

PREA AUDIT REPORT INTERIM FINAL

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



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

Auditor Information			
Auditor name: Walter Sipple			
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Email: waltersipple@comcast.net			
Telephone number: 843-323-8851			
Date of facility visit: July 14-15, 2015			
Facility Information			
Facility name: Turner Residential Substance Abuse Treatment Center			
Facility physical address: 514 South Railroad Avenue, Sycamore, Georgia 31790			
Facility mailing address: <i>Same as above</i>			
Facility telephone number: 229-567-4301			
The facility is:	<input type="checkbox"/> Federal	<input checked="" type="checkbox"/> State	<input type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input checked="" type="checkbox"/> Prison	<input type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Gwen Meriweather			
Number of staff assigned to the facility in the last 12 months: 2 out of a total of 60 staff assigned			
Designed facility capacity: 232			
Current population of facility: 200			
Facility security levels/inmate custody levels: Medium			
Age range of the population: 18-70			
Name of PREA Compliance Manager: Jamaine Nixon		Title:	Counselor
Email address: Jamaine.Nixon@gdc.ga.us		Telephone number:	229-567-4301x221
Agency Information			
Name of agency: Georgia Department of Corrections			
Governing authority or parent agency: <i>State of Georgia</i>			
Physical address: State Office South, 300 Patrol Road, Forsyth, Georgia 31029			
Mailing address: <i>Same as above</i>			
Telephone number: 478-992-5101			
Agency Chief Executive Officer			
Name: Homer Bryson		Title:	Commissioner
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Agency-Wide PREA Coordinator			
Name: Sharon Shaver		Title:	PREA Coordinator
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AUDIT FINDINGS

NARRATIVE:

The Prison Rape Elimination Act audit of the Turner Residential Substance Abuse Treatment Facility, located in Sycamore, Georgia, was conducted from July 14 to July 15, 2015. The audit was performed by Walter Sipple, United States Department of Justice Prison Rape Elimination Act independent certified auditor, and no others, operating as an independent contractor with no conflict of interest. The Turner Residential Substance Abuse Treatment Facility is an adult male confinement facility and part of the Georgia Department of Corrections. The facility operates under the jurisdiction of the State of Georgia and is classified as a medium security level, 232 detainee capacity facility. The inmates are called detainees while confined at the Turner Residential Substance Abuse Treatment Facility and are referred as detainees throughout this report. The facility consists of four open style dormitories.

The Georgia Department of Corrections mission statement is as follows: "The department of corrections creates a safer Georgia by effectively managing offenders and providing opportunities for positive change". The Turner Residential Substance Abuse Treatment Facility mission statement is as follows: "The Georgia Department of Corrections, in partnership with Spectrum Health Services provides a highly structured, therapeutic substance abuse treatment program for state probationers with chronic substance abuse and dependence issues and chronic recidivistic tendencies in order to return to society a program graduate who is a law abiding, self-supporting, pro-social citizen, and thereby reducing recidivism thusly providing a safer and more secure environment for the citizens of Georgia." Wilcox State Prison is the host facility for the Turner Residential Substance Abuse Treatment Facility. Wilcox State Prison is located in Abbeville, Georgia, which is approximately 35 miles from the Turner Residential Substance Abuse Treatment Facility. Wilcox State Prison provides coordinated assistance and support to the facility when needed.

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

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

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

staff and detainees during the on-site portion of the Prison Rape Elimination Act audit. Interviews were conducted with outside agencies, to include but not limited to, Just Detention International, Behavioral Health Services of Tifton, Georgia, and the Crisp Regional Hospital located in Cordele, Georgia.

An objective random sampling of staff, volunteer, detainee, and contractor interviews was selected from a series of lists presented to the auditor by the facility. Last names were randomly selected from an alphabetically ordered list in increments of five. A total of 11 agency and facility staff were interviewed per random sampling from the auditor. A total of 22 detainees were interviewed with a minimum of ten percent from each housing unit per random sampling from the auditor, along with special category detainees and a selection of detainees identified during the in-take screening process.

