c)

Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall 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.

Policy: GDC Policy 103.6, Americans with Disabilities Act (ADA), Title II Provisions defines the following:

- Americans with Disabilities Act (ADA) – ensures that all individuals with disabilities are guaranteed the same rights and privileges as those without disabilities.
- Qualified Interpreter – Someone who is able to interpret effectively, accurately, and impartially, both receptively (i.e., understanding what the person with the disability is saying) and expressively (i.e., having the skill needed to convey information back to the person) using any necessary specialized vocabulary.
- Telecommunications Device for the Deaf (TDD also known as TTY) – An electronic device for text communication over a telephone line, that is designed for use by persons with hearing or speech difficulties. A tele-type writer.
- Mental Impairment – Any mental or psychological disorder to include, but not limited to, intellectual and developmental disabilities, organic brain syndrome, emotional or mental illness, traumatic brain injuries, and learning disabilities.

Physical Impairment – Any physiological disorder or condition, to include but not limited to cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological, musculoskeletal, special sense organs, respiratory (including speech organs). Cardiovascular, reproductive, digestive, genitourinary, hemic and lymphatic, skin, and endocrine.

Facility Specialized Staff: Intake staff were asked, “how do you ensure that current inmates, as well as those transferred from other facilities, have been educated on the agency's zero-tolerance policy on sexual abuse or sexual harassment?” Staff indicated that all inmates whether they are transferred or current received PREA information within the first 24 hours of admission. All inmates are shown the PREA video and review written PREA information regarding sexual abuse and sexual harassment.

Discussion: The facility provides PREA information to the residents regarding sexual safety. Residents who are limited English proficient, are deaf, visually impaired, disabled, including residents with mental illness, or have limited reading skills can get both the information provided at intake and the more complete education in a manner they can understand.

115.33 (d)

The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

PREA information is presented to inmates in a manner that enables the inmate to understand and to participate fully in the Agency's prevention, detection, responding and reporting PREA efforts. If a limited English proficient resident was admitted, the facility has access to Language Line professional interpretive services.

If, on admission, an inmate has literacy issues or is cognitively disabled, the initial intake information may be read to them. If needed, the facility has GED/ABE/Literacy teachers. If a teacher is available on site during the admission, the teacher may ensure the resident understands. The facility may also use general population counselors or any staff to assist in communicating the information necessary to attempt to keep the inmate safe.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The interviewed assistant agency PREA coordinator discussed information from the GDC Policy 103.6, Americans with Disabilities Act (ADA). He reviewed different contracts relating to ADA services.

Discussion: Residents sign an acknowledgment affirming they understand the agency has a zero-tolerance policy toward all forms of sexual abuse and sexual harassment, policies and procedures to protect residents from victimization. Residents are encouraged to report it in person, writing or by telephone.

Information collected by the auditors on the "Residents' Data Sheet".

115.33 (e)

The agency shall maintain documentation of inmate participation in these education sessions.

The resident orientation packets documenting PREA orientation are filed and maintained in the inmate's file. Discussion: Information collected by the auditor's "Residents' Information Spreadsheet".

- Resident Arrival Date
- Resident Initial PREA Screening Date
- Screening within 72 hours

	• Resident Initial PREA Education Session Date • Facility Orientation • PREA Acknowledgement Statement • Reassessments • Residents Selected for Random Interview • Resident Refusal to Interview 115.33 (f) In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through poster, inmate handbooks, or other written formats. The facility has continuous PREA information available for residents to review any time. PREA posters are on the walls in the living units. Inmate Awareness and Education Brochures, and PREA information are located on the inmate KISOK. Discussion: The facility has critical information continuously available to residents through posters, PREA handouts and meetings/sessions with case managers or counselors. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • SART Training Master List • Certificates Documenting National Institute of Corrections (NIC): Investigating Sexual Abuse in Confinement Settings • Coordinated Response Plan • SART Assignments

- Sexual Abuse and Harassment Allegation Overview
- MEMO – PREA Sexual Abuse Response Team (SART) Members
- PREA Investigation Packages for past 12 months – 0
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, C. Training and Education, Paragraph 5 – Specialized Training Investigations
- NIC Investigation Online Training Modules
- Pre-Audit Questionnaire Screven County Prison

Interview:

Investigator

Provisions:

115.34 (a)

In addition to the general training provided to all employees pursuant to standard 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations; its investigators have received training in conducting such investigations in confinement settings.

Policy: Georgia DOC Policy 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program, C. Training and Education, Paragraph 5. Specialized Training Investigations requires the Office of Professional Standards to ensure all investigators are appropriately trained in conducting investigations in confinement settings. That training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity Warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The department is required to maintain documentation of that training.

The facility investigator completed the online NIC course: PREA: Investigating Sexual Abuse in Confinement Settings. A certificate was provided to confirm that training. In addition to the facility-based investigator completing the training, the PREA compliance manager completed it and provided a certificate confirming the specialized training. Additional staff lieutenants completed the training so that if something happened on their shifts in the absence of the facility-based investigator they could work with SART to conduct the investigations.

All department staff who have supervisory responsibilities over security personnel will receive additional training in Investigating Sexual Abuse in a Confinement Setting.

This training will be ensured by the department's training staff and include interviewing techniques and guidelines for victims of sexual abuse and assault. Due process measures and investigative techniques, such as Miranda and Garrity warnings, evidence collection, and proper evidence chain of custody records for the purposes of prosecution will also be introduced.

Training certificates and records for the SART Investigator and alternate

investigator(s) will be retained in the employee's file as well as the PREA Compliance Manager's files. Additional agencies who may be utilized for investigations (i.e., GDC CID and/or ACCPD) will also provide the same training opportunities to investigative staff. Evidence of this training will be requested for the PREA Compliance Manager's files.

Discussion: Specialized training will include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confined settings and the criteria and evidence required to substantiate a case for administrative actions or referral for prosecution.

The investigators are required to complete the SART Power Point Training, which includes requirements of information from standard 115.31.

Facility Specialized Staff: Staff who conduct investigations were asked: "Did you receive specialized training regarding conducting sexual abuse investigations in confinement settings?" Staff indicated yes that several facility staff have completed the NIC online training for conducting sexual abuse investigations in confinement settings. The online topics included, interviewing sexual abuse victims, Miranda and Garrity warning, sexual abuse evidence collection, criteria and evidence required to substantiate a case and referrals.

Discussion: The investigators who handle sexual abuse incidents are trained. Investigators are responsible for gathering and preserving evidence in the case; interviewing all parties to include victims, perpetrators, witnesses, etc.; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

115.34 (b)

Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The National Institute of Corrections (NIC) online training "PREA: Investigating Sexual Abuse in a Confinement Setting" includes the following topics:

1. Initial Response
2. Investigation
3. Determination of the findings
4. A Coordinated Response
5. Sexual Assault Response Team
6. A Systemic Approach
7. How Sexual Abuse Investigations Are Different

8. How Investigations in Confinement Settings Are Different
9. Criteria for Administrative Action
10. Criteria for Criminal Prosecution
11. Report Writing Requirements of an Administrative Report
12. Requirements for an Administrative Report
13. Requirements for a Criminal Report
14. The Importance of Accurate Reporting
15. Miranda and Garrity Requirement
16. Miranda Warning Considerations
17. Garrity Warning Considerations
18. The Importance of Miranda and Garrity Warnings
19. Medical and Mental Health Practitioner's Role in Investigations
20. PREA Standards for Forensic Medical Examinations

2023 Previously Interviewed Staff (Georgia Department of Corrections): The interviewed Agency Inspector of the Criminal Division, when asked about the training for investigators, said that investigators from his office receive training specific to conducting sexual abuse investigations in confinement settings. The training includes child sex crimes and deviant behaviors exhibited through violent sexual tendencies. He also described crimes involving sexual acts, child pornography, and deviant sexual behavior.

2023 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the Inspector of the Criminal Investigations Division indicated the specialized investigation training included:

1. Techniques for interviewing sexual abuse victims.
2. Proper use of Miranda and Garrity warnings.
3. Sexual abuse evidence collection in confinement settings.
4. The criteria and evidence required to substantiate a case for administrative or prosecution referral.

Specialized training will include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confined settings and the criteria and evidence required to substantiate a case for administrative actions or referral for prosecution.

115.34 (c)

The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

Documentation of this specialized training will be maintained by the deputy warden of security.

The agency and facility provided the auditor with the NIC (National Institute of Corrections) certificates as documentation that the investigators have met all requirements of this specialized training to conduct sexual abuse investigations in confinement settings.

Facility PAQ:

- The number of investigators currently employed who have completed the required training: 1

115.34 (d)

Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

Discussions with staff indicated that any state entity or Department of Justice component that investigates sexual abuse in confinement settings will be required to complete the

NIC training for investigators.

The Department of Justice component that investigates sexual abuse in confinement setting has not conducted any investigators at this facility.

Discussion: Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview:

The Total number of investigations for the past 12 months = 0

The total number of sexual abuse investigations = 0

The total number of sexual harassment investigations = 0

The number of criminal sexual abuse referred for prosecution = 0

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Certificates Documenting National Institute of Corrections (NIC): Medical Health Care for Sexual Assault Victims in Confinement Settings (1) • Contractors Training Acknowledgement Statement (1) • Communicating Effectively and Professionally with LGBTI Offenders (NIC) • 2022 SART Training • Medical Staff - 1 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, C. Training and Education, Paragraph 6, Specialized Training: Medical and Mental Health Care • Pre-Audit Questionnaire Screven County Prison Interview: Medical Staff Provisions: 115.35 (a) The agency shall ensure that all full and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: 1. How to detect and assess signs of sexual abuse and sexual harassment. 2. How to preserve physical evidence of sexual abuse. 3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and. 4. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The facility staff attend specialized PREA training, using the NIC Specialized Training PREA Medical and MH curriculum. The facility follows medical policies and standards set by the Georgia Department of Corrections. The National Institute of Corrections (NIC) online training Specialized training: Medical and mental health care includes the following topics: 1. Detecting, Assessing, and Responding to Sexual Abuse and Harassment a. Sexual Abuse in Confinement Settings

- b. The Dynamics and Effects of Sexual Abuse
- c. Your Role in Responding to Sexual Abuse Incidents
- 2. Preserving Physical Evidence of Sexual Abuse
- 3. Reporting Allegations and Suspicions
- 4. High-Risk Inmates
- 5. Effects of Sexual Abuse
- 6. Trauma and the Brain
- 7. Rape Trauma Syndrome
- 8. SART
- 9. Medical Screening
- 10. 115.21 Evidence protocol and forensic medical examinations
- 11. 115.35 Special training: Medical and mental health care
- 12. 115.61 Staff and agency reporting duties
- 13. 115.65 Mandates a Coordinated Response to Sexual Abuse Incidents
- 14. 115.81 Medical and mental health screenings; history of sexual abuse
- 15. 115.82 Access to emergency medical and mental health services
- 16. 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers.

The department receives offender medical services through a contract. Each member of the contract company who provides services to the department's offender population will complete the requisite training provided through the National Institute of Corrections (NIC). These courses are PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting and PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting. These training certificates will be maintained in the PREA Coordinator's files. Annual PREA in-service training will be conducted by the department's training personnel. It will be the responsibility of the department's training staff to ensure this training is completed. Training records will be maintained in the training staff's records as well as the PREA Coordinator's files.

Discussion: Health care staff members who have contact with offenders will be trained using the National Institute of Corrections (NIC) specialized training PREA Medical Standards Curriculum. In addition to the specialized training. These same employees are required to attend GDC's annual PREA in-service training.

Facility PAQ:

	• The number of all medical and mental health care practitioner who work regularly at this facility who received the training required by agency policy: 1 115.35 (b) If medical will employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. Beyond an initial medical check for determining whether the inmate victim needs immediate emergency medical services or not, the facility medical staff will not conduct forensic examinations. Forensic examinations are conducted by SANE staff at a facility provided by Georgia Department of Corrections or emergency room. Facility Specialized Staff: Staff who provides medical services, were asked: “if you conduct forensic examinations, are you qualified, and have you received the appropriate training in conducting forensic examinations?” Staff indicated that medical staff at the facility does not conduct forensic examinations. The Rape Crisis Center or the local hospital preforms these services. 115.35 (C) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. Documentation requested to confirm the completion of the medical and mental health specialized training was provided by the facility. 115.35 (d) Medical and mental health care practitioners shall also receive the training mandated for employees under standard 115.31 or for contractors and volunteers under standard 115.32, depending upon the practitioner’s status at the agency. Certificates documenting completion of the Specialized Training provided by the National Institute of Corrections was provided when requested. Additional, certificates documenting completion of Pre-in Service and Annual In-Services were attained. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- Initial PREA Assessment Screening
- PREA Reassessments
- Inmate Roster
- PREA Report Potential Sexual Victim
- Initial and Reassessments
- List of Transgender and Intersex Residents 0
- List of Bisexual, Gay, and Lesbian Resident 0
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, Paragraph 1 – Screening for Victimization and Abusiveness Victim/Aggressor Classification Instrument
- SOP 209.06 Administrative Segregation
- Pre-Audit Questionnaire Screven County Prison

Interviews:

Risk Screening

Random Inmates

Provisions:

115.41 (a)

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

During the diagnostic/intake process, inmates are identified as high-risk for sexual assault victimization or for being at high risk for being an aggressor. This identification process is documented in the Victim/Aggressor classification section of SCRIBE.

Policy: Georgia Department of Corrections Policy 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness Paragraph 1. Screening for Victimization and abusiveness, requires all inmates be assessed during intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

Every offender who enters the Correctional Institution will be screened by the Care & Treatment staff for their risk of being sexually abused (victimization) or their possible threat of being sexually abusive towards other offenders (aggressive). Care & Treatment staff will conduct a private and confidential interview assessment with

each offender within the first 72-hours of their arrival in the facility. This screening will be hosted in an office removed from the housing unit and safely observed through a window in the door. Attachment 2 of the GDC PREA policy titled PREA Sexual Victim/ Sexual Aggressor Classification Screening will be utilized to conduct the initial review.

The date and results of this assessment will be entered into the Scribe offender management system's case notes section for GDC offenders. The assessment tool will be maintained in the offender's file. Results will be shared exclusively with SART, and will have an impact on the offender's dorm and bunk assignment, work detail, reentry programs, and other activities that may impact the safety of the individual offender and the facility.

Staff training and the interview location will be designed in such a way to encourage each offender to honestly disclose information. An offender's risk status may be determined by their mental and physical development; their age; physical build; incarceration history; criminal history; known history of violence; and prior sexual offense history. Additionally, how an offender identifies their own sexual orientation; how other offenders may perceive their sexual orientation; and their own acknowledgement of feelings of vulnerability or risk. An offender's aggressor status may be determined by a review of a violent criminal history; prior sexual offenses; known institutional violence; and physical build.

While proactive responses to the assessment will be encouraged, an offender will not be penalized, sanctioned, or disciplined for declining to respond to questions relating to their level of risk.

Facility Specialized Staff: Staff who performs screening for risk of victimization and abusiveness were asked: "do you screen inmates upon admission to your facility or transfer from another facility for risk of sexual abuse victimization or sexual abusiveness toward other inmates?" Staff indicated yes.

Discussion: The agency, as required in policy, does not make housing and program assignments based on any criteria other than making individualized determinations about how to ensure the safety of all residents' housing and program assignments for transgender or intersex residents are based on a case-by-case basis.

The facility has a policy governing the practice and procedures for screening residents. The screening process occur in a setting that ensures privacy as possible given the potentially of sensitive information that are discussed. The screening location has adequate space, privacy and time to conduct quality screening of the resident for the desired information. Staff receive LGBTI training on effective and professional communication during the staff PREA training.

Discussion: Information collected by the auditor's "Residents' Information Spreadsheet".

- Resident Arrival Date
- Resident Initial PREA Screening Date

- Screening within 72 hours
- Resident Initial PREA Education Session Date
- Facility Orientation
- PREA Acknowledgement Statement
- Reassessments
- Residents Selected for Random Interview
- Resident Refusal to Interview

115.41 (b)

Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

The instrument, the Victim/Aggressor Classification Instrument, is administered by a counselor, within 24 - 72 hours of arrival at the facility. Information from the screening will be used to inform housing, bed assignment, work, and education and program assignments. Policy requires that the outcomes of the screening are documented in SCRIBE.

Policy: GDC Policy 220.09 Classification and Management of Transgender and Intersex Offenders states that GDC will screen all offenders within 24 hours by using the PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument in SCRIBE. SCRIBE is the Department's electronic inmate information management system.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked: "do you screen inmates for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake?" Staff indicated that most PREA screening is completed within 24 hours of the inmate arriving at the facility, but all with 72 hours.

Discussion: The screening occurs within 72 hours of arrival at the facility which includes transfer residents from other facilities.

115.41 (c)

Such assessments shall be conducted using an objective screening instrument.

Georgia Department of Corrections Policy requires it facilities to use the Victim/Aggressor Classification Instrument as the agency's objective screening instrument.

The facility uses PREA screening information to inform the agency or facility decisions regarding a particular resident's housing unit, and programming needs. The assessment is conducted using an objective screening instrument. The residents are reassessed when warranted by an incident of sexual abuse, receipt of and new or relevant information.

115.41 (d).

The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:

- Whether the inmate has a mental, physical, or developmental disability.
- The age of the inmates.
- The physical build of the inmate.
- Whether the inmate has previously been incarcerated.
- Whether the inmate's criminal history is exclusively nonviolent.
- Whether the inmate has prior convictions for sex offenses against an adult or child.
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming.
- Whether the inmate has previously experienced sexual victimization.
- The inmate's own perception of vulnerability.
- Whether the inmate is detained solely for civil immigration purposes?

Policy: Georgia Department of Corrections Policy 208.6, Attachment 4 states in situations where the instrument classifies the offender as both Victim and Aggressor counselors are instructed to thoroughly review the offender's history to determine which rating will drive the offender's housing, programming, etc. This process is required to be documented in the offender SCRIBE case notes, with an alert note indicating which the controlling rating.

The Offender PREA Classification Details considers the following factors;

1. Offender has a conviction (s) for sex offense against adult and/or child.
2. Offender has a criminal history that is exclusively non-violent.
3. Offender has a developmental disability/mental illness/physical disability.
4. Offender has a history of prior sexual victimization.
5. Offender is 25 years old or younger or 60 years or older.
6. Offender is a former victim of institutional rape or sexual assault.
7. Offender is perceived to be gay/lesbian/bisexual/transgender/intersex or gender non-conforming.
8. Offender is small in physical stature.
9. Offender's first incarceration.
10. Offender's own perception is that of being vulnerable.

11. The age of the inmates.

12. The inmate's own perception of vulnerability.

If question #1 is answered yes, the offender will be classified as a Victim regardless of the other questions. This generates the PREA Victim icon on the SCRIBE Offender Page. If three or more of questions (2-10) are checked, the offender will be classified as a Potential Victim. This will generate the PREA Potential Victim icon on the SCRIBE offender page.

The Offender PREA Classification Details considers the following Sexual Aggressor Factors:

1. Offender has a past history of institutional (prison or jail) sexually aggressive behavior.
2. Offender has a history of sexual abuse or sexual assault toward others (adult or child).
3. Offender's current offense is sexual abuse/sexual assault towards others (adult or child).
4. Offender has a prior conviction (s) for violent offenses.

If question #1 is answered yes, the inmate will be classified as a Sexual Aggressor regardless of the other questions. This will generate the PREA Aggressor icon on the SCRIBE Offender page. If two or more of questions (2-4) are checked, the offender will be classified as a Potential Aggressor. This will generate the PREA Potential Aggressor icon on the SCRIBE Offender page.

Policy: Georgia Department of Corrections Policy 208.6, Attachment 4 states in situations where the instrument classifies the offender as both Victim and Aggressor counselors are instructed to thoroughly review the offender's history to determine which rating will drive the offender's housing, programming, etc. This process is required to be documented in the offender SCRIBE case notes, with an alert note indicating which the controlling rating.

The screening process also considers whether the inmate is detained solely for civil immigration purposes, as well as physical appearance, demeanor, special situations or special needs, social inadequacy and developmental disabilities.

The Victim/Aggressor Classification Ratings are determined as follows: Sexual Victim Factor Rating:

Male Inmates – If three (3) or more of questions #2-10 are checked, the offender will be classified as a potential victim. This will generate the PREA Potential Victim icon on the SCRIBE Offender page.

Female Inmates – If five (5) or more of questions #2-10 are checked, the offender will be classified as a potential victim. This will generate the PREA Potential Victim icon on the SCRIBE Offender page.

If question #1 is answered yes, the offender will be classified as a Known Aggressor regardless of the other questions. This will generate the PREA Aggressor icon on the SCRIBE Offender page.

If two (2) or more of question #2 -4 are checked, the offender will be classified as a Potential Aggressor. This will generate the PREA Potential Aggressor icon on the SCRIBE Offender page.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked what the initial risk screening considers? Staff indicated that the PREA screening covers all the requirements listed in 115.41 (b). Staff did list the requirements with the exception of missing one or two.

Resident Interviews: Twenty (20) inmates were randomly interviewed. They were asked: When you first came here, do you remember whether you were asked any questions like whether you had been in jail or prison before, whether you have ever been sexually abused, whether you identify with being gay, lesbian, or bisexual, and whether you think you might be in danger of sexual abuse here?

Twenty (20) inmates interviewed stated they recalled being asked the PREA related questions.

Inmates that said they were asked the PREA related questions were asked the same day as admission or within one week. Of those who recalled being asked the questions, they also stated the questions were asked in private by staff.

One of the interviewed inmates said he had suffered prior sexual victimization. None of the inmates said they identified as being gay, bisexual, transgender or intersex.

Discussion: The facility screening considers all criteria listed in the standard and more. The facility instrument considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse if known to the facility or agency.

115.41 (e)

The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

The facility initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing inmate for risk of being sexually abusive.

115.41 (f)

Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

The facility staff conducts a follow-up assessment of all identified PREA inmates after 14 days but not to exceed 30 days of intake. Treatment staff are required to meet with their inmate case load every 90 days.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 21, states, offenders whose risk screening indicates a risk for victimization or abusiveness shall be reassessed whenever warranted due to an incident, disclosure or allegation of sexual abuse or sexual harassment and also for all offenders, within 30 days of arrival at the institution. A case note shall be entered in SCRIBE to indicate this review has been conducted. This case note is for the sole purpose of documenting the screening occurred and shall not include any confidential or clinical information.

Discussion: Any information related to sexual victimization or abusiveness, including the information entered into the comment section of the Intake Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management and classification decisions.

Residents are re-screened within 30 days of their arrival at the facility. Resident are also reassessed when warranted by the circumstances where additional information may be presented. This information may be new referral, incident reports, safety of the residents, or any relevant information.

115.41 (g)

An inmate's risk level shall be reassessed when warranted due to referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Policy: Policy 208.6, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program in section 5 page 21, requires the warden to designate a safe dorm or safe beds for offenders identified as highly vulnerable to sexual abuse. The location of these safe beds must be identified in the Local Procedure Directive, Attachment 9 and the Staffing Plan. The facility has designated a dorm to serve as a safe dorm, housing potential or actual victim of sexual assault.

This facility will make individualized determinations about how to ensure the safety of each offender.

Reviews of reassessments confirmed that reassessments were done within the required time frame of the inmate's arrival.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked if they reassess an inmate's risk level as needed 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?

Reassessments, staff said, are conducted within 30 days of admission. Staff indicated reassessments are required within 30 days for an inmate's risk level as needed 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. Staff also indicated that the Georgia Department of Corrections will be updating SCRIBE.

115.41 (h)

Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions asked pursuant to paragraphs (d-1, 7, 8, 9) of this section.

The facility staff are made aware, through PREA training, that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs in this section.

The facility staff are made aware, through PREA training, that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs in this section.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked if inmates are disciplined in any way for refusing to respond to or for not disclosing complete information related to the PREA risk screening? Staff indicated no, saying inmates are not disciplined in any way for refusing to respond to or for not disclosing complete information related to the PREA risk screening. If staff receives additional information regarding the PREA screening, they will place a note in SCRIBE.

Discussion: Residents are not required to answer questions that they are not ready to disclose or share information on. The residents are not disciplined for not answering any of the sensitive questions.

115.41 (i)

The agency shall implement 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.

The facility staff are instructed through PREA training that any information obtained is limited to a need-to-know basis for staff, and only for the purpose of treatment, security, and management decisions, such as housing, work, education and programming assignments. Information is not to be indiscriminately discussed. The administration staff monitors and takes immediate action if any sensitive information is exploited.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked: "has the agency outlined who can have access to an inmate's risk assessment within the facility in order to protect sensitive information from exploitations?" Staff indicated that the facility has outlined who have access to risk assessment. This includes the warden, deputy warden, majors, captain, counselors, medical, investigators and need-to-know bases.

	Previously Interviewed Staff (Georgia Department of Corrections): The agency PREA coordinator was asked, if the agency has outlined who should have access to an inmate's risk assessment within the facility in order to protect sensitive information from exploitation? The agency has a policy regarding protecting sensitive information, including the inmate's risk assessment. Access to risk assessments is limited strictly to those who have a need to know. Facility Specialized Staff: The PREA compliance manager question, has the agency outlined who should have access to an residents' risk assessment within the facility in order to protect sensitive information from exploitation? Staff are instructed through PREA training that any information obtained is limited to a need-to-know basis for staff, and only for the purpose of treatment, security, and management decisions, information as housing, work, education and programming assignments. Information is not to be indiscriminately discussed. The administration will monitor and take immediate action if any sensitive information is exploited. Discussion: The sensitive information from the screening information is protected. The information is controlled and disseminated to key staff and any additional staff on a case-by-case basis. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Inmate Roster • PREA Report Potential Sexual Victim • Required List Prior to On Site Visit • Staffing Plan Attachment 1 • Staffing Plan • 2025 Corrections Institution Pop Report • Staffing Plan • FY2024 County Prison Compstat Report • YTD Totals Facility PREA Checklist • List of Transgender and Intersex Inmates – 0

- List of Bisexual Gay and Lesbian – 0
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, D. Screening for Risk of Victimization and Abusiveness, Paragraph 2. Use of Screening Information
- Pre-Audit Questionnaire Screven County Prison

Interviews:

PCM

PC

Risk Screening Staff

Provisions:

This facility does not house transgender or intersex inmates at anytime.

115.42 (a)

The agency shall use information from the risk screening required by standard 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Policy: Georgia DOC Policy 208.6, D. Screening for Risk of Victimization and Abusiveness, Paragraph 2, Use of Screening Information, requires that information from the risk screening is used to inform housing, bed, work, education and program assignments, the goal of which is to keep separate those inmates at high risk of being sexually victimized from those at high risk for being sexually abusive. Wardens and superintendents are required to designate a safe dorm (s) for those inmates (Inmates) identified as vulnerable to sexual abuse.

Policy requires that inmates at high risk for sexual victimization will not be placed in involuntary segregated housing unless an assessment of all available alternatives have been made and there is no alternative means of separation from likely abuser.

If an assessment cannot be made immediately the offender may be held in involuntary segregation for no more than 24 hours while completing the assessment. The placement and justifications for placement in involuntary segregation must be noted in SCRIBE. While in any involuntary segregation, the offender will have access to programs as described in GDC SOP 209.06, Administrative Segregation, which provides for reassessments as well as requiring the offender, will be kept in involuntary segregated housing for protection only until a suitable and safe alternative is identified.

Care & Treatment staff will ensure that every offender receives a secondary, follow-up assessment screening within 30 days of their arrival at the facility. This second assessment will combine a follow-up interview, along with classification notes, staff observations, offender conduct, and events involving the offender during their first 30

days in the facility. The follow-up interview will ensure that the offender is asked "Do you feel safe in this facility?" The date and results of this assessment will be entered into the Scribe offender management system's case notes section. As in the initial assessment, offenders may not be disciplined for refusing to answer questions.

Results of this follow-up interview may determine the need to conduct additional regular assessments. SART will have exclusive access to these results for the purposes of housing, programs, work details, and other assignments that will promote a safe environment for the offender and the facility. Causes for additional assessments may include, but not be limited to staff referrals, reported incidents of sexual abuse or assault; receipt of additional information that may impact an offender's risk of victimization or abusiveness.

As outlined in the department's staffing plan, each CI dormitory is similar in rough floor plan, access to privileges and services, and staff expectations. For this reason, there is no preferred dormitory or conflict with assigning an offender to one dorm as opposed to another due to classification criteria beyond the offender's control. Due to the small size of C-Dormitory, this location will be the primary dormitory for housing transgender or intersex offenders.

Accommodations can be made to clear the dormitory of cisgender offenders, and install a removable shower rod and translucent curtain, in times when a transgender or intersex offender is using the showers. B-Dormitory will be the secondary dormitory for vulnerable offenders. A Dormitory will be the primary housing assignment for offenders that pose a potential threat of abusiveness. These dormitory designations will be reevaluated twice a year by SART and the additional review staff members, as designated by the Warden.

Each dorm is similar in floor plan, size, access to privileges and services, and staff expectations. For this reason, there is no preferred dormitory or conflict with assigning an offender to one dorm as opposed to another due to classification criteria beyond the offender's control.

Discussion: Housing decisions are based on the risks determined by the intake screening and assessment instrument, as well as any information obtained through conversations during the intake process and medical and mental health screenings with the goal of keeping all inmates/residents safe and free from sexual abuse.

Facility Specialized Staff: The PREA compliance manager question, "how does the agency/facility use information from risk screening during intake to keep inmates from being sexually victimized or being sexually abuse?" Staff that makes the housing assignments indicated that Victim/Aggressor Assessments are conducted as part of the admission process on the same day the offender is admitted into the facility. Once the assessment is completed, the assessment is documented in SCRIBE and is accessible to staff making the dorm and bed assignments. When inmates are moved, the staff making the move is required to go into SCRIBE and see if there are any "no contact" messages preventing moving the inmate close to the "no contact" inmate.

This facility does not house transgender or intersex inmate at any time.

115.42 (b)

The agency shall make individualized determinations about how to ensure the safety of each inmate.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked: “how does the agency/facility use information from the risk screening during intake to keep inmates safe from being sexual victimized or from being sexually abusive? “

Staff that make the housing assignments. Staff indicated that the Victim/Aggressor Assessments are conducted as part of the admission process on the same day the offender is admitted into the facility. Once the assessment is completed, the assessment is documented in SCRIBE and is accessible to staff making the dorm and bed assignments. When inmates are moved, the staff making the move is required to go into SCRIBE and see if there are any “no contact” messages preventing moving the inmate close to the “no contact” inmate.

Targeted Resident Interview: The facility did not house any transgender or intersex inmates during the audit period.

Discussion: The facility uses the PREA screening information from standard 115.41 to make individualized determinations for all residents regarding housing, bed work, education, and program assignments. These determinations are to maintain separation between residents’ persons at risk of being sexually victimized and residents likely to commit sexual abuse.

115.42 (c)

In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether the placement would present management or security problems.

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

Policy: GDC Policy 220.09, Classification and Management of Transgender and Intersex Offenders requires the following procedures:

- The chairperson must enter the appropriated profile on the Transgender and

Intersex Offender List (TIOL) in SCRIBE, which will include all intersex and transgender offenders in GDC custody.

- The classification committee will determine, on a case-by-case basis, the most appropriate classification assignments for each transgender offender.
- Transgender offenders must never be placed in dedicated units or housed only with other transgender offenders.
- The offenders' own views with respect to their safety should be given serious consideration.

This facility does house transgender or intersex inmate at anytime.

Discussion: The sensitive information from the screening information is protected. The information is controlled and disseminated to key staff and any additional staff on a case-by-case basis.

Discussion: Abusive residents will not be housed with a known victim or a vulnerable resident. Prior to a resident identified above arriving at the program, program leadership and the sending agency have a discussion to confirm that this is the best fit and safest location for the resident. When the resident arrives, the program can accommodate the resident so that the resident is and feels safe. If the accommodation is possible then the facility will comply and if the accommodation is not possible then the facility leadership will discuss with DOC a possible solution or transfer to another facility.

Staff were asked where does the facility place vulnerable or abusive resident in and open housing units? Staff indicated that residents at risk of being sexually abused and those who are likely to abuse other residents are bunked at opposite sides of the dormitory. The vulnerable resident is bunked near the door that enters the housing unit or closest to staff location.

115.42 (d)

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

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 21, states, placement and programming assignments for each Transgender or Intersex offender shall be reassessed no less than every six months to review any threats to sexual safety of the offender.

Transgender or intersex offenders' safety and programming assignments will be reassessed no less than every six months to review any threats to sexual safety of the offender.

Facility Specialized Staff: Staff who perform screening for risk of victimization and

abusiveness were asked, “are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?” According to staff, if the facility receives a transgender or intersex inmate, the facility will meet with each transgender or intersex at least quarterly to review any threats to safety experienced by the inmate and document in SCRIB.

The facility does not house transgender or intersex inmates.

115.42 (e)

A transgender or intersex inmate’s own view with respect to his or her own safety shall be given serious consideration.

Facility Specialized Staff: The PREA compliance manager question, are transgender and intersex residents’ views with respect to his or her own safety given serious consideration in placement and programming assignments? If the facility receives a transgender or intersex inmate, the facility will have a face-to-face meeting with each transgender or intersex coming into the facility and the inmate would be asked if they felt vulnerable and if so, what the facility might do to make them feel safer. Staff indicated the inmate’s views for their own safety would be given serious consideration. They also stated if the inmate requested to shower separately because of safety and personal issues, the facility would strive to arrange that.

Housing assignments for each transgender and intersex inmates would be made, according to staff, based on the PREA assessment and the inmate’s feelings regarding safety.

This facility does not house transgender or intersex inmates.

115.42 (f)

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

GDC requires facilities to implement procedures enabling inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks or genital, except in exigent circumstances or when such viewing is incidental to routine cell checks.

Policy: GDC Policy 220.09, Classification and Management of Transgender and Intersex Offenders states that if the offender indicates he or she is transgender or intersex, staff must ensure he or she is allowed to shower separately.

Facility Specialized Staff: Staff who performs screening for risk of victimization and abusiveness were asked if transgender and intersex inmates are given the opportunity to shower separately from other inmates? According to staff, if the facility receives a transgender or intersex inmate, the facility will have a face-to-face meeting with each transgender or intersex coming into the facility and the inmate would be asked if they felt vulnerable and if so, what the facility might do to make

them feel safer. Staff indicated the inmate's views for their own safety would be given serious consideration. They also stated if the inmate requested to shower separately because of safety and personal issues, the facility would strive to arrange that.

Housing assignments for each transgender and intersex inmates would be made, according to staff, based on the PREA assessment and the inmate's feelings regarding safety.

Target Inmate Interview: The facility did not house any transgender or intersex inmates during the audit period.

The facility does not house transgender and intersex residents.

115.42 (g)

The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Policy: GDC Policy 220.09, Classification and Management of Transgender and Intersex Offenders requires transgender offenders must never be placed in dedicated units or housed only with other transgender offenders.

Transgender, intersex, lesbian, gay, and bisexual inmates are not housed in a specific area. They are housed, as other inmates are and those decisions are based, according to staff, on the following considerations:

1. PREA Issues
2. The inmate's security level
3. Mental health status
4. Any disability

Facility Specialized Staff: The PREA compliance manager question, if the facility is subject to a consent decree, legal settlement, or legal judgment requiring that it establish a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex inmates? Staff indicated that the facility is not subject to any consent decree, legal settlement, or legal judgment requiring that it establish a dedicated facility, unit or wing for lesbian, gay, bisexual, transgender, or intersex inmates.

Target Inmate Interview: The facility did not house any transgender or intersex, lesbian, gay or bisexual inmates during the audit period.

Interviewed Staff (Georgia Department of Corrections): The agency PREA coordinator was asked, how does the agency ensure against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, or wings solely because of their sexual orientation, genital status, or gender identity?

	The PREA coordinator related, in an interview, that the Georgia Department of Corrections does not house lesbian, gay, bisexual, transgender or intersex inmates in dedicated facilities nor do they house them in any dedicated wing of the prison they have been assigned to. Discussion: The auditor requested any consent decree, legal settlement, or legal judgement requiring the facility to establish a dedicated facility, unit, or wing for LGBTI residents, and any documentation of housing if there were a consent decree, legal settlement, or legal judgement. The facility reported none. The facility does not house transgender and intersex residents. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • YTD Totals Facility PREA Checklist • Coordinated Response Plan • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, D. Screening for Risk of Victimization and Abusiveness, Paragraph 2. Use of Screening Information • GDC Policy 208.6., IV.d.3 (a-d) Administrative Segregation • Pre-Audit Questionnaire Screven County Prison Interviews: Warden Risk Screening Staff Provisions:

115.43 (a)

Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.

Policy: Georgia Department of Corrections Policy, 208.6, IV. d3 (a-d) Administrative Segregation, requires offenders at high risk for sexual victimization are not placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the offender may be held in involuntary segregation no more than 24 hours while completing the assessment. The placement, including the concern for the inmate's safety is noted in SCRIBE case notes documenting the concern for the offender's safety and the reason why no alternative means of separation can be arranged. The inmate will be assigned to involuntary segregated housing only until an alternative means of separation can be arranged. Assignment does not ordinarily exceed a period of 30 days.

In instances where staff have reason to believe that an offender is at a high risk of sexual victimization, alternative dormitory assignments will be the first considered option to ensure the individual's safety. An assessment of the potential threat will be conducted as quickly as SART availability allows. In order to expedite the protective process, the segregation unit may be necessary to remove the offender from the potential threat. The administrative segregation area consists of four individual cells and one sick room. All of these units share a single shower, and each unit is monitored by an individual camera and routine officer rounds, as outlined in the department's Administrative/Segregation LOP. This unit will only be employed as a preventative measure when no other practical general population options to ensure the offender's safety are available. If a need to thoroughly investigate the safety of the alternative dormitories in the general population is necessary, the offender will not be placed in segregation any longer than 24-hours to finalize the housing assignment assessment. While in administrative segregation, the department will adhere to GDC SOP 209.06: Administrative Segregation.

In instances where the segregation unit is determined to be the safest assignment for the offender at risk of victimization, the Protective Custody assignment will not exceed a period of 30-days without a review. During this time, the offender may continue to attend programs and work opportunities as applicable. In the event that involuntary segregation is implemented, this department will document the concerns supporting the assignment decision. Due to the limited size of the Correctional Institution, SART will recommend to the Warden the expedient transfer of the at-risk offender to an alternate facility. The Warden's office will initiate the transfer request through GDC. Depending on the intensity of the threat, the offender may be transported by department staff directly to Phillips State Prison for immediate safety.

If the threat is deemed present but not imminent, the offender will be removed from the facility by GDC transport orders.

Facility PAQ:

- The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0
- In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0

From a review of cases files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of cases files that include both (a) a statement of the basis for facility's concern for the inmates' safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0

115.43 (b)

Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:

- The opportunities that have been limited.
- The duration of the limitation.
- The reasons for such limitations.

Inmates in involuntary protective custody would have access to the following:

1. Programs: Education – the teacher would bring the materials to the inmate to complete.
2. Counselor – programmatic information. t
3. Access to the phone.
4. Access to a KIOSK
5. Access to the store.
6. Access to showers.
7. Access to exercise.
8. Access to visitation.
9. They can keep their tablets from which they can send emails to their families

	and friends and email the PREA Unit. There are three to five tablets per living unit. All inmates that are housed in administrative segregation have access to phone, Kiosk, store call and showering. 115.43 (c) The facility shall assign such inmates to involuntary segregated housing 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. Inmates are assigned to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged and such an assignment does not ordinarily exceed a period of 30 days. If the facility uses involuntary segregation to keep an inmate safe, the facility documents the basis for their concerns for the inmate's safety and the reason why no alternative means of separation can be arranged. Reviews are conducted every 30 days to determine whether there is a continuing need for separation from the general population. 115.43 (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: • The basis for the facility's concern for the inmate's safety; and • The reason why no alternative means of separation can be arranged. See provision (a) response. 115.43 (d) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Facility Specialized Staff: The PREA compliance manager question, every 30 days, do the facility review each resident in involuntary segregated housing to determine if there is a continuing need for separation from the general population? Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- GDC Ombudsman Brochure Flyer
- PREA Brochure English
- PREA Brochure Spanish
- GDC Brochure: Sexual Assault, Sexual Harassment, Prison Rape Elimination Act (PREA English)
- GDC Brochure: Sexual Assault, Sexual Harassment, Prison Rape Elimination Act (PREA Spanish)
- Coordinated Response Plan
- Inmate ID w/ PREA Information Printed of Back
- Inmate Roster
- Ombudsman and Inmate Affairs
- Required Number of Resident Interviewed
- PREA Investigation Packages for past 12 months – 0
- Kiosks in Inmate Dorms (Observed)
- Inmate Phones (Observed)
- Number of Confidential Correspondences from Resident – 0
- Number of Confidential Correspondences from Staff – 0
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, E. Reporting, 1. Inmate Reporting
- GDC Policy 208.06, 2. Offender Grievances
- SOP 227.02 Statewide Grievance Procedures
- GDC Policy IIA23-0001, Consular Notification
- Pre-Audit Questionnaire Screven County Prison

Observations:

PREA reporting information was posted throughout the facility, Hotline dialing instructions where posted next to phones. The Auditor review the PREA information uploaded on the Kiosk.

- Provisions:

115.51 (a)

The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation, by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Policy: GDC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, E. Reporting, 1. Inmate reporting, provides multiple ways for inmates to report. These include making reports in writing, verbally, through the inmate PREA Hotline and by mail to the department Ombudsman Office. Inmates are encouraged to report allegations immediately and directly to staff at all

levels. Reports are required to be promptly documented. The department has provided inmates with a sexual abuse hotline enabling inmates to report via telephone without the use of the inmate's pin number. If an inmate wishes to remain anonymous or report to an outside entity, he may do so in writing to the State Board of Pardons and Paroles, Office of Victim Services (address provided). Additionally, the inmate is provided with contract information, including dialing instructions for reporting via the GDC Tip Line. The instructions tell the inmate the Tip Line is for anonymous reporting of staff and inmate suspicions and illegal activity. This information is posted next to the phone.

Inmates also have access to outside confidential reporting services including those identified in the PREA Brochure given to inmates during the admission process and posted throughout the prison. Inmates may make a report of sexual abuse, sexual harassment, or retaliation at this facility:

1. Verbally (Internal or External)
2. PREA Hotline (External)
3. Any staff member (Internal)
4. GDC Statewide PREA Coordinator (External)
5. Facility PREA Coordinator (Internal)
6. Report by KIOSK (Internal and External)
7. Report to Family Members (External)
8. Report to Friends (External)
9. Filing a Grievance (Internal)
10. Request Forms to contact Medical and the Administration (Internal)
11. Volunteers and Contractors (Internal)
12. Report to Legal Counsel (External)
13. You can call the PREA Confidential Reporting Line at: 1-888-992-7849. Call to this toll-free number is recorded. Message are checked Monday through Friday between 8 am – 5 pm by staff of the GDC PREA Unit. (External)
14. You can also send an email to: PREA.report@gdc.ga.gov (<mailto:PREA.report@gdc.ga.gov>). (External)
15. You can send correspondence to: Georgia Department of Corrections (External)
Attn: Office of Professional Standards/ PREA Unit 300 Patrol Rd.
Forsyth, Ga. 31029
16. The Ombudsman Office (External) P.O. Box 1529 Forsyth, Ga. 31029

17. Pardons and Paroles Director of Victims Services (External) 2 MLK Jr. Dr., Suite 458 East Tower Atlanta, Ga. 30334

Onsite Inspection/Observations: During the tour the auditor discussed with the inmates the process of operating the kiosk system and observed inmates using the system as well as the phones.

As part of every offender's PREA orientation process, they will be advised of their abilities to make a report of sexual harassment, abuse, or assault. Every offender will be provided a brochure outlining their reporting resources, and they will be informed that reports may be made anonymously. These methods include verbally notifying staff members, writing to a staff person, utilizing the PREA hotline, or using their access to the United States Postal Service. When a report is brought to the attention of a staff member it will be handled confidentially, documented promptly, and a SART member will be immediately notified.

Offenders may use the dormitory payphones to make a free phone call to the PREA hotline. This hotline is explained in large posters near the phones in every dormitory, and the number is clearly printed. Brochures issued to offenders provide the phone number to the Ombudsman's office, as well as, Statesboro Regional Sexual Assault Center.

Offenders using the U.S. mail to report a PREA may write to the Statewide PREA Coordinator, the Ombudsman's office, or the State Board of Pardons and Paroles' Director of Victims Services office. Each of these addresses is available in the offender's brochure in both English and Spanish language. The Georgia Department of Corrections has also established an email address at PREA.report@gdc.ga.gov.

Offenders will be informed that anyone may make a report of a PREA allegation. In doing so, family members may be directed to the Screven County Prison public website. This website will provide all reporting resources available to offenders as well as the direct phone number to the Screven County Prison Corrections Institution.

Staff members may also utilize the various reporting methods to make a report of a PREA allegation. These methods, including phone calls, US mail, and email are outlined on the department's public website.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: "how can inmates privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment?"

The interviewed random sample of staff reported that the inmates can privately report by using the hotline number; notify staff, family, or friends. Such reports can be made verbally or in writing. All the interviewed staff reported that if an inmate makes a report verbally or in writing, sexual abuse or harassment, the allegations are responded to immediately and they would immediately document the allegation.

Resident Interviews: Twenty (20) inmates were randomly interviewed. They were asked: How would you report any sexual abuse or sexual harassment that happened to you or someone else? They were all asked is there someone who does not work at this facility who you could report to about sexual abuse or sexual harassment.