An exit interview was conducted at the end of the on-site visit by the auditor with the facility superintendent, warden from Wilcox State Prison, Prison Rape Elimination Act compliance manager, chief of security, facility nurse, secretary/correctional officer, and agency Prison Rape Elimination Act coordinator. The agency and facility staff were very helpful throughout the audit process and actively engaged in the pursuit of facility compliance with all of the Prison Rape Elimination Act standards.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Turner Residential Substance Abuse Treatment Facility is located near a rural residential area at 514 South Railroad Avenue, in Sycamore, Georgia. The small community of Sycamore is located in a rural part of Georgia. The Turner Residential Substance Abuse Treatment Facility was originally built in 2004 and opened for inmates in 2006 as a pre-release center. In 2012, the facility was turned into a six-month residential substance abuse treatment facility targeting high risk; high need offenders with a history of substance abuse. The facility has a rated bed capacity of 232 beds, with a current population listed at the time of the on-site portion of the audit of 200 detainees. The average detainee daily population is approximately 200. The general population detainee housing units consist of 4 open style dormitories with approximately 57 detainees per dormitory. The facility has 4 isolation or segregation cells. The facility houses predominately medium classification custody detainees.

The Turner Residential Substance Abuse Treatment Facility offers detainees a variety of programs such as general education diploma, individual and group counseling in a therapeutic community setting, general recreation, and various worship services.

During the on-site phase of the Prison Rape Elimination Act, the auditor observed detainees actively engaged in education, vocation, counseling, and work programs. The auditor also visited the facility after hours to observe facility operations and interview after hours staff. The facility had a security fence surrounding the entire compound with adequate lighting. The substance abuse treatment program is operated, via contract, by Spectrum Health Services staff.

SUMMARY OF AUDIT FINDINGS:

The auditor conducted a thorough facility-wide audit of Turner Residential Substance Abuse Treatment Facility from July 14-15, 2015. The facility reported 2 allegations of detainee sexual abuse and sexual harassment during the past 12 months that were investigated. Both were handled administratively as unfounded. No detainees requested to be interviewed by the auditor. No outside of the agency or facility contact was received by the auditor during the audit process.

The auditor was impressed with the superintendent's expertise, attention to detail, and commitment in ensuring the Turner Residential Substance Abuse Treatment Facility's compliance with all of the Prison Rape Elimination Act standards. The secondary documentation provided to the auditor as part of the audit process was noteworthy. The facility had an impressive video monitoring system installed with additional monitoring coverage planned. The facility staff works well together as a cohesive team in fulfilling the mission of the facility and has the additional support from Wilcox State Prison if needed. The auditor also noted how well the facility kitchen and dining area was managed along with the detainee housing units. The cognitive behavioral therapy program was impressive and well received by the detainees. The facility staff and detainees were helpful throughout the audit process. Based on the auditor's individualized review of the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies, procedures, practice, staff interviews, detainee interviews, released detainee interviews, and feedback from outside agencies, the Turner Residential Substance Abuse Treatment Facility is in compliance with 100%, or all 41, Prison Rape Elimination Act standards, along with one standard being not applicable. The auditor was thoroughly impressed with the facility's multi-faceted screening process for risk of sexual victimization and abusiveness along with the use of the screening information and determined that the facility exceeded both standards (115.41 and 115.42).

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

Number of standards exceeded: 2.

Number of standards met: 39.

Number of standards not met: 0.

Number of standards not applicable: 1.

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

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

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

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

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

and the auditor was provided a copy during the pre-audit phase of the audit. Turner Residential Substance Abuse Treatment Facility staff acknowledged an understanding of the zero tolerance policy. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies in all material ways with the standard for the relevant review period. The auditor was impressed with the level of expertise of the agency Prison Rape Elimination Act coordinator.

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

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

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

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

PREA Standard 115.13: Supervision and monitoring.

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

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

- 1) Generally accepted detention and correctional practices;

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

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

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

The agency and facility is in the first year cycle of becoming a Prison Rape Elimination Act compliant facility. The auditor reviewed agency policy (policy 208.06). The Turner Residential Substance Abuse Treatment Facility provided the auditor with documentation of staff unannounced rounds along with log entry verification. The Turner Residential Substance Abuse Treatment Facility reported on the pre-audit questionnaire that no youthful detainees have been confined and that the average daily population of detainees is 200. The facility has a good detainee to staff ratio and the auditor observed an above average staff presence throughout the facility where detainees have access. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility are in compliance with the standard.

PREA Standard 115.14: Youthful inmates.

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

Auditor comments: The Turner Residential Substance Abuse Treatment Facility does not confine youthful detainees. The Georgia Department of Corrections policy (208.06) is in compliance with the standard.

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

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

Auditor comments: The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility has a written policy (208.06) that prohibits any cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. Policies and procedures are in place that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures require staff of the opposite gender to announce their presence when entering a detainee housing unit.

The agency and facility has policies and procedures where they do not search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. If the detainee's genital status is unknown, it is determined during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

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

The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility is in compliance with the Prison Rape Elimination Act standard as confirmed by the auditor and meets the standard.

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

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

Auditor comments: The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility ensures that detainees with disabilities, including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

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

The auditor specifically interviewed Spanish speaking detainees during the on-site portion of the Prison Rape Elimination Act audit. The Spanish speaking detainees appeared to be fully integrated throughout the facility. The auditor interviewed two detainees identified by facility staff as having an intellectual disability and the auditor confirmed his equal access and integration to the facility. The auditor also interviewed detainees with physical disabilities and confirmed ease of access and integration throughout the facility. All of the detainees interviewed were focused on pre-release plans.

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

PREA Standard 115.17: Hiring and promotion decisions.

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

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

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

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

The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (agency policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The auditor interviewed the facility human resources manager and was impressed with her experience and background. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.18: Upgrades to facilities and technologies.

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

Auditor comments: The auditor interviewed the Turner Residential Substance Abuse Treatment Facility superintendent and she confirmed that when installing or updating any form of video monitoring system, electronic surveillance system, or other monitoring technology, consideration is made to how such technology may enhance the facility's ability to protect detainees from sexual abuse. The facility has had upgrades and expansions to the video monitoring system within the past 12 months.

The facility installed several new cameras and video monitors within the past 12 months to increase staff visibility throughout the detainee dorms and facility. The auditor interviewed the kitchen manager and was impressed with how she managed the area and detainees under her supervision. The upgrades to the video monitoring system greatly enhanced several areas of the facility.

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

PREA Standard 115.21: Evidence protocol and forensic medical examination.

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

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

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

The Georgia Department of Corrections offers all victims of sexual abuse access to forensic examinations which are performed by qualified sexual assault nurse examiners from Georgia Regents University without financial cost. The Wilcox State Prison also provides assistance if needed. The auditor specifically interviewed first responders during the on-site portion of the Prison Rape Elimination Act audit process. The auditor was impressed with the level of expertise of the facility registered nurse.

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

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

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

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

The facility reported two allegations that resulted in administrative investigations during the past 12 month period. The auditor reviewed the agency and facility policies and procedures (policy 208-06); observed agency practices; reviewed data provided by the facility staff; and interviewed detainees and staff during an on-site visit and tour of the facility. Based on the above listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.31: Employee training.

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

- Does Not Meet Standard (requires corrective action)

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

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

The auditor interviewed a random selection of facility staff during the on-site portion of the Prison Rape Elimination Act audit and confirmed staff training in accordance with the standard. The auditor specifically interviewed recently employed staff along with more senior staff and both acknowledged the various categories of training required by the standard. The auditor was impressed with the enthusiasm of the newly employed staff specifically in reference to compliance with the Prison Rape Elimination Act standards. The facility staff work well together in fulfilling the mission and the audit process confirmed a thoroughly trained and motivated staff. The superintendent confirmed with the auditor during the interview process that she manages a thoroughly trained and motivated staff. The Georgia Department of Corrections and Turner Residential Substance Abuse Treatment Facility meet the requirement of the standard.

PREA Standard 115.32: Volunteer and contractor training.