All Twenty (20) interviewed inmates could name more than one way they could report if they needed to. Inmates said they would call the PREA Phone/Hotline. Some inmates said they could report to a trusted staff, used the kiosk.

Discussion: The agency/facility has multiple internal ways of residents to privately report sexual abuse, sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff violated their responsibilities that may have contributed to the sexual abuse.

Residents are informed of the different ways to report, methods, and how to access the internal and external reporting process.

During the facility tour the auditor observed intake process/location, where the PREA screening occurred, the location of the drop boxes and whether they were lock. The resident mail process was discussed, on how resident's mail is sent and received.

The facility has toll-free hotline numbers available to residents. During the tour the auditor tested critical functions such as the phones.

115.51 (b)

The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detailed solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Policy: GDC Policy IIA23-0001, Consular Notification affirms it is the policy of GDC that the Consulate General of an inmate's native country be kept informed as the inmate's custody status or occurrences to the Vienna Convention on Consular Relations.

Inmates will be provided information on how to access Foreign Consular Offices in the United States. This information is available for download at <http://www.state.gov/s/cp-r/ris/fco>. This policy prescribes the GDC's responsibility for notification and that the inmate be informed of such notification. Foreign national inmates are allowed visitation with representatives from the Consulate General of his/her native country.

The visit must be scheduled at least 24 hours in advance unless the warden approves of a shorter period.

The facility provided a document entitled "Offender's Decision Concerning Optional Consular Notification". This document included the following verbiage: "As a non-U.S. citizen who is being arrested or detained, you are entitled to have the Georgia

Department of Corrections notify your country's consular representatives here in the United States. A consular official from your country may be able to help you obtain legal counsel, and may contact your family and visit you in detention, among other things. If you want this Department to notify your country's consular officials, you can request this notification now, or at any time in the future. After your consular officials are notified, they may call or visit you."

A second document entitled "Consular Notification Facsimile Form" provides the address to Embassy/Consulate from the Georgia Department of Corrections.

The auditor reviewed the Georgia Department of Corrections website. The following information was posted for reporting sexual abuse or harassment:

The GDC investigates all allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively. The following information is provided on the agency's website to make a report:

1. You can contact the Ombudsman & Inmate Affairs Office at (478) 992-5358 or by email at Ombudsman@gdc.ga.gov (<mailto:Ombudsman@gdc.ga.gov>)
2. You can contact the Pardons and Pardon Victim Services office at (404) 651-6668 or toll free at 1-800-593-9474 or by email at VictimServices@pap.ga.gov (<mailto:VictimServices@pap.ga.gov>)

You don't have to give your name, but it is critical that you provide as many details as possible. This includes:

- a. The name (s) and locations of all persons involved.
- b. The Offender GDC Number
- c. A brief description of the incident (s).
- d. A brief description of where the event (s) occurred.
- e. The date (s), time and place of occurrences (s)
- f. Your contact phone number and address (optional)

The state Ombudsman's Office number at 478-992-5358 is posted in public and inmate accessible locations.

Anytime an inmate alleges that a sexual misconduct act occurred, The Prevention and Advocacy Resources Center an outside victim advocate who provides emotional support services related to sexual abuse (770-834-8905) will be notified as soon as possible to provide support to the alleged victim. In addition, the Prevention and Advocacy Resources Center phone number will be made available to medical, counselor's office and the visitation room.

Resident Interviews: Twenty (20) were randomly interviewed and zero (0) targeted inmate was interviewed. The inmates were asked, "Is there someone who does not

work at this facility who you could report to about sexual abuse or sexual harassment?" The inmates reported that they could make a report to someone who does not work at the facility by telling other family members, like mother, father, brother, sister, telling a friend, a lawyer, or call the hotline.

115.51 (c)

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

The facility staff have been trained to forward all reports or observations of sexual assault/harassment to their immediate supervisor and /or designated SART member promptly. These reports may be in writing, verbally, anonymously, or from third parties.

Discussion: Residents sign an acknowledgment form confirming they have been provided with information related to reporting. The Zero Tolerance Policy for Sexual Harassment and Sexual Abuse Acknowledgment affirms that resident understands reporting allegations of sexual abuse. The statement encourages residents to report.

Resident or third parties may also report to the Department of Correction PREA Investigation Unit. The form acknowledges that all allegations of sexual abuse and sexual harassment will be taken seriously and investigated by the proper authorities and that there will be no negative consequences for reporting.

Residents have access to their families through visitation or through writing. They would also have access to their attorneys if they had one.

Discussion: Information collected by the auditor's "Residents' Information Spreadsheet".

- Resident Arrival Date
- Resident Initial PREA Screening Date
- Screening within 72 hours
- Resident Initial PREA Education Session Date
- Facility Orientation
- PREA Acknowledgement Statement
- Reassessments
- Residents Selected for Random Interview
- Resident Refusal to Interview

115.51 (d)

The agency shall provide a method for staff to privately report sexual abuse and

	sexual harassment of inmates. Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: "how can staff privately report sexual abuse and sexual harassment of inmates?" The interviewed random staff (6) reported that staff can privately report by using the hotline number, notify supervisor, notify the warden, or notify the PREA staff. Such reports can be made verbally or in writing. All of the interviewed staff also could articulate at least one method in which staff could make a private report. Most staff reported they would notify their supervisor. Resident Interviews: Twenty (20) inmates were randomly interviewed. They were asked: Have you ever reported to the authorities, either in person or in writing, that you were sexually abused or sexually harassed while in this facility? All twenty stated they have never reported that they were sexual abused or sexually harassed while in this facility and that that was because it had never happened. A number of inmates, during the interviews reported that they have not heard of any allegations of either sexual abuse or sexual harassment at this facility. Discussion: Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview: The Total number of investigations for the past 12 months = 0 The total number of sexual abuse investigations = 0 The total number of sexual harassment investigations = 0 The number of criminal sexual abuse referred for prosecution = 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy

- PREA Investigation Packages for past 12 months – 0
- SART Assignments
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, F. Reporting, Paragraph 2, Inmate Grievances
- GDC Policy 227.02, Statewide Grievance Process, Page 5 of the Statewide Grievance Procedure
- Pre-Audit Questionnaire Screven County Prison

- Provisions:

115.52 (a)

An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.

GDC Policy explains the agency and facility grievance process. Upon entering the GDC or facility, each offender is required to receive an oral explanation of the grievance procedure and receive a copy of the Inmate Handbook, which includes instructions about the procedure.

Policy: GDC Policy, 227.02, Statewide Grievance Process, specifies the areas where grievance forms may be accessed. It affirms that offenders are not prohibited from assisting other offenders from filling out any forms related to the process. Policy provides that an offender may file a grievance on behalf of another inmate if the allegation involves sexual abuse. The policy and local operating procedures allow another inmate to file a grievance on behalf of another inmate.

The following procedures pertain to reporting allegations of sexual abuse or sexual harassment via the grievance process:

1. Page 5 of the Statewide Grievance Policy, Paragraph 4. Asserts that the offender is not required to attempt an informal resolution before filing a grievance.
2. Inmate may submit the grievance without having to submit it to the staff who are the subject of the complaint.
3. Inmates may seek assistance from third parties and parties can file grievances on behalf of the inmate.
4. If a third-party file a request on behalf of an inmate, the victim must agree to have the request filed.
5. If the inmate declines to have the request processed on his behalf, GDC will document the inmate's decision as part of the SART or Internal Investigation report.

Staff will assist offenders who need special help (because of such things as language barriers, illiteracy, or physical or mental disability) filling out the grievance forms if requested by the inmate.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the PREA coordinator confirmed that the agency has an administrative grievance

policy. He indicated that inmates are allowed to submit a PREA related incident through the grievance process. If this were to occur the grievance coordinator will submit the PREA grievance directly to investigations. The assistant PREA coordinator also confirmed that the agency policy 208.6 Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program states, "Offender Grievances: allegations of sexual abuse and sexual harassment are not grievable issues. They should be reported in accordance with methods outlined in this policy."

In accordance with GDC policy 208.06: offenders will be advised that allegations of sexual harassment and sexual abuse are non-grievable issues. These must be reported in accordance with any of the methods provided by or explained by the facility.

In acknowledgement of Federal standards 28 C.F.R. Part 115: Offenders will not be subject to time limits when submitting a grievance regarding an allegation of sexual abuse. In allegations involving a staff person, the offender will not be required to submit a grievance to the employee identified in the complaint, attempt to seek an informal resolution, or to otherwise resolve the issue directly with the staff person alleged in an incident. The department will make every effort to provide a resolution or final decision on a report regarding sexual harassment, abuse, or assault. If an extension is needed by the department, the offender will be provided with written notice of the reason for the extension, as well as a deadline date for the final decision. The facility will not extend the final decision beyond 70 additional days of the original 90 days deadline.

Third parties, including other offenders, employees, family members, attorneys, and/or volunteer advocates may assist offenders in filing requests for administrative remedies relating to PREA allegations. Third parties may also make the initial report on behalf of the offender (see section 115.51). In these instances, the department may require the offender, as an alleged victim, to personally pursue any necessary, follow-up processes to seek administrative remedies. If the offender declines to personally pursue administrative remedies, the SART will ensure documentation of the offender's decision.

Should an offender use the emergency grievance procedure to allege a substantial imminent risk of sexual abuse, the staff will respond as follows. An available member of SART will be notified for an immediate response, and department personnel will act to ensure the safety of the potential or alleged victim. Following the immediate corrective actions, an initial response will be provided to the offender within 48 hours, followed by a final department response within five calendar days. These responses will outline the determination if the offender was in substantial risk of imminent sexual abuse, as well as the action taken in response to the report.

An offender, who files an emergency grievance related to a PREA allegation in "bad-faith" as determined by a thorough investigation, as outlined in the Statewide Grievance Procedure, may be subject to disciplinary action.

Discussion: Inmate grievances regarding sexual abuse and sexual harassment are immediately sent for investigations and reported to the Georgia Department of

Corrections.

Facility Specialized Staff: The PREA compliance manager question, what happens to and resident grievance regarding sexual abuse and sexual harassment? Any grievance submitted through the grievance process are pick up by the grievance staff and is immediately send to PREA investigator for actions. This ends the grievance process and begins the PREA investigation process.

The facility is exempt from this standard.

115.52 (b)

- The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse.
- The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege and incident of sexual abuse.
- The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.
- Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the grounds that applicable status of limitations has expired.

It was indicated that GDC had a policy that sexual abuse allegations were not grievable in order to make sure inmates reported to staff or some other manner that would get speedier response. Staff would accept the report verbally or written on a grievance but all-time frames and other grievance criteria were not applicable to PREA related grievances. The PREA allegation reported through the grievance process is reported immediately for investigations.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the PREA coordinator confirmed that the agency does not impose a time limit on when an inmate can submit a grievance regarding an allegation of sexual abuse or require inmates to attempt to resolve with staff. The assistant PREA coordinator also confirmed that the agency policy 208.6 Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program states, "Offender Grievances: allegations of sexual abuse and sexual harassment are not grievable issues. They should be reported in accordance with methods outlined in this policy."

The facility is exempt from this standard.

115.52 (c)

The agency shall ensure that:

1. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and.

2. Such grievance is not referred to a staff member who is the subject of the complaint.

The PREA allegation reported through the grievance process is reported immediately for investigations.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the PREA coordinator confirmed that the agency ensures that inmates who allege sexual abuse can submit a grievance without submitting it to a staff by dropping it in the medical box or the outgoing mail box.

The facility is exempt from this standard.

115.52 (d)

- The agency shall 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 shall not include time consumed by inmates in preparing any administrative appeal.
- The agency may claim an extension of the time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.
- 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, the inmate may consider the absence of a response to be a denial at that level.

The PREA allegation reported through the grievance process is reported immediately for investigations.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the PREA coordinator confirmed that the agency issues final decision on the merits of any portion of a grievance alleging sexual abuse. However, all PREA related incidents are sent directly to investigations to begin the investigation process within 24 hours.

Facility PAQ:

- In the past 12 months, the number of grievances filed that alleged sexual abuse: 0
- In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days: 0
- In the past 12 months, the number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days: 0

The facility is exempt from this standard.

115.52 (e)

- Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.
- If a third-party file 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.
- If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

The PREA allegation reported through the grievance process is reported immediately for investigations.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview with the PREA coordinator confirmed that third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates are permitted to assist inmates in filing request for administrative remedies relating to allegations of sexual abuse and also are permitted to file such requests on behalf of inmates. All processes are documented.

Facility PAQ:

- The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third- party assistance, containing documentation of the inmates' decision to decline: 0

The facility is exempt from this standard.

115.52 (f)

- The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

The PREA allegation reported through the grievance process is reported immediately for investigations.

2025 Previously Interviewed Staff (Georgia Department of Corrections): An interview

with the PREA coordinator confirmed that the agency does not impose a time limit on when an inmate can submit a grievance regarding an allegation of sexual abuse or require inmates to attempt to resolve with staff. The PREA coordinator also confirmed that the agency policy 208.6 Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program states, "Offender Grievances: allegations of sexual abuse and sexual harassment are not grievable issues. They should be reported in accordance with methods outlined in this policy."

Facility PAQ:

- The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: 0
- The number of those grievances in 115.52 (e)-3 that had an initial response within 48 hours: 0
- The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days: 0

The facility is exempt from this standard.

115.52 (g)

The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmates filed the grievance in bad faith.

Facility Specialized Staff: The PREA compliance manager question, has the facility within the past 12 months disciplined an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith? Staff indicated that the inmate will not be disciplined.

Discussion: When a resident submits a grievance alleging sexual abuse and/or sexual harassment, the grievance coordinator immediately submits the grievance to the PREA investigator or the office responsible for investigating PREA allegations.

The facility is exempt from this standard. Facility PAQ:

- In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith: 0

Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview:

- The Total number of investigations for the past 12 months = 0
- The total number of sexual abuse investigations = 0
- The total number of sexual harassment investigations = 0

	The number of criminal sexual abuse referred for prosecution = 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Inmate ID Card with PREA information Printed on Back • Email Emergency Room and MOU • MOU Advocacy Agreement Statesboro Regional Sexual Assault Center • Required Number of Resident Interviewed • SART Assignments • Coordinated Response Checklist • PREA Poster English • PREA Poster Spanish • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, • GDC Policy IIA234-0001, Consular Notification • Pre-Audit Questionnaire Screven County Prison Interviews: Random Inmates Provisions: 115.53 (a) The facility shall 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

GDC procedures require the facility attempt to enter into an agreement with a rape crisis center to make available a victim advocate to inmates being evaluated for the collection of forensic evidence. Victim advocates from the community used by the facility will be pre-approved through the appropriate screening process and subject to the same requirements of contractors and volunteers who have contact with inmates. Advocates serve as emotional and general support, navigating the inmate through the treatment and evidence collection process.

GDC prisons are often located in areas with limited or non-existent resources, including outside confidential support services. In response to that need the facility asked Just Detention International to help develop and secure these services for several prisons experiencing that issue. Just Detention International, according to interviews with the agency's PREA coordinator, brought together the PREA compliance staff and rape crisis centers and outside advocacy organizations throughout the state to attempt to pair specific prisons up with an outside agency.

Policy: GDC Policy IIA23-0001, Consular Notification; affirms it is the policy of GDC that the Consulate General of an inmate's native country be kept informed as the inmate's custody status or occurrences to the Vienna Convention on Consular Relations. Inmates will be provided information on how to access Foreign Consular Offices in the United States. This information is available for download at <http://www.state.gov/s/cpr/ris/fco>. This policy prescribes the GDC's responsibility for notification and that the inmate be informed of such notification. Foreign national inmates are allowed visitation with representatives from the Consulate General of his/her native country.

The state Ombudsman's Office number at 478-992-5358 is posted in public and inmate accessible locations.

Anytime an inmate alleges that a sexual misconduct act occurred, The Prevention and Advocacy Resources Center an outside victim advocate who provides emotional support services related to sexual abuse (770-834-8905) will be notified as soon as possible to provide support to the alleged victim. In addition, the Prevention and Advocacy Resources Center phone number will be made available to medical, counselor's office and the visitation room.

The facility will utilize the emergency rooms at local hospital for SANE, but the facility updated their MOU for advocacy services with Statesboro Regional Sexual Assault Center.

Sexual Assault Victim Advocacy Agreement:

The Screven County Prison is requesting the services of Statesboro Regional Sexual Assault Center, to provide Victim Advocacy Services for issues related to the Prison rape Elimination Act (PREA) in the event those services are needed.

As a member of the Rape, Abuse & Incest National Network and a Georgia Criminal Justice Coordinating Council certified victim assistance agency, Statesboro Regional Sexual Assault Center, may receive hotline crisis calls from returning citizens housed

at the Screven County Prison.

The auditor reached out to the following organizations:

- Just Detention International (JDI) – is a health and human rights organization that seeks to end sexual abuse in all forms of detention. Founded in 1980, JDI is the only organization in the U.S. and the world dedicated exclusively to ending sexual abuse behind bars. They hold government officials accountable for prisoner rape; challenge the attitudes and misperception that enable sexual abuse to flourish; and make sure that survivors get the help they need.

Contact: Just Detention International (JDI) / Wilshire Blvd., Suite 340 Los Angeles, CA 90010.

The operations officer indicated a review of their database indicates that the organization have not received any information regarding this facility. The operations officer also recommended to contact the local rape crisis centers for information.

- National Sexual Violence Resource Center (NSVRC) – is the leading nonprofit in providing information and tools to prevent and respond to sexual violence. NSVRC translates research and trends into best practices that help individuals, communities and service providers achieve real and lasting change. NSVRC also works with the media to promote informed reporting.

Contact: National Sexual Violence Resources Center (NSVRC) /2101 N. Front Street Governor’s Plaza North, building #2 Harrisburg, PA 17110 / Email sent: 3/25/22 at 6:10 am. Received response on 3/25/22 at 1:33 pm. The staff indicated that the organization do not track who requests information from them. The organization does not provide direct services and are simply an information and referral service.

Discussion: The auditor shares with the facility information regarding Georgia Mandated Reporting Laws: Outside reporting for vulnerable person’s statute:

- To make a report of abuse for any inmate 18 years of age and older that is unable to defend themselves report to the Georgia Department of Human Services Division of Healthcare 1-886-552-4464.
- To make a report of abuse for any inmate under 18 years of age; report to Georgia Department of Family and Children Service, Child Protective Services section. 1-855-422-4453 Reports are taken 24 hours a day, 7 days a week.

A review of documentation indicated that outside information regarding services was available to inmates at intake, PREA brochures and posters.

Resident Interviews: Twenty (20) inmates were random, and zero (0) targeted inmate was interviewed. They were asked: Does the facility give you mailing addresses and telephone numbers for these outside services? Interviewed inmates reported that there are numbers and mailing addresses posted in the facility. Most of the inmates said they don’t know the details of the services, but feels they could confidentiality communicate with the services if needed.

A review of documentation indicated that outside information regarding services was available to inmates at intake, PREA brochures, and posters.

A review of documentation indicated that outside information regarding services was available to inmates at intake, PREA brochures, posters, and on the kiosk.

Discussion: The facility has determined which rape crisis center that are available to provide emotional support services to residents. The facility has an agreement/MOU with Statesboro Regional Sexual Assault Center. Auditor verified services provided by Sexual Assault Center with Agency's program director.

If a resident is placed in some type of restricted housing, they will have access to emotional support services.

During the auditor's research, the State of Georgia has a mandatory reporting law for "Georgia Mandated Reporter Law O.C.G.A 19-7-5 (2016)". This law includes vulnerable adults under as state or local vulnerable person's statute.

The facility does not house residents solely for civil immigration purposes. However, if they did, the facility would notify any persons detained solely for civil immigration purposes about how they can access immigrant services agencies and provide mailing addresses and regular and toll-free telephone numbers

115.53 (b)

The facility should 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.

If inmates request to contact a rape crisis organization staff makes every effort the inmate reasonable privacy while maintaining visual security if located in restricted or sensitive areas within the facility. Inmates typically utilize the phone in their counselor's office. The counselors ensure privacy while the inmate is contacting the rape crisis counseling provider.

115.53 (c)

The agency shall maintain or attempt to enter into memorandum of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

The facility maintains copies of agreements or documentations showing attempts to enter into such agreements.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and

	online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • SART Assignments • Sexual Abuse and Harassment Allegation Overview • PREA Website Third Party Reporting • GDC Ombudsman Brochure Flyer • PREA Brochure English • Sexual Assault Sexual Harassment Prison Rape Elimination Act – English Brochure • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program • Pre-Audit Questionnaire Screven County Prison • Provisions: 115.54 (a) The agency shall establish a method to receive third party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. The Georgia Department of Corrections and the facility provide multiple ways for inmates to access third parties who may make reports on behalf of an inmate. GDC provides contact information enabling third-party reports may be made to the GDC Ombudsman’s Office, to the GDC Tip Line and the agency’s PREA Coordinator. Information is provided to inmates that allow them to call or write the Ombudsman’s Office. They are informed they may report in writing to the State Board of Pardons and Paroles, Office of Victim Services. This information is provided in the brochure given to inmates during admission/orientation. The brochure entitled, “Sexual Assault, Sexual Harassment, Prison Rape Elimination Act – How to Prevent It and How to Report It” provides the phone number and mailing address for the Ombudsman and the mailing address for reporting to the Director of Victim Services. A PREA hotline is available for third-party reports and an inmate’s pin is not required to place a call using the “hotline”. Dialing instructions are posted at the phone.

The Department's Website contains a section entitled: "How do I report sexual abuse or sexual harassment?" These are provided as ways to make third-party reports: Call the PREA Confidential Reporting Line (1-888-992-7849); email PREA.report@gdc.gov; Send correspondence to the Georgia DOC, Office of Professional Standards/PREA Unit; contact the Ombudsman and Inmate Affairs Office (numbers and email provided and Contact the Office of Victim Services (phone number and email address provided) Anyone wishing to make a report can do so anonymously and there is a request that as much detail as possible be provided. The agency has a TIP Line accessible to third parties. Others, including family members, friends, and other inmates, may make a report for an inmate.

The auditor reviewed the Georgia Department of Corrections website. The following information was provided for reporting sexual abuse or harassment.

The GDC investigates all allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively. To make a report:

1. You can call the PREA Confidential Reporting Line at: 1-888-992-7849. Call to this toll-free number is recorded. Message are checked Monday through Friday between 8 am - 5 pm by staff of the PREA Unit.