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

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

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

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed volunteers and contractors during an on-site visit and tour of the facility. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard at this time.

PREA Standard 115.33: Detainee Education.

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

Auditor comments: The auditor was impressed with the availability of detainee informational material that was posted throughout the facility during the on-site visit phase of the audit process. Prison Rape Elimination Act detainee education options were duplicative to include but limited to postings on walls throughout the facility, brochures, and videos. During the intake process, detainees receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

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

The Prison Rape Elimination Act coordinator utilizes a detainee video as part of the training curriculum. The auditor confirmed Prison Rape Elimination Act related education and training within a very short period of arrival time. The auditor also interviewed intake staff and was impressed with the amount of experience the intake officer had.

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

PREA Standard 115.34: Specialized training: Investigations.

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

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

In addition to the general Prison Rape Elimination Act training provided to all employees of the Georgia Department of Corrections, in house investigators receive training on conducting investigations in confinement settings. The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation

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

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

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

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

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

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed detainees and staff during an on-site visit and tour of the facility. The Turner Residential Substance Abuse Treatment Facility provided the auditor with certificates of specialized training from the National Institute of Corrections online program to confirm compliance with the standard along with the specialized training received from the medical contract agency. The auditor was impressed with the experience of the facility nurse during the interview process. She explained all of her answers in a very thorough manner. The auditor also interviewed contract staff from Spectrum Health Systems, Inc. The auditor was impressed with the cognitive behavioral therapy program offered to detainees. All of the detainees interviewed by the auditor were very receptive to the program. The agency and facility meets the standard and complies with the standard for the relevant review period.

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

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

Auditor comments: Based on interviews with random detainees and intake staff, all detainees are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other detainees or sexually abusive toward other detainees. Intake screening shall ordinarily take place within 72 hours of arrival and more often is completed within 24 to 48 hours of arrival. Such assessments shall be conducted using an objective screening instrument. The intake screening shall consider, at a minimum, the following criteria to assess detainees for risk of sexual victimization:

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

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

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

The auditor interviewed the facility intake staff and was thoroughly impressed with their level of expertise with the process as well as dormitory assignment considerations. The agency and facility screening process for risk of victimization and abusiveness is multi-faceted. The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed detainees and staff during an on-site visit and tour of the facility. The facility provided the auditor a copy of the agency intake and classification form confirming compliance with the standard. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility exceeds the standard for the relevant review period.

PREA Standard 115.42: Use of screening information.

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

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

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

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

the auditor with documentation of the agency intake and classification form. The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility exceeds the standard for the relevant review period. The auditor was impressed with the level of experience and expertise of the intake staff.

PREA Standard 115.43: Protective custody.

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

Auditor comments: The auditor confirmed that the agency and facility has a policy for protective custody. Detainees 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 detainee in involuntary segregated housing for less than 24 hours while completing the assessment. No detainee has been placed in involuntary segregation. The auditor interviewed and reviewed the agency and facility segregated housing unit policies and procedures along with documentation examples and form reviews.

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

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

PREA Standard 115.51: Inmate reporting.

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

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

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

PREA Standard 115.52: Exhaustion of administrative remedies.

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

Auditor comments: The agency does not require a detainee to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The agency ensures that a detainee who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Third parties,

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

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

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

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

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

The auditor specifically tested the facility detainee access to outside confidential services and interviewed facility detainees to test understanding of the process. The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. Specifically, the auditor interviewed the director of

the local rape crisis center, Lily Pad of Albany, along with Behavioral Health Services of Tifton, Georgia. The auditor was impressed with the outside agencies. The Lily Pad of Albany offers an exceptional level of services. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meet the standard.

PREA Standard 115.54: Third-party reporting.

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

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

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

PREA Standard 115.61: Staff and agency reporting duties.

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

Auditor comments: Based on a review of Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policy, procedure, and practice along with staff interviews, the agency requires all staff to report immediately and according to agency policy any knowledge,

suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in any facility, whether or not it is part of the agency; retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

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

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

The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. Specifically, the auditor interviewed several facility staff to test understanding of the requirements for reporting. Based on the above listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.62: Agency protection duties.