2. You can also send an email to: PREA.report@gdc.ga.gov (<mailto:PREA.report@gdc.ga.gov>).

3. You can send correspondence to:

Georgia Department of Corrections

Attn: Office of Professional Standards/PREA Unit 300 Patrol Rd. Forsyth, Ga. 31029

4. You can contact the Ombudsman & Inmate Affairs Office at (478) 992-5358 or by email at Ombudsman@gdc.ga.gov (<mailto:Ombudsman@gdc.ga.gov>)

5. You can contact the Pardons and Pardon Victim Services office at (404) 651-6668 or toll free at 1-800-593-9474 or by email at VictimServices@pap.ga.gov (<mailto:VictimServices@pap.ga.gov>)

6. You don't have to give your name, but it is critical that you provide as many details as possible. This includes:

- a. The name (s) and locations of all persons involved.
- b. The Offender GDC Number
- c. A brief description of the incident (s).
- d. A brief description of where the event (s) occurred.
- e. The date (s), time, and place of occurrences (s)
- f. Your contact phone number and address (optional)

Third party reports may be made on behalf of an offender by phone, by mail, or in person. The Screven County Prison public website, as well as the brochure issued directly to each offender outlines multiple avenues to make reports of PREA allegations. All reporting methods are outlined in the beginning of this section.

Third party report may be made to:

- The Ombudsman's Office at P.O. Box 1329 Forsyth, Ga 31029
- By email to the GA PREA Coordinator at PREA.report@gdc.ga.gov
- State Board of Pardons and Paroles, Office of Victim Services, 2 Martin Luther King Jr Drive, S.E. Balcony Level, Ease Tower, Atlanta, Ga 30334
- Staff members shall accept reports made verbally, in writing and from third parties and shall promptly document any verbal reports.
- Staff members shall forward all reports or suspicions of sexual abuse or sexual harassment to their immediate supervisor or the designated SART member promptly.

GDC – see paragraph 18 and 23 of Employee Standards of Conduct, policy IVO14-001 to reference responsibilities as third- party reporters for all staff, volunteers and contractors.

2023 Previously Interviewed Staff (Georgia Department of Corrections): In an interview with the Inspector of the Criminal Investigations Division, he was asked how the Department handles anonymous or third-party reports of sexual abuse or sexual harassment? He was also asked if they are investigated differently? Staff indicated that all reports of sexual abuse or harassment are handled the same. If a victim is identified, an immediate interview will occur if the allegations concern violence or injury.

Discussion: The agency/facility has established a method for receiving reports of sexual abuse and sexual harassment from third parties, and ensure that the reports are handle the same way as other reports of sexual abuse or sexual harassment, including ensuring that any identified or potential victims are safe and receive necessary support services, and that reports are thoroughly investigated.

The agency/facility publicizes information on third-party reporting, through website; by posting in public areas of the facility lobby or visitation area and pamphlets.

Interviews with staff confirmed they have been trained to take all allegations and reports seriously and to report them immediately, including those reported by third parties. The verbal reports are to be followed up with a written report before the end of the shift.

Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview:

- The Total number of investigations for the past 12 months = 0

	• The total number of sexual abuse investigations = 0 • The total number of sexual harassment investigations = 0 The number of criminal sexual abuse referred for prosecution = 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Coordinated Response Plan • Staff Guide on the Prevention and Reporting of Sexual Misconduct with Offenders – Brochure • List of Inmates Under the Age of 18 – 0 • Staff Guide Prevention and Reporting Sexual Abuse • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, F. Official Response Following and Inmate Report 1. Staff and Department Reporting Duties • Pre-Audit Questionnaire Screven County Prison Interviews: Random Sample of Staff Medical and Mental Health Staff Warden or Designee PREA Coordinator Provisions: 115.61 (a) The agency shall 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Policy: In accordance with GDC SOP 208.06, all personnel are provided with PREA training which instructs them regarding the proper procedure for reporting any incidents that are in any way related to PREA.

Department of Corrections policy requires staff that witness or receive a report of sexual assault, sexual harassment, or who learn of rumors or allegations of such conduct, must report information concerning incidents or possible incidents of sexual abuse or sexual harassment to the supervisor on duty and write a statement, in accordance with the Employee Standards of Conduct. The highest-ranking supervisor on duty who receives a report of sexual assault or sexual harassment, is required to report it to the appointing authority or his/her designee immediately. The supervisor in charge is required to report it to notify the PREA compliance manager and/or SART leader as designated by the Local Procedure Directive. Appointing authorities or his/her designee may make an initial inquiry to determine if a report of sexual assault, sexual harassment, is a rumor or an allegation. Allegations of sexual assault and sexual harassment are major incidents and are required to be reported in compliance with policy.

Once reported, an evaluation by the SART leader/team of whether a full response protocol is needed will be made. Appointing authorities or designee (s) are required to report all allegations of sexual assault with penetration to the Office of Professional Standards (OPS) Special Agent In-Charge and the Department's PREA coordinator immediately upon receipt of the allegation. OPS will determine the appropriate response. Staff, failing to comply with the reporting requirements of DOC Policy, may be banned from prisons or will be subject to disciplinary action, up to and including termination.

In the prevention section, policy requires staff to be aware of and attempt to prevent sexual abuse, sexual harassment or sexual misconduct, thorough offender communications, comments to staff members, offender interactions, changes in offender behavior, and isolated or vulnerable areas of the institution.

Staff who witness or receive a report of sexual abuse, sexual harassment, or who learn of rumors or allegations of such conduct, must report information concerning incidents or possible incidents of sexual abuse or sexual harassment immediately to the shift supervisor on duty and to a member of the SART Team and write a statement within one hour of this report. Staff shall also report retaliation against offenders and staff for reporting abuse, as well as any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

The highest-ranking shift supervisor on duty at the facility who receives a report of sexual abuse, sexual harassment, shall report it to the Warden, Deputy Warden, or Chief of Security immediately and implement the Coordinated Response Plan to

Sexual Assault if deemed appropriate. The shift supervisor in charge shall notify the Compliance Manager and/or SART Leader, as designated by the LOP.

The Warden or his/her designee may make an initial inquiry to determine if a report of sexual abuse, sexual harassment, is a rumor or an allegation. Allegations of sexual abuse, sexual harassment, are considered major incidents and must be reported in accordance with this policy. Once reported, an evaluation by the SART of whether a full response protocol is needed will be made (refer to section federal standard 115.65).

Staff shall not disclose any information concerning sexual abuse, sexual harassment, or sexual misconduct of an offender, including the names of alleged victims or perpetrators to anyone other than necessary to make treatment, investigation and other security and management decisions. Staff members who fail to comply with the reporting provisions of this policy will be subject to disciplinary action, up to and including termination, whichever is applicable. Unless otherwise precluded by Federal, State or local law, medical and mental health practitioners shall be required to report sexual abuse. It is also the responsibility of medical and mental health practitioners to inform offenders of the practitioner's duty to report and the limitations of confidentiality at the initiation of services.

While this department is not designed to house youthful offenders (refer to section A. Prevention Planning of this policy), the department will employ the following actions should an alleged victim be identified as a youthful offender. If the alleged victim is under the age of 18, or considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws. At this facility, the designated state and/or local reporting agency is:

A. For Child Abuse (Anyone under 18 years of age): Report to The Department of Family and Children Service, Child Protective Services Section.

B. To make a report of child abuse: Please call the DFCS Child Protective Center at: 1- 855-GACHILD / 1-855-422-4453. Reports are taken 24 hours a day, 7 days a week.

C. For Vulnerable Adults where abuse occurs in a community setting (Anyone 18 or over but unable to defend themselves): Report to The Department of Human Services Division of Aging Services Adult Protective Services (APS).

D. To make a report of community based elder abuse: Please call APS toll-free at: 1- 866-55AGING (1-866-552-4464) - Press "3"

E. Reports are accepted by phone Monday through Friday 8 a.m. to 5 p.m. If you have an immediate emergency, please call 911 or your local police department. For Vulnerable Adults where abuse occurs in a licensed facility (Anyone 18 or over but unable to defend them-selves): Report to The Department of Human Services Division of Healthcare Facility Regulation (OHR).

F. To make a report of healthcare facility based elder abuse: Please call OHR toll-free at: 1-800-878-6442 Reports are accepted by phone Monday through Friday 8 a.m. to 5 p.m. If you have an immediate emergency, please call 911 or your local police department.

In addition to reporting information, staff shall intervene as appropriate, by observing and reporting behaviors that may subsequently lead to an incident of sexual abuse. This department will report any and all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, in accordance with the Coordinated Response Plan.

Facility Staff: Staff who conducts medical services were asked: “Are you required to report any knowledge, suspicion, or sexual harassment to a designated supervisor or official immediately upon learning?” Yes.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: “Does the agency require all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation?”

Six (6) random staff interviews indicated a clear understanding of the duty to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident of retaliation immediately.

The various ways staff indicated that they could make a report included, but was not limited to:

- Report to supervisor
- Report to the PREA “person” and Warden
- Complete an incident report

All interviewed staff consistently described a process for reporting any information related to sexual abuse incidents as: reporting immediately, taking the inmate to medical, isolate the inmate from other inmates, don’t allow the inmate to bath, shower, or brush teeth, preserve evidence; and report to someone else for the investigation.

115.61 (b)

Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

The facility staff is instructed through PREA training that any information obtained is limited to a need-to-know basis for staff, and only for the purpose of treatment, security, and management decisions, such as housing, work, education and programming assignments. Information is not to be indiscriminately discussed.

Supervisors will always remind staff of this issue when staff report PREA related issues to their supervisor.

115.61 (c)

Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

Policy: In accordance with GDC SOP 208.06, any sexual abuse information obtained by medical and mental health personnel will be reported per policy to the appropriate personnel with the facility.

115.61 (d)

If the alleged victim is under the age of 18 or considered a vulnerable adult under a state or local vulnerable person's statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

In a past interview with the GDC PREA Coordinator, the Coordinator stated and affirmed that all GDC employees are mandated reporters, meaning that should they become aware of any allegation of sexual abuse or sexual harassment or if they witnessed or were the first-person having knowledge of alleged abuse or sexual harassment of any inmate, regardless of age or physical status, they are mandated to report it. If an inmate is under 18 years of age, that inmate is typically housed in a dedicated living unit and area at a specific Georgia facility designed for youthful offenders. Allegations of sexual abuse for inmates under 18, must be reported not only through the normal GDC reporting process/procedures but must also be reported to the Georgia Department of Family and Children Services. Older inmates are housed throughout the state.

Allegations of sexual abuse of the elderly must also be reported to DFCS.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The agency PREA coordinator was asked: "How do you respond when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law?"

The PREA Coordinator stated and affirmed that all GDC employees are mandated reporters, meaning that should they become aware of any allegation of sexual abuse or sexual harassment or if they witnessed or were the first-person having knowledge

of alleged abuse or sexual harassment of any inmate, regardless of age or physical status, they are mandated to report it. If an inmate is under 18 years of age, that inmate is typically housed in a dedicated living unit and area at a specific Georgia facility designed for youthful offenders. Allegations of sexual abuse for inmates under 18, must be reported not only through the normal GDC reporting process/procedures but must also be reported to the Georgia Department of Family and Children Services. Older inmates are housed throughout the state. Allegations of sexual abuse of the elderly must also be reported to DFCS.

Facility Specialized Staff: Warden question, “how do you respond when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law?” There are no youthful offenders at this facility under the age of 18.

Vulnerable adult allegations are investigated by the facility administrative investigator and if criminal reported to the Georgia Department of Corrections for investigations.

115.61 (e)

The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators.

In accordance with GDC SOP 208.06, allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be reported to the facility, the warden or designee will notify GEC Statewide PREA coordinator, and the GDC Internal Investigations Unit. The warden is responsible for ensuring these notifications are made as soon as possible.

Facility Specialized Staff: Warden question, “are all allegations of sexual abuse and sexual harassment reported directly to designated facility investigators?” Policies require all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports must be reported to the facility’s designated investigators. All allegations are required to be reported to the staff’s immediate supervisor who then notifies the Sexual Assault Response Team. The Warden then will notify the GDC Statewide PREA Coordinator and the Regional Office whose Special Agent in Charge will provide and assign a GDC Office of Professional Standards Investigations Unit Investigator/ Special Agent, with arrest powers and extensive training in conducting investigations, to respond to the prison and begin the criminal investigation. The Warden is responsible for ensuring the notifications are made as soon as possible.

Discussion: The agency/facility is aware of reporting and receiving timely information about sexual abuse, sexual harassment, retaliation, and staff neglect, or violations of responsibilities that may have contributed to an incident or retaliation.

The agency/facility has a reporting policy. The policy requires staff members,

	including medical and mental health staff to immediately report any knowledge, suspicion, or information of any incident in any facility, even in a facility that is not a part of the agency. The facility complies with the state or local mandatory reporting laws and report sexual abuse allegations concerning any victim considered to be vulnerable adults. Interviews with staff confirmed they have been trained to take all allegations and reports seriously and to report them immediately, including those reported by third parties. The verbal reports are to be followed up with a written report before the end of the shift. Discussion: The auditor shares with the facility information regarding Georgia Mandated Reporting Laws: Outside reporting for vulnerable person's statute: • To make a report of abuse for any inmate 18 years of age and older that is unable to defend themselves report to the Georgia Department of Human Services Division of Healthcare 1-886-552-4464. To make a report of abuse for any inmate under 18 years of age; report to Georgia Department of Family and Children Service, Child Protective Services section. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Coordinated Response Plan • List of Inmates in Segregation that was/are PREA Related Past 12 Months - 0 • Number of Target Resident Interviewed in Segregation PREA Related - 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, Paragraph 2, Facility Protection Duties • SOP 209.06 Administrative Segregation

- Pre-Audit Questionnaire Screven County Prison

Interviews:

Agency Head

Warden or Designee

Random Sample of Staff

- Provisions:

115.62 (a)

When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.

Policy: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Facility Protection Duties, requires that upon learning of a sexual abuse, staff are to separate the alleged victim and abuser and ensure the alleged victim has been placed in safe housing which may be protective custody in accordance with SOP 209.06, Administrative Segregation. If the inmate victim is placed in administrative segregation, a note is placed in SCRIBE indicating the reason for the placement. If the offender remains in Administrative Segregation for 72 hours, ensure that the Sexual Assault Response Team has again evaluated the victim within 72 hours. Again, a note is entered into SCRIBE indicating the reason for continued placement. The care and treatment member of SART is responsible for documenting the reasons in SCRIBE. If the alleged perpetrator is an offender and if the alleged perpetrator has been placed in Administrative Segregation in accordance with SOP 209.06, Administrative Segregation, again, a case note documenting the reason for placement is completed and documented in SCRIBE.

If the offender remains in Administrative Segregation for 72 hours, the SART evaluates the offender again within 72 hours and if continued placement is required, the reasons are documented in SCRIBE. The care and treatment staff from SART are responsible for the documentation.

If the alleged perpetrator is staff member, the staff member and alleged victim are separated during the investigation period. The staff member may be reassigned to other duties or other work area; transferred to another institution, suspended with pay pending investigation or temporarily banning the individual from the institution, whichever option the appointing authority deems appropriate. Staff are instructed, if applicable, they are to consult with the SART, regional director, the department's PREA coordinator or the Regional SAC within 72 hours of the reported incident to determine how long the alleged victim or perpetrator should remain segregated from the general population and document the final decision in the offender's file with specific reason for returning the offenders to the general population or keeping the offenders segregated and ensure the SART has evaluated the victim within 24 hours of the report. Once a determination has been made that there is sufficient evidence of sexual assault, staff ensure closure of the matter by serving notice of adverse

action or banning the staff member, making housing and classification changes if the perpetrator is an offender, and update the victim's offender file with incident information.

Staff shall take immediate action to protect the offender when it is learned that an offender is subject to substantial risk of imminent sexual abuse. Separate the alleged victim and abuser. Ensure the alleged victim has been placed in safe housing which may be protective custody in accordance with GCDC Policy: Administrative Segregation. Administrative Segregation should be considered for the alleged victim only as a last resort. The alleged victim and alleged abuser will not be placed in the same living unit.

An incident report shall be written immediately, or no later than the end of the shift. If this is a state offender and they are placed in administrative segregation, The PREA Compliance Manager or Counselor will ensure that a SCRIBE case note indicating the reason for placement has been completed. If the offender remains in Administrative Segregation for 72 hours, ensure that SART has again evaluated the victim within 72 hours. Ensure that a SCRIBE case note indicating the reason for continued placement in Administrative Segregation has been completed if this is a state offender. The Care and Treatment member of SART has responsibility for completing the SCRIBE case note.

If the alleged perpetrator is a staff member, separate the staff member from the alleged victim during the period of investigation by reassigning the staff member to other duties or work area, placing the staff member on administrative leave with pay "pending investigation into allegations of misconduct," or temporarily banning the individual from the institution, whichever option the Warden deems appropriate.

If applicable, consult with the department's SART, GDC's County Prisons Coordinator, State PREA Coordinator, or State OIC Senior Investigator, and SCSD within 72 hours of the reported incident to determine how long the alleged victim or perpetrator should remain segregated from the general population, and document the final decision in the offender files with specific reasons for returning the offenders to the general population or keeping the offenders segregated. The facility Compliance Manager shall ensure the SART has evaluated the victim within 24 hours of the report. Once the State OIC Senior Investigator or the SCSD Criminal Investigation Unit has advised that there is sufficient evidence of sexual abuse, ensure closure of the matter by serving notice of adverse action or banning the staff member from the institution if the perpetrator is a staff member, making housing and classification changes if the perpetrator is an offender in work release, and updating the victim's offender file with the incident information.

Discussion: When an inmate is identified as being at risk for sexual abuse on his current housing unit, the screening staff will request that the supervisor on duty immediately move the inmate to an alternate unit. If alternative placement cannot be arranged, the Warden and/or PREA Coordinator will develop a written plan of action that will provide a safe and secure environment for the victim and ensure the plan is implemented.

Facility Specialized Staff: The agency head designee (warden) question, “when you learn that an inmate is subject to a substantial risk of imminent sexual abuse, what protective action does the facility take?” Staff indicated if they became aware that a resident was subject to a substantial risk of imminent sexual abuse, the first thing they would do is remove that inmate immediately from the alleged threat, place him in a safe place or escort him to the supervisor’s office, or place him temporarily in a segregation cell with single occupancy and notify their supervisor. When asked where they would place the inmate or where they thought he would be placed, they indicated the inmate would probably be placed temporarily in protective custody until he could be transferred to a facility where he might feel safer. Staff stated they would take the change action immediately and when pressed to see what they themselves would do with an inmate making such an allegation, they often said they’d take him to a safe place, to the security office, or elsewhere until the supervisory staff made a decision about where to house him.

Six (6) interviewed random staff reported being aware of the agency procedure for reporting any information related to an inmate who may be at imminent risk of sexual abuse. One hundred percent of the interviewed staff could articulate immediate notification to the supervisor. Ten of the interviewed staff also stated that they would seek to have the inmate moved into another area; separate involved parties secure evidence and immediately complete an incident report.

When probed on protecting the DNA evidence, staff indicated they would not let the inmates brush their teeth, used the bathroom, eating or drinking.

When the 18 interviewed staff were probed on who they would not share the information with staff that they would only share with immediate supervisor or higher ups, and that they would not share with other inmates.

Facility PAQ:

- In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse: 0

Discussion: There have been no incidents of retaliation during the past twelve months. Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview:

- The Total number of investigations for the past 12 months - 0
- The total number of sexual abuse investigations - 0
- The total number of sexual harassment investigations - 0
- The number of criminal sexual abuse referred for prosecution - 0

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and

	online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Facility Directory • SART Assignments • List of Inmates arriving at the facility that reported allegations while at another facility – 0 • List of Inmates reported allegations to another facility that occurred while at your facility – 0 • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, 3. Reporting to other Confinement Facilities • Pre-Audit Questionnaire Screven County Prison Interviews: Agency Head Warden Provisions: • Provisions: 115.63 (a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. In cases where an inmate is sexually abused while confined at another facility, the PREA coordinator will immediately upon notification notify the head of that facility, SART, the GDC PREA coordinator, and GDC Internal Investigations. A full investigation will be coordinated between both facilities by the GDC Internal Investigations Unit.

Policy: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program, 3. Reporting to other Confinement Facilities, requires that in cases where there is an allegation that sexually abusive behavior occurred at another department facility, the warden/designee of the victim's current facility is required to provide notification to the warden of the identified institution and the department's PREA coordinator. In cases alleging sexual abuse by staff at another institution, the warden of the inmate's current facility refers the matter directly to the Office of Professional Standards Special Agent In-Charge. For the non-department secure facilities, the warden/superintendent will notify the appropriate office of the facility where the abuse allegedly occurred. For non-department facilities, the warden/designee (s) contacts the appropriate office of that correctional department.

Upon receiving an allegation that an offender was sexually abused while confined at another facility, the Warden or his/her designee, that received the allegation shall notify the Warden or Head Authority of the identified facility where the alleged abuse occurred. The State PREA Coordinator will also be notified of the allegation and the manner in which the originating facility was notified. Notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The department will document that it has provided such notification and maintain this documentation in the PREA Compliance Manager's files. In a case where the Warden receives such notification from another facility that a former offender was abused while being housed at Screven County Prison, the Warden will ensure that the allegation is investigated in accordance with PREA standards.

Facility Specialized Staff: The agency head designee (warden) question, "if another agency or facility within another agency refers allegations of sexual abuse or sexual harassment that occurred within one of your facilities, is there a designated point of contact?" Upon notification of an allegation of sexual abuse that occurred while an inmate was housed at another facility, the facility warden or designee will contact the institution head of the facility where the alleged abuse occurred and will notify GDC PREA Unit and investigations. This notification will be provided within seventy-two

(72) hours of receiving the report and will be documented and provided to the facility's PREA compliance manager/PREA coordinator.

Facility Specialized Staff: Warden question, "what happens when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred in your facility?"

Notification must be provided as soon as possible but not later than 72 hours after receiving the allegation. Notification is documented. The warden/ designee or Department office receiving the notification is required to ensure that the allegation is investigated in accordance with the PREA Standards and the Georgia Department of Corrections.

Facility PAQ:

In the past 12 months, the number of allegations the facility received that an inmate

	was abused while confined at another facility: 0 115.63 (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. Notification must be provided as soon as possible but not later than 72 hours after receiving the allegation. Notification is documented. The facility head or Department office receiving the notification is required to ensure that the allegation is investigated in accordance with the PREA Standards. 115.63 (c) The agency shall document that it has provided such notification. The notification will be documented and maintained within the inmate's SCRIBE case notes and through the investigation. Discussion: Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview: The Total number of investigations for the past 12 months = 0 The total number of sexual abuse investigations = 0 115.63 (d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards. A full investigation will be coordinated between both facilities by the GDC Internal Investigations Unit. Facility PAQ: In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 0 Discussion: The agency/facility refer reports of sexual abuse that occurred in another facility back to that facility and receive report from other agency/facilities about sexual abuse reported to have occurred in this facility and they ensure that the allegation is investigated. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.64	Staff first responder duties
---------------	-------------------------------------

Auditor Overall Determination: Meets Standard
Auditor Discussion
Supporting Documents, Interviews and Observations: • Facility PREA Policy • Staff ID Card First Responder Instruction • SART Assignments • Coordinated Response Checklist • Coordinated Response Plan • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program • Pre-Audit Questionnaire Screven County Prison • Provisions: 115.64 (a) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: • Separate the alleged victim and abuser; • Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; • If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and • If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Policy: Georgia DOC Policy, 208.6, describes, in detail, actions to take upon learning that an inmate has been the victim of sexual abuse. Actions described included the expectations for non-security first responders. Policy and local operating procedures require that upon learning of an allegation that an inmate was sexually abused, the first security staff to respond to the report is to respond in the following manner: 1. Separate the alleged victim and abuser. 2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, in compliance with SOP IK1-0005, Crime Scene Preservation.