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

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

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

PREA Standard 115.63: Reporting to other confinement facilities.

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

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

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

PREA Standard 115.64: Staff first responder duties.

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

Auditor comments: Based on Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policy and procedures along with agency staff and detainee interviews during the on-site portion of the audit, upon learning of an allegation that an detainee was sexually abused, the

first staff member to respond to the report shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

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

The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed detainees and staff during an on-site visit and tour of the facility. Specifically, the auditor interviewed a random sampling of facility staff to test knowledge and understanding of the reporting process in accordance with the standard. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.65: Coordinated response.

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

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

Spectrum Health Systems has a total of 11 contract staff assigned to the Turner Residential Substance Abuse Treatment Facility and the auditor was impressed with how they coordinate and work effectively with the facility staff. During the on-site portion of the audit, communication between different

Departments and organizations seemed effective. Staff and contractors knew who to report to for further guidance and communication if they needed questions answered.

The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed detainees and staff during an on-site visit and tour of the facility. Specifically, the auditor interviewed a random sampling of staff to test knowledge and understanding of the facility's coordinate response. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

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

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

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

The Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility has no collective bargaining as verified with the agency during the on-site portion of the audit. The auditor reviewed the agency and facility policies and procedures (policy 208.06).

PREA Standard 115.67: Agency protection against retaliation.

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

Auditor comments: The facility has a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with investigations from retaliation by other detainees or staff.

Specifically, the facility appointed a retaliation monitor charged with tracking any form of retaliation. The agency employs multiple protection measures, such as housing and cell changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

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

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

PREA Standard 115.68: Post-allegation protective custody.

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

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

The auditor specifically toured the single cell segregated housing area. The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.71: Criminal and administrative agency investigations.

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

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

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

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

evidence where feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The agency retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. The Turner Residential Substance Abuse Treatment Facility reported no substantiated allegations of conduct that appeared to be criminal being referred for prosecution during the review period. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.72: Evidentiary standard for administrative investigations.

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

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

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

PREA Standard 115.73: Reporting to inmates.

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

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

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

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

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

PREA Standard 115.76: Disciplinary sanctions for staff.

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

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

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

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

PREA Standard 115.77: Corrective action for contractors and volunteers.

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

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

The auditor reviewed the agency and facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. The Turner Residential Substance Abuse Treatment Facility reported no contractors or volunteers were reported to law enforcement for engaging in sexual abuse with detainees within the past 12 month period

from the audit. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.78: Disciplinary sanctions for inmates.

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

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

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

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

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

Auditor comments: If the medical and mental health screening indicates that a detainee has

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

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

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

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

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

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

The auditor noted that the Turner Residential Substance Abuse Treatment Facility has access and assistance from the host facility, Wilcox State Prison, when needed. The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Correction and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

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

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

Auditor comments: The Georgia Department of Corrections and the Helms Facility offers medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse in the facility. The evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. The agency and facility provides such victims with medical and mental health services consistent with the community level of care. Detainee victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The auditor interviewed the nursing staff and counselor during the on-site portion of the Prison Rape Elimination Act audit. The auditor reviewed the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility policies and procedures (policy 208.06); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed detainees and staff during an on-site visit and tour of the facility. Based on the above listed information, the Georgia Department of Corrections and the Turner Residential Substance Abuse Treatment Facility meets the standard and complies with the standard for the relevant review period.

PREA Standard 115.86: Sexual abuse incident reviews.

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

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

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

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

PREA Standard 115.87: Data collection.

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

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

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

PREA Standard 115.88: Data review for corrective action.

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

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

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

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

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

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

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


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

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

AUDITOR CERTIFICATION:

I certify that:

- √ The contents of this report are accurate to the best of my knowledge.
- √ No conflict of interest exists with respect to my ability to conduct an audit of the Georgia Department of Corrections or the Turner Residential Substance Abuse Treatment Facility under review, and
- √ I have not included in the final report any personally identifiable information (PII) about any detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.

Walter Sipple		July 27, 2015
Auditor Signature		Date