3. If the abuse occurred within 72 hours request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.

4. If the abuse occurred within 72 hours ensure that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, or eating.

5. If the first responder is not a security staff, the responder is required to request that the alleged victim not take any action that could destroy physical evidence and notify security staff immediately.

Upon receiving a report that an offender has been sexually abused, the staff member receiving the report shall immediately inform the shift supervisor so that medical, SART, and the Warden (or designee) may be notified. At the same time, the following shall take place:

A. Separate the alleged victim and abuser.

B. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence in accordance with GDC SOP: Evidence Handling and Crime Scene Preservation.

C. If the abuse occurred within 72 hours, the officer shall instruct the victim not to wash, shower, or change clothes or otherwise hygienically clean any items. Also, not to eat, drink, smoke or brush their teeth or otherwise take any action such as urination or defecation, that could damage or destroy physical evidence pending completion of the gathering of that evidence and/or the initial investigation.

D. If the abuse occurred within 72 hours, the officer shall ensure the abuser does not wash, shower, change clothes or otherwise hygienically clean or otherwise take any action that could damage or destroy physical evidence pending completion of the gathering of that evidence and/or the initial investigation. This means that the abuser is put into Administrative Segregation, in a "dry cell" immediately and should continuously be watched until the necessary examination.

E. If the first responder is not a security staff member, the responder shall request that the alleged victim do not take any actions that could destroy physical evidence, and then notify security staff immediately.

F. The alleged victim shall be promptly escorted under appropriate security provisions to medical for assessment. SART will implement local protocol in accordance with this policy.

Discussion: The PREA Coordinator(s) will assume responsibility for handling the sexual misconduct allegations. Cases involving alleged sexual acts will be reported to the Georgia Department of Corrections (404-863-3079) and the Prevention and Advocacy Resources Center (770-834- 8905).

Georgia Department of Corrections requires that all staff and contractors having

contact with inmates attend, minimally, Day 1 of Annual In-Service Training. Staff at facility, including a cross section of interviewed staff, attends Annual In-Service Training and Day 1 of that training includes PREA. That training includes a refresher on first responding.

Staff are issued a first responder sheet identifying the actions they are to take in response to a sexual assault. The agency initiates a Sexual Assault Response Protocol serving as a checklist of actions to take. Interviewed staff, including non-uniformed staff, explained the steps required as a first responder.

They were consistent in their responses and the responses were consistent with the GDC Policy (208.06) and the Local Procedure Directive and Coordinated response Plan.

Correctional Staff consistently reported they would immediately separate the alleged victim from the alleged perpetrator, notify their supervisor, secure the crime scene, tell the victim and aggressor not to eat, shower, change clothes, use the restroom or brush their teeth.

Medical staff explained what their roles would be as non-security first responders. They would do the same if they were the first person to become aware of an allegation or incident of sexual abuse. It was explained that their role would be to separate the inmate from the alleged aggressor and report the allegation and to assess the inmate but attempt to protect evidence that may be on the person or his clothing. They would conduct a visual assessment of the inmate but would take all precautions possible to protect the evidence.

The Sexual Assault Nurse Examiner would be called to conduct the forensic exam, collecting potential forensic evidence. A chain of custody would be started, and the sexual assault kit turned over to the security staff at the facility, who would in turn, turn it over to the GDC Office of Professional Standards, Special Agent.

Facility Random Staff: Six (6) staff were randomly interviewed. The random staff representing staff from all shifts. They were asked: "If you are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse, what is your responsibility in that situation?"

Six (6) interviewed random staff reported being aware of the agency procedure for reporting any information related to an inmate who may be at imminent risk of sexual abuse. One hundred percent of the interviewed staff could articulate immediate notification to the supervisor. Ten of the interviewed staff also stated that they would seek to have the inmate moved into another area; separate involved parties secure evidence and immediately complete an incident report.

When probed on protecting the DNA evidence, staff indicated they would not let the inmates brush their teeth, use the bathroom, eat or drink.

When the 18 interviewed staff were probed on who they would not share the information with staff that they would only share with immediate supervisor or higher

	ups, and that they would not share with other inmates. 115.64 (b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. Non-custody staff have been trained in first responding. They receive the same annual in-service training during Day 1, that includes PREA. Staff could describe the steps they would take in response to being informed an inmate had been sexually assaulted. They stated the same procedures as correctional staff. Discussion: The agency/facility thru training distinguishes the roles of first responders from investigators. First responders do not conduct any part of the investigation and their role is to protect the victim, separate the victim and alleged abuser, to protect and preserve the scene and any evidence that may exist at the scene or evidence on the victim and alleged abuser. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Coordinated Response Plan • Coordinated Response Checklist • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, Paragraph 5, Coordinated Response • Pre-Audit Questionnaire Screven County Prison • Formal & Informal Interviews Interview:

Warden

- Provision:

115.65 (a)

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

Policy: Georgia DOC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program, Coordinated Response, requires each facility to develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership. The plan must be kept current and include names and phone numbers of coordinating parties. The facility provided the Coordinated Response Plan in a document entitled: PREA Reporting Process and Local Directive.

The local protocol, "PREA Reporting Process" describes the actions taken by the First Responders, notification of the OIC/Duty Officer, Warden's Notification, and the actions of the Sexual Assault Response Team Leader, medical involvement, and mental health involvement. SART conducts the initial investigation. Duties of each SART member are identified and include duties for the SART Team Leader-Security, the Counselor, and Health Services. Lastly the SART Investigation Process is detailed. This document serves as the facility's coordinated response plan.

The facility uses the GDC Sexual Abuse Response Checklist (GDC 208.06, Attachment 6) to coordinate the actions and response of first responders.

Following the initial first response from staff first becoming aware of an incident or allegations of sexual abuse, staff would contact the Sexual Assault Response Team who would take over once on the scene. They would then be responsible for ensuring the potential crime scene is protected and secured and notify the Office of Professional Standards investigators who would advise the SART and then come on sight if needed to collect evidence and assume the investigation.

The PREA Coordinator will maintain a Coordinated Response Plan to include the role of first responders, medical and mental health care givers, investigators, SART, and the facility leadership in responding to incidents of sexual abuse or assault. This document will be kept current with staff assignments and contact information. Copies will be maintained in the facility Control Room, the Deputy Warden's office, and the PREA Coordinator's files.

Facility Specialized Staff: Warden question does the facility has a plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse? The facility has a Coordinated Response Plan to ensure that during an emergency, the Coordinated Response Plan serves as the Emergency Plan, like other emergency

	plans required for secure facilities and the GDC Sexual Assault Response Checklist serves as a coordinated response plan as well. The Local Operating Directive provides guidance in notifying parties when there is an allegation of sexual abuse. After the shift supervisor notifies the warden/designee and the duty officer, the Sexual Assault Response Team is notified. The directive provides reference names and phone numbers. The SART is composed of the PREA compliance manager/SART leader, a representative from medical and from counseling. The Operating Directive describes 1st Responder Reporting Duties that include the immediate actions the first responder must take. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program • Pre-Audit Questionnaire Screven County Prison Interview: Agency Head • Provisions: 115.66 (a) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

The Commissioner's Designee stated that the state of Georgia is a "work at will state" and the agency did not have any union contracts. The designee verified that the agency could remove alleged staff sexual abusers from contact with any inmate pending an investigation or a determination of whether and to what extent discipline is warranted.

The Unified Government of Screven County Prison does not engage in collective bargaining agreements on behalf of the employees of the Screven County Prison. At no time will the Unified Government condone the use of a collective bargaining agreement to limit the government's ability to investigate, separate, and discipline a staff member involved in an allegation of sexual abuse, harassment, or assault against a person under the custody of the Screven County Prison.

Facility Specialized Staff: The agency head designee (warden) question, "has your agency, or any governmental entity responsible for collective bargaining on your behalf, entered into or renewed any collective bargaining agreements or other agreements since August 20, 2012?" Staff affirmed the facility is not involved in any form of collective bargaining and can remove and separate from contact any staff as a part of an investigation.

115.66 (b)

Nothing in this standard shall restrict the entering into or renewal of the agreement that govern:

- The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of standards 115.72 and 115.76 or
- Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.

Georgia is a Right to Work State and employees are all non-union and not involved in any form of collective bargaining. The warden/designee can remove any staff member from contact with inmates following an allegation of sexual abuse or sexual harassment.

Discussion: The agency/facility is not involved in any form of collective bargaining and has the ability to remove any staff alleged to have violated an agency sexual abuse or sexual harassment policy.

Auditor is not required to audit this provision.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • SART Team Assignments • PREA Investigation Packages for past 12 months – 0 • Retaliation Monitoring Documentation -0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program • Pre-Audit Questionnaire Screven County Prison Interviews: Agency Head Warden Retaliation Monitor • Provisions: 115.67 (a) The agency shall establish 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, and shall designate which staff members or departments are charged with monitoring retaliation. Policy: Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program, affirms the agency has a zero tolerance for any form of retaliation and is committed to protecting inmates or staff who report sexual abuse and sexual misconduct or sexual harassment from retaliation. Policy requires that anyone who retaliates against a staff member or an offender who has reported an allegation of sexual abuse or sexual harassment in good faith is subject to disciplinary action. Policy requires a staff be identified to monitor for retaliation. This department will protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with investigations from retaliation from other offenders and staff. The Retaliation Monitor monitors retaliation through face-to-face visits with the applicable offender or staff and completes a report during the monitoring period. This report is stored in the investigation file. For at least 90 days following a report of sexual abuse, the Retaliation Monitor or his/her alternate will monitor the conduct and treatment of offenders and staff who reported the sexual abuse and of the offenders

who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items monitored include:

- A. Offender disciplinary reports
- B. Housing or program changes
- C. Negative performance reviews
- D. Reassignments of staff

Monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. In the case of offenders, monitoring shall also include periodic status checks. The department has multiple protection measures; including housing changes, transfer for offender victims or abusers, removal of alleged staff, offender abuser from contact with victims and emotional support services for offenders or staff who fears retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The department will take appropriate measures if any other individual who cooperates with the investigation expresses fear of retaliation. Instances of substantiated retaliation shall be reported to the Warden for disposition. While the department may terminate monitoring of an unfounded allegation, the Retaliation Monitor exercises the right to continue to monitor the situation to uphold the security of the facility and ensure the safety of the population.

The facility PREA compliance manager serves as the Retaliation Monitor for the facility. An interview with the retaliation monitor indicated he understands and is knowledgeable of the prevention measures the facility might take in a given situation to prevent retaliation in the first place. He indicated following the review, the monitor will initiate contact with the inmate and make him aware that he can contact the retaliation monitor if he is having any issues.

Prevention measures, identified by the Retaliation Monitor include the following:

- Transfer of victims and abusers
- Removal of staff from contact with the victim
- Provide emotional support services
- Monitoring for any changes by staff or offenders that suggest possible retaliation

The monitor related as a prevention action he would move the aggressor from the facility, move him from details and that this would occur the same day. If dorm changes could be safely made, he indicated he would change the victim's dorm. If a staff is involved, he indicated he would separate that staff and instruct that staff to avoid all contact with that inmate, to do nothing to provoke the inmate and that he would instruct the sergeant to monitor the staff and the situation.

As a part of the monitoring process, he indicated he would monitor things like DR's. He would monitor dorm changes, detail assignments and any job assignments. He

would monitor all the items on the GDC Retaliation Monitoring Forms.

115.67 (b)

The agency shall 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.

The inmate may be moved to another housing unit, moved to another side of the complex, or transferred but the inmate should be separated from the source of the retaliation. If an allegation is against a staff member, the staff and inmate should be separated. The staff may be reassigned to another job within the facility where he/she is not supervising the inmate; placing the staff on no contact, placing the staff on leave or reassigning the officer or staff.

Policy: GDC Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program section IV.A. Page 25, states, the Warden/Superintendent shall designate a staff member to serve as the facility Retaliation Monitor and identify them as such in the PREA Local Procedure Directive and Coordinated Response Plan (Attachment 7). Multiple protection measures include offender housing changes or transfers, removal of alleged staff members or offender abusers from contact with victims, and emotional support services for offenders or staff members who fear retaliation for reporting or for cooperating with investigations.

Facility Specialized Staff: The staff designated to monitor retaliation was asked, "Can you describe the different measures you take to protect those inmates and staff from retaliation?" Prevention measures, identified by the Retaliation Monitor include the following:

- Transfer abusers or victims
- Remove staff from contact with the victim
- Provide emotional support services
- Monitor changes

The monitor related as a prevention action he would move the aggressor from the facility, move him from details and that this would occur the same day. If dorm changes could be safely made, he indicated he would change the victim's dorm. If a staff is involved, he indicated he would separate that staff and instruct that staff to avoid all contact with that inmate, to do nothing to provoke the inmate and that he would instruct the sergeant to monitor the staff and the situation.

As a part of the monitoring process, he indicated he would monitor things like DR's. He would monitor dorm changes, detail assignments and any job assignments. He would monitor all the items on the GDC Retaliation Monitoring Forms.

115.67 (c)

For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Monitoring is required to be conducted for at least 90 days following a report of abuse. Monitoring will include monitoring the conduct and treatment of inmates and staff to see any changes to indicate possible retaliation and to remedy any retaliation. Monitoring includes:

1. Review of inmate disciplinary reports.
2. Housing or program changes.
3. Negative performance reviews or reassignment of staff, etc.

Monitoring may continue beyond 90 days if the initial monitoring indicates the need for it.

Facility PAQ:

- The number of times an incident of retaliation occurred in the past 12 months: 0

115.67 (d)

In the case of inmates, such monitoring shall also include periodic status checks.

The facility designee for monitoring retaliation will continue to monitor inmates with periodic status checks.

115.67 (e)

If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

If any other staff or inmate who cooperates with the investigation, feels a need for retaliation monitoring, the designated staff for the victim will also serve as monitor for any inmate or staff that cooperates or involved in the investigation.

Facility Specialized Staff: Warden question, "If an individual who cooperates with an investigation expresses a fear of retaliation, how does the agency take measures to protect that individual against retaliation"? The Georgia Department of Corrections and the facility has a zero tolerance toward retaliation against any inmate/detainee or staff who report an allegation of sexual abuse or sexual harassment. This is expressed

and documented in GDC Policy 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program.

The counselor serves as the Retaliation Monitor for the facility. Staff indicated following the review, the monitor will initiate contact with the inmate and make the staff or inmate aware that she can contact the retaliation monitor if he is having any issues.

The monitor related as a prevention action staff would move the aggressor from the facility, move him from details and that this would occur the same day. If dorm changes could be safely made, staff indicated he would change the victim's dorm. If a staff is involved, it was indicated that he would separate that staff and instruct that staff to avoid all contact with that inmate, to do nothing to provoke the inmate and that he would instruct the designee staff to monitor the staff and the situation. As a part of the monitoring process, staff indicated he would monitor things like DRs and shift assignments. Staff would monitor dorm changes, detail assignments and any job assignments. Staff would monitor all the items on the GDC Retaliation Monitoring Forms.

115.67 (f)

An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

The obligation for monitoring terminates if the allegation is unfounded. Policy requires that monitoring is documented on the GDC Form 90 Day Offender Sexual Abuse Review Checklist. The checklist is completed for each inmate being monitored.

Facility Specialized Staff: The designated staff member charged with monitoring retaliation was asked: "How long do you monitor the conduct and treatment of inmates and staff who report the sexual abuse of an inmate or were reported to have suffered sexual abuse?" The retaliation monitor indicated monitoring would continue for increments. However, when conducting facility inspections inmates will be pulled to the side just to make sure they are not having problems.

Discussion: The agency/facility has a policy that protect residents and staff who report sexual abuse or sexual harassment from retaliation. The agency has designated a staff member that is charged with monitoring retaliation.

Some protection measures that the agency/facility has on hand are, housing changes or transfers for resident victims or abusers; Removal of alleged staff or resident abusers from contact with victims; Provide emotional support services for resident who fear retaliation for reporting sexual abuse or sexual harassment or cooperating with investigations.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and

	online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Coordinated Response Plan • PREA Investigation Packages for past 12 months – 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, D. Screening for Risk of Sexual Victimization and Abusiveness, 3. Protective Custody • Pre-Audit Questionnaire Screven County Prison Interview: Warden • Provisions: 115.68 (a) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of standards 115.43. Policy: Department of Corrections Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, D. Screening for Risk Sexual Victimization and Abusiveness, 3. Protective Custody prohibits placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives have been made and a determination made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the inmate may be held in involuntary segregation for less than 24 hours while completing the assessment. This placement, including concern for the inmate’s safety, must be documented in the inmate/offender database, SCRIBE, documenting concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. Inmates who are placed in involuntary segregation are housed there only until an alternative means of separation from likely abusers can be arranged and the assignment, ordinarily, shall not exceed 30 days. Reviews are required to be conducted every 30 days to determine whether there is a continuing need for separation from the general population. Inmates in involuntary segregation will receive services in accordance

with SOP HNo9-0001, Administrative Segregation.

Following an allegation of sexual harassment, abuse, or assault, the department may utilize the Administrative Segregation unit for purposes of protective custody for the alleged victim. In such instances, the department will comply with all policies as outlined in GOG SOP 209.06:

Administrative Segregation as well as Section D. Screening for Risk of Sexual Victimization and Abusiveness, subsections 3. Protective Custody, of this policy.

Facility Specialized Staff: Warden question, “are inmates at high risk for sexual victimization or who have alleged sexual abuse placed in involuntary segregated housing only until an alternative means of separation from the likely abusers can be arranged?” Inmates at high risk for sexual victimization are housed in the general population. Generally, inmates at high risk for victimization will be placed in one of the dorms identified as providing a safer environment with no aggressors assigned to the dorm. They are not placed in segregated housing and would not be placed there unless there were no other options for safely housing the detainee/resident.

The facility may designate housing that is safer for inmates who are at risk of sexual abuse. If there was no place to safely house a potential or actual victim, the victim will be temporarily housed in the administrative segregation area but would be expeditiously transferred to another facility where he could feel safe.

If an inmate is assigned to involuntary segregated housing it is only until an alternative means of separation from likely abusers can be arranged and such an assignment does not ordinarily exceed a period of 30 days. If the facility uses involuntary segregation to keep an inmate safe, the facility documents the basis for their concerns for the inmate’s safety and the reason why no alternative means of separation can be arranged.

Facility PAQ:

- The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0
- The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement: 0

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion Supporting Documents, Interviews and Observations: • Facility PREA Policy • SART Assignments • GDC Policy – Investigation of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders • PREA Investigation Packages for past 12 months – 0 • NIC Certificates • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, G. 14 Investigation • Pre-Audit Questionnaire Screven County Prison • MOU SCSD Interviews: Warden PCM PC Special Ops Investigator Provisions: 115.71 (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Policy: Georgia Department of Corrections Policy (208.06) requires that all reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. Policy requires investigations are conducted promptly, thoroughly and objectively. It also requires, and staff confirmed, that allegations or reports, including any knowledge, information or suspicions are taken seriously and are investigated. These include reports made verbally, in writing, from third parties and from anonymous sources. Policy: GDC Policy 1K01-0006, Investigation of Allegations of Sexual Contract, Sexual Abuse, and Sexual Harassment of Offenders requires that allegations of sexual contact, sexual abuse, and sexual harassment filed by sentenced offenders, against departmental employees, contractors, vendors or volunteers be reported, fully investigated, and treated in a confidential and serious manner. It requires staff

attitudes and conduct towards such allegations will be professional and unbiased, and staff members are required to cooperate with investigations into those matters. Policy also requires that investigations are conducted in such a manner as to avoid threats, intimidation, or future misconduct.

Policy: Georgia Department of Corrections Policy, 208.6, describes the investigative process. Appointing authorities or his/her designee may make the initial investigation inquiring to determine if a report of sexual abuse or sexual harassment is a rumor or an allegation. The local Sexual Assault Response Team is responsible for initially inquiring and subsequent investigation of all allegations of sexual abuse or sexual harassment with limitations. In cases where allegations are made against staff and the SART deems the allegation is unfounded or unsubstantiated by evidence of facility documentation, video monitoring systems, witness statements, or other investigative means, the case can be closed at the facility level. The appointing authority or designee (s) are required to report all allegations of sexual abuse with penetration and those with immediate and clear evidence of physical contact, to the OPS SAC and the department's PREA coordinator immediately upon receipt of the allegation.

Investigations are required to be prompt and thorough, including those reported by third-parties or anonymously. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Reports are documented and include descriptions of physical and testimonial evidence, reasoning behind the credibility of assessments and investigative facts and findings.

The warden provided information designating the members of the prisons' Sexual Assault Response Team. The team consists of the Warden, Corporal, medical staff and counselor.

The Warden or his/her designee may make an initial inquiry to determine if a report of sexual abuse or harassment is a rumor or an allegation. SART is responsible for the initial inquiry and subsequent administrative investigation of all allegations of sexual abuse or sexual harassment. Limitations, such as allegations made against staff members in which the SART investigation deems the allegation unfounded or unsubstantiated by evidence of documentation, camera recordings, witness statements, or other investigative information may result in closing the case at the facility level. However, if there is potential for a criminal investigation, no interview shall be conducted, nor a statement be collected from the accused staff member without first consulting the SCSD's Criminal Investigations Division. This section will reference Section B. Responsive Planning of this policy.

The Warden or his/her designee shall report all allegations of sexual assault with penetration and those with immediate and clear evidence of physical contact to SCSD for investigation. The Warden shall also notify the Georgia Department of Corrections' County Prisons Coordinator, Statewide PREA Coordinator, and the Office of Investigations and Compliance (OIC) Senior Investigator along with SCSD. The Police Department will dispatch an investigator(s) specifically assigned to the Sex Crimes unit of the Central Criminal Investigations Division. The department will fully

cooperate and assist the PD investigators to gather and preserve direct and circumstantial evidence including any available physical and DNA evidence and any available electronic monitoring data. Additionally, the department will grant full access to PD investigators to interview alleged victims, suspected perpetrators, and witnesses; and given the ability to review prior complaints and reports of sexual abuse involving the suspected perpetrator.

When a criminal investigation is completed pertaining to an employee, the investigation will be turned over to the Human Resources Department and the county's attorneys to conduct any necessary compelled administrative interviews after consulting with prosecutors as to whether compelled interviews may be an obstacle to subsequent criminal prosecution.

The credibility of the victim, suspect, or witness shall be assessed on an individual basis and will not be determined by the person's status as offender or staff member. An offender who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

At the conclusion of each SART investigation, all SART investigations shall be turned over to the Warden for an administrative review. For investigations of allegations of sexual abuse, this department, SCSD, and OIC will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution in accordance with the GDC SOP 103.06: Investigations of A/legations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders.

Both criminal and administrative investigations into allegations of sexual abuse will be handled promptly, thoroughly, and objectively. This will include third-party and anonymous reports.

Administrative investigations will include an effort to determine whether staff member actions or failure to abide by policy were contributing factors. Criminal investigations will be documented to include a thorough description of physical and testimonial evidence. Substantiated allegations that appear to be criminal will be referred for prosecution.

Reports will be maintained for as long as the alleged abuser is incarcerated or employed by the department, plus five years beyond that end date. The departure of the alleged abuser or victim from employment or supervision will not be a basis for terminating an investigation. All investigative entities will comply with this section of the policy.

Facility Specialized Staff: Staff who conduct investigations were asked. "How long does it take to initiate an investigation following an allegation of sexual abuse or sexual harassment?" Staff indicated that the investigation process starts immediately after receiving an allegation. The investigations policies and procedures require that as soon as an incident of sexual contact, sexual abuse, or sexual harassment, comes to the attention of staff, the staff receiving the information is required to immediately

inform the warden and/or the Duty Officer, and/or Internal Investigations, and the Office of Professional Standards Investigators, verbally and followed up with a written report to the warden.

GDC Investigations must be completed within 45 calendar days from the date of the assignment. When there is a backlog in testing rape kits in the State's Crime Lab, the investigation may take longer. An interview with a Special Agent indicated that the lab does not have a backlog at this time.

Facility Specialized Staff: Staff who conduct investigations was asked, "How do you handle anonymous or third-party reports of sexual abuse or sexual harassment? Are they investigated differently?" Staff indicated that all PREA allegations are treated the same as any investigation as well as the using the same investigation process.

Policy: Georgia Department of Corrections Policy (208.06) requires that all reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. Policy requires investigations are conducted promptly, thoroughly and objectively. It also requires, and staff confirmed, that allegations or reports, including any knowledge, information or suspicions are taken seriously and are investigated.

These include reports made verbally, in writing, from third parties and from anonymous sources.

2023 Previously Interviewed Staff (Georgia Department of Corrections): In an interview with the Inspector of the Criminal Investigations Division, the Inspector was asked how long does it take to initiate an investigation following an allegation of sexual abuse or sexual harassment? He indicated no more than 24 hours. Normally, depending on the scope and severity, the investigation will be launched immediately.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, what would be the first steps in initiating an investigation and how long would they take? He indicated, the first step is the initial notification from a facility's representative (Warden, Regional Director, Supervisor, Officer and other staff members). The allegation is made to the Special Agent in charge of the region or to a PREA staff member within OPS. Depending on the scope and factors such as injury, violent assault etc., the investigation can be launched immediately or within 24 hours.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked to describe the investigation process. He indicated that an OPS facility investigator is notified by the OPS Criminal Investigations SAC. Depending on the nature of the allegation, Special Agents may be assigned to include Crime Scene Technicians/Agents to process the scene, conduct interviews and submit laboratory specimens to the crime lab.

115.71 (b)

Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to standard 115.34.

The facility PREA investigators and members of the SART have completed the required specialized investigation training through NIC.

115.71 (c)

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

Facility Specialized Staff: The facility investigator was asked to describe any direct and circumstantial evidence he would be responsible for gathering in an investigation of an incident of sexual abuse. Staff indicated that the investigator collects any direct or circumstantial evidence, such as video footage, witness statements, photos, rape kit as directed by the warden for SANE Nurse, incident reports and other PREA reports.

2023 Previously Interviewed Staff (Georgia Department of Corrections): In an interview with the Inspector of the Criminal Investigations Division the auditor asked him to describe any direct and circumstantial evidence he would be responsible for gathering in an investigation of an incident of sexual abuse. He indicated that GDC Criminal Investigations is responsible for the entire scope of the investigation to include interviews, collection of evidence, and crime scene processing.

115.71 (d)

When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Criminal investigations are documented in written reports that contain thorough descriptions of physical, testimonial, and documentary evidence and copies of all documentary evidence when feasible. Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

Facility Specialized Staff: Staff who conducts investigations were asked: "When you discover evidence that a prosecutable crime may have taken place, do you consult with prosecutors before you conduct compelled interviews? If evidence is discovered that will lead to a prosecutable crime, this information is immediately referred to the GDC for investigations or the local police department. GDC or the local police department will make the decision whether to send the case to the local DA's office.

115.71 (e)

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

investigation of such an allegation.

Facility Specialized Staff: Staff who conduct investigations were asked, "Would you, under any circumstances, require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation?" The staff responded, "no, this is not a requirement."

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, on what basis would you judge the credibility of an alleged victim, suspect, or witness? He indicated all staff or inmates are treated the same until evidence, statements, etc., determine differently.

Credibility is assumed until proven otherwise.

2023 Previously Interviewed Staff (Georgia Department of Corrections): In an interview with the Inspector of the Criminal Investigations Division, he related that he would not, under any circumstances, require an inmate who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation.

115.71 (f)

Administrative Investigations:

- Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and.
- Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Facility Specialized Staff: Staff who conducts investigations were asked, "What efforts do you make during and administrative investigation to determine whether staff actions or failures to act contributed to the sexual abuse?" Staff indicated that they will review agency and/or facility policies and procedures that govern staff behavior and job duties. Staff past actions will also be reviewed to determine whether staff actions or failures to act contributed to the abuse.

Facility Specialized Staff: Staff who conduct investigations were asked, "Do you document administrative investigations in written reports? What information do you include in those reports?" Staff indicated that administrative investigations are in written format. They include summary of findings, evidence, staff statements, inmates' statements, incident reports, offender grievance, and supplement reports, inmates' personal data summary and disciplinary reports.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, what efforts he or his staff would make during an administrative investigation to determine whether staff actions or failures to act contributed to the sexual abuse? He indicated that these investigations are handled by the agency Internal Affairs Section.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, if he or his investigators document administrative investigations in written reports. He said an investigation is documented and a file is created by the Internal Affairs Section.

115.71 (g)

Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Criminal investigation reports involving a PREA investigation are maintained locally as part of the SART investigation.

Facility Specialized Staff: Staff who conduct investigations were asked, "Do you document investigations and what is included in the reports?" Staff indicated that criminal investigations are in written format. They include a summary of findings, evidence, staff statements, inmates' statements, incident reports, offender grievances, supplemental reports, inmates' personal data summary and disciplinary reports.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The auditor, in an interview with the Inspector of the Criminal Investigations Division, asked if criminal investigations documented and if so, what is contained in that report? Staff indicated yes, saying that all criminal investigations are assigned a computer-generated case number. The file is time driven and the agent/investigator must complete processes in a specific window of time. The file is periodically reviewed through the computer-generated case management system (ACISS) and must ultimately be approved by a supervisor. Interviews, lab submissions, along with other information is documented within the case file.

115.71 (h)

Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

Facility Specialized Staff: Staff who conduct investigations were asked, "When do you refer cases for prosecution?" The facility refers all criminal cases to the GDC or the local police department, and GDC or the local police department will send the cases for prosecution if warranted.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, "When you discover evidence that a prosecutable crime may have taken place, do you consult with prosecutors before you conduct compelled interviews?" He stated normally no, interviews are an integral part of the investigation.

Prosecutors are normally consulted upon conclusion of the investigations.

2023 Previously Interviewed Staff (Georgia Department of Corrections): When asked,

in an interview with the Inspector of the Criminal Investigations Division, when were cases referred for prosecution, he indicated that upon conclusion of the investigation the case file is reviewed for accuracy and completeness and then presented to the appropriate prosecutor for consideration of prosecution.

115.71 (i)

The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (j)

The departure of the alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating an investigation.

The departure of the alleged abuser or victim from employment or control of the department does not provide a basis for termination of the investigation.

Facility Specialized Staff: Staff who conduct investigations were asked, "How do you proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct?" Staff indicated if it is criminal, it will be sent to the local police department or GDC or if it is administrative the facility investigator will continue to investigate. The case whether it is criminal or administrative the investigation will not stop until completion.

The departure of the alleged abuser or victim from the employment or control of the Department does not provide a basis for termination of the investigation.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, "how do you proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct?" He indicated that the investigation continues regardless.

2023 Previously Interviewed Staff (Georgia Department of Corrections): Similarly, the Inspector of the Criminal Investigations Division was asked, how do you proceed when a victim who alleges sexual abuse or sexual harassment or an alleged abuser leaves the facility prior to a completed investigation into the incident? He indicated that the investigation continues and follow up occurs wherever the victim is located.

115.71 (k)

Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

The Georgia Department of Corrections investigators conducts investigations as guided by Georgia Department of Corrections policy 208.6 Prison Rape Elimination Act - PREA, Sexually Abuse Behavior, Prevention and Intervention Program.

115.71 (l)

When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

The facility PREA coordinator explained that outside agencies do not conduct investigations of sexual abuse for the county. The GDC has investigators who have had to undergo training at designated Peace Officers Training Facilities. Successful completion of this portion of training gives the staff the arrest powers as a Peace Officer in Georgia. In addition to this training, Investigators must complete investigation training provided by the Georgia Bureau of Investigation. This training is around 16 additional weeks.

Facility Specialized Staff: Staff who conducts investigations were asked, "When an outside agency investigates an incident of sexual abuse in this facility, what role do you play?" Staff indicated that they will serve as the facility point of contact. They will assist in setting up staff and inmates' interviews, collect statements, and provide any additional information that is needed by the outside agency.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The agency PREA coordinator was asked if an outside agency investigates allegations of sexual abuse, how does the agency remain informed of the progress of a sexual abuse investigation?

The PREA coordinator explained that outside agencies do not conduct investigations of sexual abuse for the agency. The GDC has investigators who have had to undergo training at designated Peace Officers Training Facilities. Successful completion of this portion of training gives the staff the arrest powers as a Peace Officer in Georgia. In addition to this training, Investigators must complete investigation training provided by the Georgia Bureau of Investigation. This training is around 16 additional weeks.

2023 Previously Interviewed Staff (Georgia Department of Corrections): In an Interview with the Inspector of the Criminal Investigations Division, the Inspector was asked, "when an outside agency investigates an incident of sexual abuse in the facility, what role do you play?" The inspector indicated that this normally does not occur because GDC Criminal Investigations Division has the authority and responsibility to conduct criminal investigations. If it occurred, he said, the CID would assist the primary agency.

Discussion: The agency/facility ensure that all allegations of sexual abuse and sexual harassment are investigated thoroughly and properly. The agency/facility when investigated can deter sexual abuse and sexual harassment by ensuring that investigations are documented and documentary evidence is preserved; investigations are completed regardless of the status of the victim or perpetrator, and all substantiated allegations that rise to the level of a criminal offense are referred for prosecution.

The administrative investigations try to determine whether staff action or failures to act contributed to the abuse. The investigations documented in a written report that describes the physical and testimonial evidence if any, the reasoning behind

	assessments, and investigative facts and findings. The criminal investigations are also documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence. The agency/facility retains the investigations for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. When investigations are conducted outside of the agency/facility, the facility cooperates with the outside investigators and remain informed about the progress of the investigations. The investigators who handle sexual abuse incidents have training in sexual abuse investigations. Investigators are responsible for gathering and preserving evidence in the case; interview all parties to include victims, perpetrators, witnesses, etc.; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview: 1. The Total number of investigations for the past 12 months = 0 2. The total number of sexual abuse investigations = 0 3. The total number of sexual harassment investigations = 0 4. The number of criminal sexual abuse referred for prosecution = 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Investigation Packages for Past 12 Months 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, G. 14

	• Pre-Audit Questionnaire Screven County Prison Interview: Investigator Provisions: 115.72 (a) The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Policy: The Georgia Department of Corrections Policy 208.6, Prison Rape Elimination Act-PREA, Sexual Abuse Behavior Prevention and Intervention Program, Section G. requires that there shall be no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Facility Specialized Staff: Staff who conducts investigations were asked, “What standard of evidence do you require to substantiate allegations of sexual abuse or sexual harassment?” Staff indicated the preponderance of evidence is used in determining allegations of sexual abuse or sexual harassment. 2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, “what standard of evidence do you require to substantiate allegations of sexual abuse or sexual harassment?” He indicated the standard of evidence the agency uses is the federal rules of evidence. In regard to administrative investigations, there shall be no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- PREA Investigation Packages for past 12 months – 0
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, G.15
- Pre-Audit Questionnaire Screven County Prison

Interviews:

Warden

Investigator

Provisions:

115.73 (a)

Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Following an investigation of a PREA allegation, the alleged victim will be informed of the investigative findings (substantiated, unsubstantiated, or unfounded) within 10 business days of final disposition as entered by the Warden or his/her designee. If an investigation exceeds thirty (30) calendar days, an update will be given to the complainant, in writing, informing them as to the status of the case until such time as the investigation has been completed.

Discussion: Following an investigation into an allegation of sexual abuse, within 30 days, the facility is required, by policy (208.6), to notify the inmate of the results of the investigation as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. GDC Policy 208.6, Prison Rape Elimination Act – PREA, Sexually Abusive Behavior Prevention and Intervention Program, G.15, requires that following the close of an investigation into an offender’s allegation that he/she suffered sexual abuse in a department facility, the facility is required to inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Policy requires the notification be completed by a member of the local SART unless the appointing authority delegates to another designee under certain circumstances. Notifications are required to be documented.

All notifications or attempted notifications are documented.

If the allegation involved a staff member, the PREA coordinator will inform the inmate whenever:

- The staff member is no longer posted in the institution.

- The staff member is no longer employed at the institution.
- The staff member has been indicted on a charge related to sexual abuse within the institution or.
- The staff member has been convicted on a charge related to sexual abuse within the institution.

If the allegation involved another inmate, the PREA coordinator will inform the alleged victim when the alleged abuser has been:

- Indicted on a charge related to sexual abuse within the institution or.
- The alleged abuser has been convicted on a charge related to sexual abuse within the institution.

115.73 (b)

If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

If an outside entity conducts the investigation the agency/facility will request the relevant information from the agency conducting the investigation to inform the inmate of the outcome of the investigation.

2023 Previously Interviewed Staff (Georgia Department of Corrections): The Inspector of the Criminal Investigations Division was asked, in an interview, if the agency's procedures require that an inmate who makes an allegation of sexual abuse must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation? He indicated yes.

115.73 (c)

Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the inmate's unit.
- The staff member is no longer employed at the facility.
- The agency learns that the staff member has been indicated on a charge related to sexual abuse within the facility.
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

A member of the SART or designee is required to notify the inmate when staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the agency learns that the staff member has been indicated on a charge related to sexual abuse within the facility or the agency learns that the

staff member has been convicted on a charge related to sexual abuse within the facility.

115.73 (d)

Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever:

- The agency learns that the alleged abuser has been indicated on a charge related to sexual abuse within the facility.
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

The agency would also notify the inmate when the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse with the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.73 (e)

All such notifications or attempted notifications shall be documented.

The notification form would document, for the inmate, if the investigation was determined to be substantiated, unsubstantiated, unfounded, or referred to OPS.

Facility Specialized Staff: Warden question, does your facility notify an inmate who makes an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation? The agency's standard operating procedure, 208.06, Reporting to Inmates and facility, requires that inmates who are in custody of the Georgia Department of Corrections are entitled to know the outcome of the investigation. The inmate must be notified whether the allegation was determined to be substantiated, unsubstantiated, or unfounded.

All notifications or attempted notifications are documented. If the allegations involved a staff member, the staff making the notification will, using the GDC Inmate Notification Form, inform the inmate whenever:

- The staff is no longer posted in the facility.
- The staff is no longer employed at the facility.
- The staff has been indicted on a charge related to sexual abuse with the institution or the staff has been convicted on a charge related to sexual abuse within the facility.

If the allegation involved another inmate, staff are required to inform the alleged victim when the alleged abuser has been:"

- Indicated on a charge related to sexual abuse within the facility or.

	• The alleged abuser has been convicted on a charge related to sexual abuse within the facility. Notifications are documented on the GDC Notification Form that documents all the above. Facility Specialized Staff: Staff who conduct investigations were asked, “Does your agency procedures require that an inmate who makes an allegation of sexual abuse must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation?” Staff indicated yes that the facility uses GDC notification attachment to inform inmates. If an outside entity conducts the investigation the agency/facility will request the relevant information from the agency conducting the investigation to inform the resident of the outcome of the investigation. 115.73 (f) An agency’s obligation to report under this standard shall terminate if the inmate is released from the agency’s custody. If an inmate is released from the department’s custody the department’s obligation to “notify” the inmate of the outcome of the investigation is terminated. Notifications are required to comply with the PREA Standards and GDC policies. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • PREA Investigation Packages for past 12 months - 0 • List of Staff that Received Disciplinary Sanctions - 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, H. Discipline, 1 Disciplinary Sanction for Staff • Pre-Audit Questionnaire Screven County Prison

- Provisions:

115.76 (a)

Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Department of Corrections Policy, 208.6, Prison Rape Elimination Act. H. Discipline, 1. Disciplinary Sanction for Staff, requires that staff who engage in sexual misconduct with an offender are banned from correctional institutions or subject to disciplinary action, up to and including, termination, whichever is appropriate. Staff may be referred for criminal prosecution when appropriate.

Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program.

Staff that engage in sexual abuse or sexual misconduct/harassment with an offender shall be banned from the facility or subject to disciplinary action, up to and including termination, whichever is appropriate. Termination will be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of Unified Government or department policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse), or for new reports of sexual abuse or harassment shall be commensurate with the nature and circumstance 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 sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation will be reported to law enforcement agencies, unless the activity was clearly not criminal. These will also be reported, as required, to the Georgia Peace Officers Standards and Training Council (POST) if this is a sworn staff member.

Discussion: Appropriate licensing agencies and/or the Georgia Peace Officer Standards and Training Council will be notified, when appropriate.

115.76 (b)

Termination shall be the presumptive disciplinary sanction for who have engaged in sexual abuse.

In accordance with GDC SOP 208.06, termination will be the presumptive disciplinary sanction for staff who engage in sexual abuse with offenders.

Facility Specialized Staff: The warden indicated that termination is the presumptive disciplinary sanction for those who have engaged in sexual activities.

Facility PAQ:

- In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: 0
- In the past 12 months, the number of those staff from the facility who have been

terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

115.76 (c)

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

Violations of department policy related to sexual abuse or sexual harassment (other than engaging in sexual abuse) will be commensurate with the nature and circumstance of the acts committed the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.

Facility PAQ:

- In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0

115.76 (d)

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

Terminations for violations of the Department sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation are reported to law enforcement agencies unless the activity was clearly not criminal. These cases are also reported to the Georgia Peace Officers Standards and Training Council (POST).

Substantiated cases of non-consensual sexual contact between offenders or sexual contact between a staff member and an offender will be referred for criminal prosecution.

Facility Specialized Staff: The facility investigator indicated that all terminations for violations of facility sexual misconduct policies, including resignations by staff will be reported if criminal to law enforcement regarding relevant licensing bodies.

Facility PAQ:

- In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

Discussion: During the audit period, the agency/facility did not have any disciplinary

	sanctions of residents. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Corrective Action for Contractors and Volunteers • List of Contractors that Received Corrective Action -0 • List of Volunteers the Received Corrective Action - 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, Paragraph #2. Contractors and Volunteers • Pre-Audit Questionnaire Screven County Prison Interview: Warden Provisions: 115.77 (a) Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility will immediately remove any contractor or volunteer from the facility if they engage in sexual abuse activities. The contractor or/and volunteer will be prohibited from contact with residents and will reported to the appropriate law enforcement agency. The relevant licensing body will also be notified. Georgia DOC Policy, 208.6, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, Paragraph #2. Contractors and volunteers, requires that any contractor or volunteer who engages in sexual abuse will be prohibited from contact with inmates and will be reported to law enforcement

agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and to relevant licensing bodies unless the activity was clearly not criminal. This department will take appropriate remedial measures and will consider whether to prohibit further contact with offenders, in the case of any other violation of sexual abuse or sexual harassment policies by the contractor or volunteer.

Facility PAQ:

- In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates: 0

115.77 (b)

The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

The facility is required to take appropriate remedial measures and to consider whether to prohibit further contact with inmates in the case of any other violation of department sexual abuse or sexual harassment policies by a contractor or volunteer.

The facility volunteers and contractors that do not adhere to the PREA standards set forth in Georgia Department of Corrections policy number 208.6 will be subject to the disciplinary standards as defined by that same policy. Remedial measures may include prohibiting contact with residents and reporting the incident to the appropriate law enforcement agency.

Facility Specialized Staff: Warden question, "in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, what remedial measures does your facility take? Does the facility always prohibit further contact with inmates?" The facility is required to take appropriate remedial measures and to consider whether to prohibit further contact with inmates in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer. Contractors and Volunteers, as a part of their PREA training sign a GDC Sexual Assault/Sexual Misconduct Prison Rape Elimination Act (PREA) Education Acknowledgment Statement for Employees and Unsupervised Contractors and Unsupervised Volunteers contains a warning that any violation of the policy will result in disciplinary action, including termination, or that they will be banned from entering any correctional institution.

Discussion: During this PREA audit period, there were no corrective action of volunteer and contract staff.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility,

	facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility Policy • GDC Offender Discipline Policy • PREA Investigation Packages for past 12 months – 0 • List of Inmates the Received Disciplinary Sanctions - 0 • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, H. Discipline, Paragraph 3. Disciplinary Sanction for Offenders • Pre-Audit Questionnaire Screven County Prison Interviews: Warden Medical Staff Provisions: 115.78 (a) Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. The facility will subject inmates to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or a criminal finding of guilt for inmate-on-inmate sexual abuse. This sanction will be imposed in accordance with GDC SOP IIB02-0001 and 208.06. Policy: GDC policy prohibits all consensual sexual activity between offenders and offenders may be subject to disciplinary action for such activity. Consensual sexual activity between offenders does not constitute sexual abuse but is considered a disciplinary issue. Paragraph b. requires that offenders are subject to disciplinary sanctions pursuant to a formal disciplinary process following and administrative

finding that the offender engaged in offender-on-offender sexual abuse or a criminal finding of guilt for offender-on-offender sexual abuse. The sanctions that may be imposed are prescribed in Standard Operating Procedures 209.01, Offender Discipline.

Policy: GDC Policy 209.01, Offender Discipline states that prison staff are required to prepare a written Disciplinary Report using the SCRIBE Disciplinary Application and the standard forms that are part of the application when they witness a violation of departmental or prison policies, rules, or instructions or have reasonable cause to believe that such a violation has been committed by an offender. If, in the opinion of the staff member, a disciplinary report is warranted, the staff member will notify their supervisor or shift supervisor (s), and relay to him/her the circumstances surrounding the incident (s). Based upon the information received, the supervisor (s) will start a preliminary investigation of the incident; determine the correct disciplinary charge; if warranted, place the offender in administrative segregation (Pre-hearing detention), until the completion of the investigation, as assist in the writing of the disciplinary report. If the offender is placed in segregation, Attachment I, Offender Assignment to Segregation (Form 1) from SOP 209.06 Administrative Segregation will be completed by the Shift Supervisor and forwarded to the warden, superintendent, or design within 72 hours including weekends and holidays, for review. The offender (s) will also be provided with a copy of the Form 1.

The department prohibits all consensual sexual activity between offenders, and offenders may be subject to disciplinary action for such activity. Consensual (non-coerced) sexual activity between offenders does not constitute sexual abuse, but is considered a disciplinary issue. Offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on offender sexual abuse or a criminal finding of guilt for offender-on offender sexual abuse. These sanctions will be imposed in accordance with GDC SOP 209.01: Offender Discipline.

Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process shall consider whether an offender's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. In the event the department has access to offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the department will consider whether to require the offender to participate in such interventions as a condition of access to programming or other benefits.

The department may discipline an offender for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based on reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation. Following an administrative finding of

malicious intent on behalf of the offender making a false report, the offender shall be subject to disciplinary sanctions pursuant to a formal disciplinary process in accordance with GDC SOP: Offender Discipline.

115.78 (b)

Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses for other inmates with similar histories.

The facility sanctions will be commensurate with the nature and circumstances of the abuse committed, the inmates' disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Appropriate sanctions are covered by GDC SOP IIB02-0001.

115.78 (c)

The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, in any, should be imposed.

GDC SOP IIB02-0001 requires staff to consider an inmate's mental disability or mental illness during the disciplinary hearing process and when determining appropriate sanctions. GDC SOP VG34-0001 also addresses this issue. Therapy, counseling or other interventions can be offered to address and correct underlying reasons or motivations for the abuse and the facility will consider whether to offer therapy, counseling, or other interventions as a condition of access to programming or other benefits.

115.78 (d)

If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

GDC SOP IIB02-0001 requires staff to consider an inmate's mental disability or mental illness during the disciplinary hearing process and when determining appropriate sanctions. GDC SOP VG34-0001 also addresses this issue. Therapy, counseling or other interventions can be offered to address and correct underlying reasons or motivations for the abuse and the facility will consider whether to offer therapy, counseling, or other interventions as a condition of access to programming or other benefits.

Facility Specialized Staff: Staff who conduct medical were asked if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse, does the facility consider whether to offer these services to the offending inmate? If the facility offers therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, the facility is required to consider whether to offer the

offending offender to participate in such interactions as a condition of access to programming or other benefits. Policy affirms that an offender may be disciplined for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact.

115.78 (e)

The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Policy affirms that an offender may be disciplined for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact.

GDC policy and facility PREA policy prohibits all consensual sexual activity between inmates and inmate may be subject to disciplinary action for such activity.

Consensual sexual activity between inmates does not constitute sexual abuse, but it is considered a disciplinary issue. Paragraph b. requires that inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or a criminal finding of guilt for offender-on-offender sexual abuse. The sanctions that may be imposed are prescribed in Standard Operating Procedures 209.01, Offender Discipline.

115.78 (f)

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

Reports made in good faith upon a reasonable belief that the alleged conduct occurred shall not constitute false reporting or lying, even if the investigation does not establish sufficient evidence to substantiate the allegation. However, following an administrative finding of malicious intent on behalf of the offender making the report, then the offender will be subject to disciplinary sanctions pursuant to a formal disciplinary process in accordance with SOP 209.01, Offender Discipline.

115.78 (g)

An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

GDC policy and facility PREA policy prohibits all consensual sexual activity between inmates and inmate may be subject to disciplinary action for such activity.

Consensual sexual activity between inmates does not constitute sexual abuse, but it is considered a disciplinary issue. Paragraph b. requires that inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an

	administrative finding that the offender engaged in offender-on-offender sexual abuse or a criminal finding of guilt for offender-on-offender sexual abuse. The sanctions that may be imposed are prescribed in Standard Operating Procedures 209.01, Offender Discipline. Discussion: During this audit period, there were no disciplinary sanctions for residents regarding sexual abuse or sexual harassment. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • PREA Medical Log • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, I., Medical and Mental Care • Pre-Audit Questionnaire Screven County Prison Interview: Medical Staff • Provisions: GDC Policy 508.14, Mental Health Reception Screen states that, it is the policy of the Georgia Department of Correction (GDC) that all offenders are screened for mental health needs and that referrals for further evaluations are made as clinically indicated. This procedure is applicable to all Georgia Department of Corrections facilities with diagnostic units. GDC Policy,208.06, asserts that if an inmate's intake assessment indicated the inmate has experienced any prior victimization or has perpetrated any sexual abuse, whether in an institutional setting or in the community or whether in a jail, the inmate will be offered a follow-up meeting within 14 days of the intake screening. This will be documented on the inmate's intake screening instrument. Any information related to

sexual victimization or abusiveness that occurred in an institutional setting is required to be strictly limited to necessary staff maintaining strict confidentiality.

The department may utilize the screening for an offender's risk of sexual abusiveness or sexual victimization, as outlined in Section D: Screening for Risk of Sexual Victimization and Sexual Abusiveness of this policy to adjust the response of care and treatment of the individual. If the offender indicates a prior experience of sexual victimization, whether in an incarcerate setting or in the community, the department will offer a follow-up meeting with medical and/or mental health practitioners within 14 days of this screening. If the offender has indicated a prior history of sexual abusiveness, staff will allow follow-up access to a mental health practitioner within 14 days of the intake screening. Medical and mental health practitioners will obtain consent from the offender before reporting information about prior sexual victimization that did not occur in confinement. Any information related to sexual victimization or abusiveness that occurred in a confined setting will be limited to medical and mental health practitioners, and other staff, as necessary to provide an informed treatment and security plan.

Facility Specialized Staff: Staff who perform screening for risk of victimization and abusiveness were asked, "If a screening indicates that an inmate has experienced prior sexual victimization, whether in an institutional setting or in the community, do you offer a follow-up meeting with a medical and/or mental health practitioner?" Staff indicated that if a screening reveals an inmate prior sexual victimization, the inmate would be referred for a follow-meeting. The inmate may choose to refuse. If the inmate wants to have a follow-up with mental health, the staff makes the referral.

115.81 (b)

If the screening pursuant to standard 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

If the screening process indicates an offender has previously perpetrated sexual abuse whether it occurred in an institutional setting or in the community, staff ensure that the offender is offered a follow up meeting with a mental health practitioner within 14 days of the intake screening. Reviewed investigation files consistently had documented referrals to mental health at this facility.

115.81 (c)

If the screening pursuant to standard 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner with 14 days of the intake screening.

Policy: GDC Policy 508.17 Identification of Offenders with a History of Physical or Sexual Abuse defines Specially Trained Counselor as any mental health counselor, or licensed clinical consultant (psychiatrist, Advanced Practice Registered Nurse (APRN),

	psychologist, social worker, counselor) who has successfully completed the Georgia Department of Corrections Sexual Assault Counseling Training Program or who has a comparable combination of training and experience approved by the Statewide Mental Health Program supervisor/designee. 115.81 (d) Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Care is taken to protect reported information. Information reported by offenders related to prior victimization or abusiveness that occurred in an institutional setting is limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments or as otherwise required by Federal, State or local law. 115.81 (e) Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. Facility Specialized Staff: Staff who conducts medical were asked:” Do you have a separate informed consent process for inmates under the age of 18?” Staff indicated that the facility does not house youthful inmates. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy

- Coordinated Response Plan
- Medical Management of Suspected Assault
- Advocacy MOU Statesboro Regional Sexual Assault Center
- Brochure English
- Brochure Spanish
- PREA Medical Logs
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program

Interview:

Medical

- Provisions:

115.82 (a)

Inmate victims of sexual abuse shall 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.

Policy: GDC Policy, 208.6, Prison Rape Elimination Act, Sexually Abuse Behavior Prevention and Intervention Program requires the facility to provide prompt and appropriate medical and mental health services in compliance with this standard. It requires SART to arrange for immediate medical examination of the alleged victim, followed by a mental health evaluation within 24 hours. One of the SART members is a health services administrator. Medical staff are required to contact the appropriate Sexual Assault Nurse Examiner, who will respond as soon as possible, but within 72 hours of the time the alleged assault occurred to collect forensic evidence. The facility provided the agency's procedures for SANE Nurse Evaluation/Forensic Collection. This document provides detailed procedures beginning with the initial report of sexual abuse or assault. Medical staff are charged with conducting an initial assessment of the offender to determine if there is evidence of physical trauma requiring immediate medical intervention in accordance with good clinical judgement.

Medical staff immediately initiates all necessary urgent/emergent treatment for bleeding, wounds, and other traumas. They then complete the Nursing Protocol Assessment Form for alleged sexual assault. Facility clinicians document physical examinations in the progress notes. When medically indicated, medical staff are required to arrange transfer of the offender (if no SANEs are available on site) to the designated emergency facility for continued treatment and collection of forensic evidence. If an alleged assault occurred within 72 hours of the reported incident and the offender does not require transport to the emergency room, the designated facility SANE (from the list of SANE nurses) shall be immediately notified and an appointment scheduled for the collection of forensic evidence.

This process will occur only if there has been penetration, including oral penetration, reported by the patient. Otherwise, no rape kit will be collected. If the sexual assault

occurred more than 72 hours previously, the decision on whether the evaluation is done by a local hospital, by the SANE nurse, or facility staff will be made on a case-by-case basis. The decision is made by the health authority in consultation with the facility investigator and in accordance with GDC PREA Policy requires that if the facility does not have a designated SANE Nurse, the offender is sent to the designated emergency room for collection of forensic evidence.

The facility maintained a Medical PREA Log by medical Staff regarding sexual assaults. This log includes the following information:

1. Logs the date of the incident
2. Reported within 72 hours
3. Transport to ER
4. Inmate consent signed
5. SANE notified
6. Time notified
7. Date Exam Scheduled
8. Date Exam completed
9. Time SANE arrived
10. SANE Conducting the Exam
11. Company Chain of Command for Rape Kit
12. Date the rape kit is accepted by security.

The PREA coordinator (s) will assume responsibility for handling the sexual misconduct allegations. Cases involving alleged sexual acts will be reported to the Georgia Department of Corrections (404) 863-3079.

Offender victims of sexual abuse shall 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 judgement. 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 shall take preliminary steps to protect the victim and shall take the victim to the medical unit immediately. The on-duty medical staff will notify the victim's advocate services, and document all actions taken and communications with the victim. Offender victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception (when applicable) and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Treatment services shall be provided to the victim without financial cost or medical co-pay and shall be provided whether the victim name the abuser or cooperates with any investigation arising out of the incident.

Facility Specialized Staff: Staff who conducts medical services were asked, “Do inmate victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services?” GDC Policy requires that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services and the services are within the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. This was confirmed through reviewed policies and procedures, and the PREA compliance manager.

115.82 (b)

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 shall take preliminary steps to protect the victim pursuant to standard 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Policy: Georgia DOC Policy, 208.6, describes, in detail, actions to take upon learning that an inmate has been the victim of sexual abuse. Actions described included the expectations for non-security first responders. Policy and local operating procedures require that upon learning of an allegation that an inmate was sexually abused, the first security staff to respond to the report is to respond in the following manner:

1. Separate the alleged victim and abuser.
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, in compliance with SOP IK1-0005, Crime Scene Preservation.
3. If the abuse occurred within 72 hours request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.
4. If the abuse occurred within 72 hours ensure that the alleged abuser does not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, smoking, or eating.
5. If the first responder is not a security staff, the responder is required to request that the alleged victim not take any action that could destroy physical evidence and notify security staff immediately.

The Sexual Assault Response Team will be notified and will implement the local protocol.

The local protocol, “PREA Reporting Process” describes the actions taken by the First Responders, notification of the OIC/Duty Officer, Warden’s Notification, and the actions of the Sexual Assault Response Team Leader, medical involvement, and mental health involvement. SART conducts the initial investigation. Duties of each

SART member are identified and include duties for the SART leader, security, the counselor, and Health Services. Lastly the SART Investigation Process is detailed. This document serves as the facility's coordinated response plan.

Following the initial first response from the staff first becoming aware of an incident or allegation of sexual abuse, staff would contact the Sexual Assault Response Team who would take over once on the scene. They would then be responsible for ensuring the potential crime scene is protected and secured and notify the Office of Professional Standards investigators would advise the SART and then come on site if needed to collect evidence and assume the investigation.

115.82 (C)

Inmate victims of sexual abuse while incarcerated shall be 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.

Facility Specialized Staff: Staff who conducts medical services were asked, "Are victims of sexual abuse offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis?" Staff indicated that when an inmate returns, they would give timely information about access to contraception and sexually transmitted infections.

115.82 (d)

Treatment services shall be 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.

GDC Policy VH07-001 Health Services, E., Medical Services Deemed Necessary Exempt from Fee, requires that medical care initiated by the facility is exempt from health care fees.

The department has promulgated a Local Procedure Directive encompassing the procedures related to responding to victims of sexual assault and the victim is provided the opportunity for a forensic exam as soon as possible. Forensic exams are provided at no cost to the victim.

Facility Specialized Staff: Staff who conducts medical services were asked, "Are the medical and mental services offered consistent with community level of care?" Staff indicated that the services provided by the facility are consistent with community level of care or better because the inmates have access to the services.

Discussion: These services will be provided to the victim at no cost, regardless of cooperation with the investigation. These services, according to policy, will be available on an on-going basis, until the resident is released from the facility. Contact information is provided.

The facility provides victims with medical and mental health services consistent with

	the community level of care through the nearest GDC prison. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Advocacy MOU Statesboro Regional Sexual Assault Center • Mental Health Evaluations GDC • Brochure English • Brochure Spanish • Medical PREA Log • GDC "Procedure for Sane Nurse Evaluation/Forensic Collection • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program Interview: Medical Staff • Provisions: 115.83 (a) The facility shall 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. Policy: Screven County Prison, PREA – Sexually Abusive Behavior Prevention and Intervention Program effective date: April 11, 2022, Section V-H3. The department will offer medical or mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any prison,

jail, lockup or juvenile facility. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The department will provide such victims with mental health services consistent with the community level of care. Offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Should the department house female offenders, the department will ensure victims of sexual abusive vaginal penetration while incarcerated shall be offered pregnancy tests. Furthermore, if a pregnancy results from the penetrative sexual abuse incident, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy- related medical services.

Screven County Prison will attempt to provide a mental health evaluation of all known offender on offender abusers within 60 days of learning of such abuse history and offer treatment were deemed appropriate by mental health practitioners.

Discussion: The agency's "Procedure for SANE Nurse Evaluation/Forensic Collection" provides specific actions required when an inmate alleges sexual abuse/assault. It requires that following a SANE Examination, the facility provider or designee is responsible for ordering prophylactic treatment for STIs. A follow up visit by a clinician is required three working days following the exam. The facility has facility specific coordinated response plan (Local Procedure Directive). This plan requires each victim receive a mental health evaluation within 24 hours.

115.83 (b)

The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or replacement in, other facilities, or their release from custody.

The facility provided a copy of the following MOU:

Sexual Assault Victim Advocacy Agreement:

The Screven County Prison is requesting the services of Statesboro Regional Sexual Assault Center, to provide Victim Advocacy Services for issues related to the Prison rape Elimination Act (PREA) in the event those services are needed.

As a member of the Rape, Abuse & Incest National Network and a Georgia Criminal Justice Coordinating Council certified victim assistance agency, Statesboro Regional Sexual Assault Center, may receive hotline crisis calls from returning citizens housed at the Screven County Prison.

Additionally, Advocacy services may be provided at an area hospital's emergency services by Statesboro Regional Sexual Assault Center, if the returning citizen is there for a Sexual Assault Forensic Medical and Evidentiary Examination.

115.83 (c)

The facility shall provide such victims with medical and mental health services consistent with the community level of care.

In compliance with Georgia Department of Corrections SOP 208.96, the facility offers medical and mental health evaluation and, if needed, treatment to all inmates victimized by sexual abuse in a prison, jail, lockup or juvenile facility and as appropriate, the facility offers appropriate follow-up services and mental health evaluation, including referrals for continued care following transfer or placement in other facility or their release from custody.

This facility has limited medical services and ongoing medical services, if beyond the scope of services offered at the facility, the inmate would be placed in a more appropriate GDC facility, capable of providing those services. The same is true with mental health services. Mental health services are not available in the County Prisons under contract with the GDC because these are considered work camps where inmates perform work details out of and inside the facility, so inmate with mental health needs are not sent to these facilities and when treatment is needed, the inmate is sent to a more appropriate facility providing mental health services.

Facility Specialized Staff: Staff indicated that the services provided by the facility is consistent with community level of care or better because the inmates have access to the services.

115.83 (d)

Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

This is an all male facility, this standard does not apply.

Facility Specialized Staff: Medical staff was asked, "if pregnancy results from sexual abuse while incarcerated, are victims given timely information and access to all lawful pregnancy related services?" Staff stated that this does not apply to this facility. The facility is male only.

This is an all-male facility, this standard does not apply.

115.83 (e)

If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

There are no female inmates at this prison therefore inmates obviously are not offered pregnancy tests nor is the substandard regarding providing timely and comprehensive information about and timely access to all lawful pregnancy related medical services.

115.83 (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Upon return from the local hospital, the institution nurse is to assess for any lingering acute or non-acute physical injuries as well as any psychological impact of the victimization. Follow up medications, treatment, testing, etc. will be completed as ordered. This may include repeat HIV/STD testing and follow-up medication as needed/ordered for HIV/STD. All findings must be documented in the inmate's medical record and strict confidentiality will be maintained at all times.

115.83 (g)

Treatment services shall be 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.

Policy: GDC Policy VH07-001 Health Services, E., Medical Services Deemed Necessary Exempt from Fee, requires that medical care initiated by the facility is exempt from health care fees.

The department has promulgated a Local Procedure Directive encompassing the procedures related to responding to victims of sexual assault and the victim is provided the opportunity for a forensic exam as soon as possible. Forensic exams are provided at no cost to the victim.

115.83 (h)

All prisons shall 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.

GDC policy requires that the facility attempt to conduct a mental health evaluation of all known inmate on inmate abusers within 60 days of becoming aware of such history and offer treatment as appropriate.

The facility does not have mental health staff, therefore mental health services are provided either at GDCP or at another appropriately identified facility. Mental Health assessments are conducted on victims of sexual abuse and they are either offered services or are continued in care on the caseload, if appropriate. Medical and mental health staff provide services consistent with the community level of care, consistent with the GDC Policy, VH-08-0002.

Discussion: The agency/facility ensures that a victim of sexual abuse in the facility is provided, at no cost, unimpeded, unconditional, and timely emergency medical treatment and crisis intervention services following a sexual assault. The medical treatment is determined solely by medical and mental health professionals according to their professional judgement. Victim will be provided timely information and access to emergency contraception and sexually transmitted infections prophylaxis.

Below are the Sexual Abuse, Sexual Harassment Allegations and Investigations Overview:

- The Total number of investigations for the past 12 months - 0

	• The total number of sexual abuse investigations - 0 • The total number of sexual harassment investigations - 0 • The number of criminal sexual abuse referred for prosecution - 0 Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Incident Review Checklist • Monthly SART Meeting Sign-In • SART Team Assignments • YTD Totals Facility PREA Checklist • GDC 2024 Annual PREA Report • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, J. Data Collection and Review Interviews: Warden PCM • Provisions: 115.86 (a) The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Policy: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexually Abusive Behavior Prevention and Intervention Program J. Data Collection and Review, 1. Monthly Sexual Abuse and Sexual Assault Program Review, affirms and requires that

each facility meet once per month to review and assess the facility's PREA prevention, detection, and response efforts. During that meeting, policy requires an incident review to be conducted for each sexual abuse allegations that has been concluded within the past 30 days. This review is to be conducted on all abuse allegations deemed to be substantiated and unsubstantiated. Reviews of unfounded allegations are not necessary.

The PREA Compliance Manager will ensure that an incident review of every sexual abuse/misconduct investigation is conducted within 30 days of the conclusion of the investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review team should include command staff members with input from SART members and/or other personnel selected by the Warden. This review team will consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. Further, 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. The review team will also examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; and assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

The PREA Compliance Manager will prepare a report of the team's findings, including but not necessarily limited to determinations made regarding the above criteria, as well as any recommendations for improvement, and submit such report to the Warden. The department will then implement any changes deemed necessary or provide documentation outlining why the changes were not made.

Discussion: Policy requires that the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including when the allegation has not been substantiated, unless the allegation was determined to be unfounded. The review, in compliance with policy, must ordinarily be conducted within 30 days of the conclusion of the investigation. The PREA Policy asserts that the facility will always conduct a review of the incident within 30 days.

115.86 (b)

Such review shall ordinarily occur within 30 days of the conclusion of the investigation.

The facility has a Sexual Abuse a Sexual Harassment review team process. The process is completed within the required 30 days after receiving the results of the investigations.

115.86 (c)

The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

DOC Policy requires that the members of the incident review team consist of the PREA compliance manager, SART, and representatives from upper-level management, line supervisors and other staff members, as designated by the warden of the facility. The warden provided a memo designating the members of the SART for the facility.

Facility Specialized Staff: Warden question, “does your facility have a sexual abuse incident review team”? The Incident Review Team includes upper-level management officials, with input from line supervisors, investigators, medical practitioners and a counselor. SART members are included in the review.

115.86 (d)

The review team shall:

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- 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.
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of staffing levels in that area during different shifts.
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Team members consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse; whether the allegation was motivated by the perpetrator’s or victim’s race, ethnicity, gender identity, gay, lesbian, bisexual, transgender or intersex identification, status or perceived status, or gang affiliation, or was motivated by other group dynamics at the facility; to examine the area where the incident allegedly occurred to assess whether physical barriers in the area enabled the abuse; to assess the adequacy of staffing levels in the area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and prepare a report of findings, including, but not limited to, determinations regarding all of the above and any recommendations for improvements, and submit the report to the warden or PREA compliance manager.

115.86 (e)

	The facility shall implement the recommendations for improvement or shall document its reasons for not doing so. In conducting the incident reviews, the members described the process and indicated they would use the GDC Incident Review Form. Using the GDC Incident Review Form, the following are a part of the review process: Consider whether the allegations 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, gay, lesbian, bisexual, transgender or intersex identification status or perceive status, gang affiliation or was motivated or otherwise caused by other group dynamics at the institution. • Examine the area where the incident allegedly occurred to assess any physical barriers in the area that may enable abuse. • Assess the adequacy of staffing levels in that area during various shifts. The review team, in compliance with policy and confirmed, then will prepare a report of its findings to the Warden and PREA Compliance Manager who are authorized to implement the recommendations for improvement or document the reasons for not doing so. Facility Specialized Staff: The PREA compliance manager stated that when the facility received recommendations for improvement, they will implement as long as the recommendations is reasonable. Necessary changes will be made immediately upon their identification. If changes are not made because GDC SOP modification is necessary, the recommendations sent up the chain of command will be clearly documented by SART during their review of the incident. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations:

- Facility PREA Policy
- GDC 2023 Annual Report
- GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, J.3
- Pre-Audit Questionnaire Screven County Prison

Provisions:

115.87 (a)

The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

Policy: The facility complies with these provisions by adhering to Georgia Department of Corrections Policy Number 208.6. The facility submits a report to the Department's PREA coordinator each month using GDC SOP UA21-0001 Attachment 1- PREA Monthly Report Form. This form is submitted by electronic method and is due by the fifth business day of the month following the reporting month. AU allegations occurring within the month are included on the report along with the appropriate disposition.

Cases that have not been closed by the last day of the month require a notification to the Department's PREA coordinator by e-mail advising status of case when it is closed. It is not necessary to submit a blank form when no allegations are reported within the month; the facility may submit an e-mail stating there were no PREA allegations for the reporting month and e-mail must include the reporting month/year, the facility name and name of person submitting report. In addition to the monthly reports, a GDC Major Incident Report is filed for every allegation of sexual abuse at the facility.

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

Policy: GDC Policy 208.06, Prison Rape Elimination Act, Sexually Abusive Behavior Prevention and Intervention Program, j.3, requires each facility to submit to the department's PREA analyst, each month, a report, using the electronic spreadsheet provided from the PREA coordinator's office. The form submitted by email the fifth calendar day of the month following the reporting month. It requires that allegations occurring within the month will be included on this report along with the appropriate disposition. The monthly report is to be completed in accordance with the Facility PREA Log User Guide.

The PREA Monthly Report, maintained in Microsoft Excel, is the electronic data collection system which tracks all allegations of sexual abuse defined by this policy. In addition to the SART files maintained by the Counselor and PREA Investigator, the

department will collect accurate, uniform data for every allegation of sexual abuse.

This monthly document will be submitted to GDC's PREA Analyst by email no later than the third of every calendar month. Information in this monthly report will be used to answer any questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

The department will maintain, review, and collect data as needed from all available incident based documents, including reports, investigation files, and sexual abuse incident reviews. Incident-based data will include total numbers of substantiated, unsubstantiated, unfounded and ongoing of the following acts:

- A. Non-consensual sexual acts;
- B. Abusive sexual contacts (if counted separately from non-consensual sexual acts);
- C. Staff sexual misconduct;
- D. Staff sexual harassment (if counted separately from staff sexual misconduct); and
- E. Whether any occurred in privately operated facilities or in facilities operated by local government.

As outlined in GDC SOP 208.06, GDC will provide all such data from the previous calendar year to the Department of Justice no later than June 30 of the current calendar year.

115.87 (b)

The agency shall aggregate the incident-based sexual abuse data at least annually.

The GDC PREA Unit carried out this responsibility. The auditor reviewed the Georgia Department of Corrections 2023 Annual PREA Report. The report incident-based sexual abuse data is aggregated annually and approved by the agency.

The auditor reviewed the facility 2021, 2022 and 2023 Annual PREA Report on agency website. The report incident-based sexual abuse data is aggregated annually and provided by the agency.

The facility collects sexual abuse data including data related to staff on inmate sexual abuse, staff on inmate sexual harassment, inmate on inmate sexual harassment, and inmate on inmate sexual abuse. This data is collected and reported each month, as required, in the Monthly PREA Report that is submitted to the Georgia Department of Correction's PREA Unit, where a PREA Analyst collects data from each facility and aggregates that data at least annually.

NOTE: The county facilities are included in GDC 2023 Annual PREA Report.

115.87 (c)

The incident-based data collected shall include, at a minimum, the data necessary to

answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

The GDC PREA Unit carried out this responsibility. The auditor reviewed the Georgia Department of Corrections 2023 Annual PREA Report. The report incident-based sexual abuse data is aggregated annually and approved by the agency.

Facility Specialized Staff: An interview with the PREA compliance manager indicated that the facility collects all data that is required by the Survey of Sexual Violence conducted by the Department of Justice.

115.87 (d)

The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The data will be collected, reviewed annually and maintained from all available incident-based documents, including reports, investigation files and sexual abuse reviews. Upon request all such data from the previous calendar year will be provided to the Department of Justice. The data collected will be securely maintained and retained for at least 10 years after the date of initial collection.

115.87 (e)

The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.

The aggregated sexual abuse data will be readily available to the public at least annually through the Georgia Department of Corrections. Before making the data available, the Department will remove all personal identifiers. Some information may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the institution, but it will but, the nature of the material redacted will be indicated. The facility reported the sexual abuse/sexual harassment data on the Facility's Website.

115.87 (f)

Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Upon request, DOC and/or the facility provides data from the previous calendar year to the US Department of Justice no later than June 30th.

Facility Specialized Staff: The PREA compliance manager indicated that the facility can and will provide the required PREA data from the previous calendar year to the Department of Justice upon request.

The GDC PREA Unit has a dedicated staff person, an analyst, who collects and analyzes the data. Based on the data reviewed the GDC can track allegations and investigations and findings from each facility and assess the need for any corrective

	actions. The PREA Compliance Manager related to the facility sends a monthly PREA report (208.06, Attachment 2), to the Agency’s PREA Analyst. This report, according to the compliance manager, consists of the numbers of PREA Cases, victims and predators, statistics on allegations of sexual abuse, assaults, grievances filed, the results of investigations and a response to the question, “was the investigation or allegations sent to the OPS investigators. In addition to the monthly PREA statistical report submitted by each facility; the facility also submits to GDC, a Monthly Operational Report, providing statistics on a multitude of topics, including PREA incidents. The monthly PREA Report documents all allegations/incidents of sexual abuse or sexual harassment. The auditor reviewed all twelve months of reports to the PREA Unit. The PREA Analyst provides the auditor, prior to each audit; reports documenting the disabilities of residents; lists of residents disclosing prior victimization (when available), as well as an email documenting the names of residents contacting the PREA Hotline during the past twelve (12) months. The disability report enables the auditor to identify residents/residents who are hearing or visually impaired or who have some other form of disability. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • Facility Website • Facility 2024 Annual Report • GDC Annual Report 2023 • Agency’s Website • Pre-Audit Questionnaire Screven County Prison • Provisions: 115.88 (a)

The agency shall review data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:

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

The Georgia Department of Corrections requires each facility to conduct incident reviews after each sexual abuse allegation investigation if the allegations are founded or unsubstantiated. The purpose of this is to determine what the motivation for the incident was and to assess whether there is a need for corrective actions including additional staff training, staffing changes or requests for additional video monitoring technology or other actions to help prevent similar incidents in the future.

The agency reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training, including identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and corrective actions for each facility and the GDC. The department has a dedicated staff person whose job is to collect and analyze the data.

The PREA Compliance Manager will review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training, by including identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions. The annual report will include a comparison of current year's data and corrective actions with those from prior years and will provide an assessment of the department's progress in addressing sexual abuse. This report will be available on the department's public website. In some instances, specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the facility, but the nature of the redacted material must be indicated.

Facility Specialized Staff: The PREA compliance manager question, "if the agency reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, what role does the facility and facility data play in this review"? The agency and facility reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas and taking corrective action as necessary on an ongoing basis.

The GDC requires each facility to maintain PREA related data and to report to the GDC PREA Unit, monthly the number of allegations of sexual abuse and sexual harassment, including inmate on inmate and staff, contractor, volunteer on inmate.

The agency collects the data for each facility and aggregates it at least annually and provides comparisons from previous years as well as actions the Department has taken as a result of analysis of the data. The annual reports are comprehensive and informative.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The GDC agency PREA coordinator was asked if 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, and training?

The PREA coordinator indicated data is collected and reviewed monthly and annually. The purpose of the review is to identify trends or issues that need to be considered and/or addressed. The PREA Unit receives data through several processes. The PREA Unit receives reports of allegations of sexual abuse and sexual harassment on a daily basis. They maintain data on the phone calls they receive via the agency hotline and otherwise. Monthly reports are submitted to the PREA Unit. These include the allegations of Inmate-on-Inmate Sexual Abuse; Inmate on Inmate Sexual Harassment; Staff on Inmate Sexual Abuse and Staff on Inmate Sexual Harassment. This information is collected and analyzed by the PREA Coordinator and her team, including the PREA Analyst. Investigations are also uploaded into the agency's computerized system. This information enables the PREA Unit to track the progress of investigations as well as to review the quality of the investigation.

2025 Previously Interviewed Staff (Georgia Department of Corrections): The GDC agency PREA coordinator was asked if the agency takes corrective action on an ongoing basis based on these data?

The PREA coordinator indicated, in an interview, that data is collected at least monthly from every facility in GDC. This information enables the PREA Unit to analyze the collected data and to identify any issues that may need to be addressed. Based on the data from the monthly reports and the annual report, the PREA Unit may initiate corrective actions for the agency or for specific prisons or programs.

GDC 2023 Annual PREA Report:

Total Allegations: During the calendar year 2023, there were 819 PREA allegations reported at our GDC operated and contracted facilities. Of those 819 allegations, 369 (45%) were unsubstantiated; 330 (40%) were unfounded; 63 (8%) were deemed not PREA; 57 (7%) were substantiated; and none are pending investigation.

Total Allegations by Type: During calendar year 2023, there were 819 PREA allegations reported at our GDC operated and contracted facilities. Of those 819 allegations, 79 (10%) were Staff-to-Inmate Harassment; 118 (14%) were Staff-to-Inmate Abuse; 172 (21%) were Inmate-to-Inmate Harassment; and 450 (55%) were Inmate-to-Inmate Abuse.

NOTE: The county facilities are included in GDC 2023 Annual PREA Report.

115.88 (b)

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

The auditor reviewed the Georgia Department of Corrections 2023 Annual PREA Report. The report incident-based sexual abuse data is aggregated annually and approved by the agency. On page 7 of the report the agency has provided a comparison with previous years 2013 - 2023.

115.88 (c)

The agency's report shall be approved by the agency heard and made readily available to the public through its website or, if it does not have one, through other means.

The reviewed of the Georgia DOC 2023 PREA Annual report identified initiatives at each GDC facility to improve and enhance the facility and agency's approach to prevention, detection, responding and reporting sexual abuse and sexual harassment. The 2023 annual report included the following:

- Introduction
- Total Allegations (Charts)
- Allegation Types and Dispositions
- Comparison with Previous Years: 2013 - 2022
- Substantiated Cases Per Year Chart
- Allegations Versus Population Chart
- Sexual Abuse Response Team (SART) Training
- PREA Focused Initiatives
- Partnered Initiatives
- Physical Plant Improvements
- Corrective Actions Taken/Recommendations

Annual reports are posted on the Georgia Department of Corrections website and have been approved by the agency.

115.88 (d)

The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

The auditor reviewed the Georgia Department of Corrections 2023 Annual PREA

	Report. The report redacts specific information from the reports that may cause specific threats to the safety and security. 2025 Previously Interviewed Staff (Georgia Department of Corrections): The agency PREA coordinator was asked, what types of material are typically redacted from the annual report? Does the agency indicate the nature of material redacted? The PREA coordinator indicated that personally identifying information is redacted from the annual reports. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Facility PREA Policy • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, VI. Record Retention of Forms Relevant to this Policy • Pre-Audit Questionnaire Screven County Prison 115.89 (a) The agency shall ensure that data collected pursuant to standard 115.87 are securely retained. Georgia Department of Corrections makes all aggregated sexual abuse data from all facilities under its direct control and private facilities with whom its contracts, readily available to the public through the Georgia GDC Website. GDC policy requires all reports are securely retained and maintained for at least 10 years after the date of the initial collection unless the Federal, State, or local laws require otherwise. Policy: GDC Policy 208.06, Prison Rape Elimination Act-PREA, Sexual Abusive Behavior Prevention and Intervention Program, VI. Record Retention of Forms Relevant to this Policy, requires that the retention of PREA related documents and investigations will be securely retained and made in accordance with policy in VI.1, Sexual abuse data,

files and related documentation requires they are retained at least 10 years from the date of the initial report.

The PREA Compliance Manager will ensure that data collected pursuant to standard 115.87 are securely retained. The annual report regarding all sexual abuse data from the department will be available to the public through the department's public website. The report consists of numbers only and will omit personal identifiers or specific facilities. Department administrators and the PREA Compliance Manager will assist as requested in the submission of data for this report. The PREA Coordinator will maintain sexual abuse data collected pursuant to standard 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

115.89 (b)

The agency shall 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.

Review of the Georgia Department of Corrections website indicated that the agency makes all aggregated sexual abuse data to include the annually reports. Reports are published on the website for public access.

Department of Corrections website and the facility website, before making the data available, the facility removes all personal identifiers. Some information may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the institution, but it will be indicated the nature of the material redacted.

115.89 (c)

Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.

Review of the Georgia Department of Corrections website indicated that the agency removes all personal identifiers for the annual report before publishing on the website.

All aggregated sexual abuse data will be readily available to the public at least annually through the Georgia Department of Corrections website. Before making the data available, the facility removes all personal identifiers. Some information may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the institution, but it will be indicated the nature of the material redacted.

115.89 (d)

The agency shall 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. Criminal investigations data, files and related documentation is required to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years or 10 years from the date of the initial report, whichever is greater. Administrative investigation data files and related documentation is to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or 10 years from the date of the initial report, whichever is greater. Conclusion: The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility, facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	--

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • Notices of PREA Audit – Upload Notices Pics of Postings • Facility Last DOJ PREA Certified Audit Report • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, K. Audits Provisions: 115.401 (a) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or a private organization on behalf of the agency, is audited at least once. A review of the agency’s website provided PREA audit reports according to cycles. The facility PREA reports are included on the agency website. 115.401 (b) During each one-year period starting on August 20, 2013, the agency shall ensure that at least one third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

A review of the agency's website provided PREA audit reports according to cycles. The facility PREA reports are included on the agency website.

115.401 (c)

The Department of Justice may send a recommendation to an agency for an expedited audit if the department has reason to believe that a particular facility may be experiencing problems relating to sexual abuse. The recommendation may also include referrals to resources that may assist the agency with PREA related issues.

The PREA coordinator and the facility acknowledge this provision.

115.401 (d)

The Department of Justice shall develop and issue an audit instrument that will provide guidance on the conduct of and contents of the audit.

The auditor uses the required Prison Rape Elimination Act (PREA) Audit Prison and Jails standards audit instrument to enter collected information online, 28 C.F.R Part 115 Docket No. OAG-131 RIN 1105-AB34 May 17, 2012.

115.401 (e)

The agency shall bear the burden of demonstrating compliance with the standards.

The PREA coordinator and facility acknowledge this provision. The agency and the facility provided requested information to bear the burden of demonstrating compliance with the standards.

115.401 (f)

The auditor shall review all relevant agency-wide policies, procedures, reports, internal and external audits, and accreditation for each facility type.

The auditor provided the facility the Georgia County Correctional Institute Documentation Checklist. The checklist is organized by standards to help the facility thru the pre-audit, onsite and post audit phase and to provide the requested documentation by auditor.

115.401 (g)

The audits shall review, at a minimum, a sampling of relevant documents and other records and information for the most recent one-year period.

The auditor sample size is based on the number of residents at the facility on the first day. The random staff sample size is based on a minimum of twelve or more based on interview outcomes and facility size.

115.401 (h)

The auditor shall have access to, and shall observe, all areas of the audited

facilities.

On the first day of the audit after the entrance conference, the auditor conducted an inspection of the facility. It was requested that when the auditor paused to speak to a resident or staff, that staff on the tour to please step away so the conversation might remain private. This request was well respected.

During the site review the auditor made numerous observations, including the posting of Notices of PREA Audits, PREA Related Posters, and TIP Posters (with phone numbers to call to report any concern or condition), notices advising inmates that female staff routinely work in the facility, locations of showers and privacy issues, bathrooms, medical/grievance boxes, requests forms and boxes for requests, configuration of living units, capacities of dorms, observations of blind spots, camera deployment, the use of mirrors to mitigate blind spots, staffing levels, supervision of inmates, accessibility to telephones and instructions for using the phones to report sexual abuse, Inmate kiosk system, main control room, etc..

115.401 (i)

The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

The auditor provided the facility the Georgia County Correctional Institute Documentation Checklist. The checklist is organized by standards to help the facility thru the pre-audit, onsite and post audit phase and to provide the requested documentation by auditor.

The PREA coordinator and the facility provided the auditor all relevant documents as requested.

115.401 (j)

The auditor shall retain and preserve all documentation relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.

The auditor has uploaded additional information in OAS. Other reviewed information will be maintained for the required timeframe of 15 months before destruction, if the facility does not appeal any decisions.

115.401 (k)

The auditor shall interview a representative sample of inmates, residents, and detainees, and of staff, supervisors, and administrators.

Staff Interviewed:

The auditor conducted interviews with the following agency leadership staff, and are counted in the totals. Below are the staff interviewed previously, by the lead auditor, associate, on-site, and by telephone:

- Georgia Department of Corrections Staff (5 – Previously Interviewed)
- Specialized Staff (12)
- Randomly Selected Staff (6)
- Informal Interviews (12)

The auditor requested and was provided a staff roster with non-security and security staff.

Interviews with random, informal and specialized staff confirmed that the facility's staff understood the agency's position regarding the Prison Rape Elimination Act (PREA). Random and specialized staff were all knowledgeable about their roles in the prevention, reporting, and detection of sexual abuse and sexual harassment, and their responsibilities in the event of a PREA related incident, particularly as a first responder.

115.401 (l)

The auditor shall be permitted to conduct private interviews with inmates, residents, and detainees. Inmates Interviewed:

The geographic diversity was achieved by the total number of housing units, number of housing units by gender, and the number of interviews conducted in each housing unit. Adequate gender representation was considered when the facility has both male and female inmates.

- Randomly Selected Inmates: (20)

The auditor requested and was provided a roster of inmates listed by living units.

- Informally Interviewed Inmates (10)
- Targeted Inmates (0)

All inmates that were formally interviewed were asked the required random interview questions provided by the National PREA Resource Center.

Inmates were respectful and cooperative with auditor and the associate auditor. All inmates wore masks and maintained social distancing practices during the formal interviews. The inmate's uniforms were clean, and their hygiene satisfactory.

Interviews with inmates revealed that they understand PREA safeguards and the facility's zero-tolerance policy. Comprehensive resident PREA education is provided in written form during resident orientation, and through the handbook, kiosks, personal instruction, videos, and posters.

115.401 (m)

Inmates, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were

communicating with legal counsel.

During the pre-audit period, the facility received instructions to post the required PREA Audit Notice of the upcoming audit prior to the on-site visit for confidential communications. The facility posted the notices in English and Spanish. The auditor received email, pictures confirming the posted notices and observed the posted notices on-site.

There was no communication from an inmate or staff. Staff interviews indicated that residents are permitted to send confidential information or correspondence in the same manner as if they were communicating with legal counsel.

115.401 (n)

Auditors shall attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.

The auditor reached out to the following organizations:

- Just Detention International (JDI) – is a health and human rights organization that seeks to end sexual abuse in all forms of detention. Founded in 1980, JDI is the only organization in the U.S. – and the world – dedicated exclusively to ending sexual abuse behind bars. They hold government officials accountable for prisoner rape; challenge the attitudes, and misconception that enable sexual abuse to flourish; and make sure that survivors get the help they need.

Contact: National Sexual Violence Resources Center (NSVRC) /2101 N. Front Street Governor's Plaza North, building #2 Harrisburg, PA 17110. The facility will utilize the emergency rooms at local hospital for SANE, but the facility updated their MOU for advocacy services with Statesboro Regional Sexual Assault Center.

The facility provided a copy of the following MOUs:

Sexual Assault Victim Advocacy Agreement:

The Screven County Prison is requesting the services of Statesboro Regional Sexual Assault Center, to provide Victim Advocacy Services for issues related to the Prison rape Elimination Act (PREA) in the event those services are needed.

As a member of the Rape, Abuse & Incest National Network and a Georgia Criminal Justice Coordinating Council certified victim assistance agency, Statesboro Regional Sexual Assault Center, may receive hotline crisis calls from returning citizens housed at the Screven County Prison.

Additionally, Advocacy services may be provided at an area hospital's emergency services by Statesboro Regional Sexual Assault Center, if the returning citizen is there for a Sexual Assault Forensic Medical, and Evidentiary Examination.

Conclusion:

The Auditor uses a triangulation approach, by connecting the PREA facility documentation, agency policies, on-site observations, site review of the facility,

	facility practices, interviewed staff and residents, local and national advocates and online PREA Audit: Pre-Audit Questionnaire to make determinations. Based on analysis, the facility is compliant with all provisions in this standard.
--	---

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Supporting Documents, Interviews and Observations: • GDC Policy 208.6. Prison Rape Elimination Act-PREA, Sexually Abuse Behavior, Prevention and Intervention Program, K. Audits • Formal & Informal Interviews 115.403 (a) Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review. The auditor certified that are no conflict of interest. 115.403 (b) Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards. The auditor’s report stated whether agency wide policies and procedures comply with relevant PREA standards. 115.403 (c) For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings: Exceeds Standards, Meets Standards; Or Does Not Meet Standard. The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level. The auditor has assigned a finding to each standard. 115.403 (d) Audit reports shall describe the methodology, sampling sizes, and basis for the auditor’s conclusions about each standard provision for each audited facility and shall include recommendations for any required corrective action. The auditor uses a triangular approach, by connecting the PREA facility documentation, agency policies, on-site observation, site review of the entire facility and complex, determination of facility practice, interviewed staff and inmates, local

and national advocates, etc. to make determinations for each standard. Each standard and/or provision is designed with documentation reviewed, online PREA Audit: Pre-Audit Questionnaire, overall findings, and interview results.

The auditor is using the stylistic rules for the Field Training Program (FTP) Auditor Trainee Report Writing Reference Manual as best practices.

The auditor sample size is based on the number of residents at the facility on the first day. The random staff sample size based on a minimum of twelve or more based on interview outcomes and facility size.

115.403 (e)

Auditor shall redact any personally identifiable inmate or staff information from their reports but shall provide such information to the agency upon request and may provide such information to the Department of Justice.

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

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
--	-----

Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
---	-----

115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
--	-----

Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
--	-----

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
--	-----

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
---	-----

Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
---	-----

115.12 (a) Contracting with other entities for the confinement of inmates

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

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
---	----

	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.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	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	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

	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?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

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

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
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.)	na
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.)	na
	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.)	na
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.)	yes
	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 inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

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

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious 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.)	
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	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	no
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	no

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	no
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	no
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	no
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	no
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	no
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	no

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	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.)	na
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	na

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
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.)	na
	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.)	na
	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.)	na
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.)	na
	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.)	na
	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.)	na
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.)	na
	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.).	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
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.)	na
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,	na

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

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

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

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

	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?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

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

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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
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	yes

	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?	
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	yes

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

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
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	yes

	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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	Audit contents and findings	

(f)	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) yes