PREA AUDIT: AUDITOR'S SUMMARY REPORT ADULT PRISONS & JAILS

	□ Int	erim X Fina	al Report		
Auditor Information					
Auditor name: Katherine Brown					
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Email: kbrown2828@yahoo.com					
Telephone number: 727-470-4123					
Date of facility visit:	March 16, 2016				
, Date report submitted:	-				
Facility Information					
Name of facility:	West Central Integrated Treatment Facility				
Physical address:	1070 County Farm Road Zebulon, GA 30295				
Telephone number:	770-567-0631				
West Central	Military	County	🗆 Feder	ral	
Integrated Treatment	Private for profit	🗆 Municipal	X State		
Facility is:	□ Private not for profit				
Facility Type:	🗆 Jail 🛛 X Pr	ison			
Name of facility's Chief Executive Officer: Mizell Davis Title: Superintenden					
Number of staff assigned to West Central Integrated Treatment Facility in the last 12 months: 50					
Designed facility capacity: 194					
Current population of facility: 150					
Facility security levels/detainees custody levels: Minimum - Medium					
Age range of the population: 19-60					
Name of PREA Complian		net Miller		Title:	Correctional Officer
Email address:	Jar	net.miller@gdc.g	a.gov	Telephone #	770-567-0631
Agency Information Name of agency: Georgia Department of Corrections					
Governing authority or	Georgia Department of Corrections				
parent agency:	Georgia Department of Corrections				
Physical address:	300 Patrol Road, Forsyth, GA 31029				
Mailing address:	N/A				
Telephone number:	478-992-5211				
Agency Chief Executive Officer					
Name:	Homer Bryson	Title:	Commissioner	r	
Email address: Homer.Bryson@gdc.ga.gov number			4 78-992-5101		
Agency-Wide PREA Coordinator					
Name:	Sharon Shaver	Title:	Agency PREA Coordinator		
Email address: Sharon.S	Shaver@gdc.ga.gov Telephone # 678-628-3128				

AUDIT FINDINGS

NARRATIVE:

The audit of West Central Integrated Treatment Facility was conducted on March 16, 2016 by Katherine Brown, Certified PREA auditor. The areas toured were a total of five housing units. There are four general population units and one administrative detention/segregation unit. I toured each of the general population unit's, administrative segregation plus the kitchen, laundry, programs area, and work areas.

An entrance meeting was held with facility staff. The following people were in attendance: Mizell Davis, Superintendent; Marsha Dawson, Chief of Security/SART Investigator; Benjamin Ford, Superintendent; Officer Janet Miller, Compliance Manager; Counselor Sandra Baugh, SART Leader; Lisa Lowry, Medical; Officer Qultiny Wilkins, Retaliation Monitor; Officer Ashlin Spencer Victim Advocate; Katherine James-Brown, Business Manager; Officer Veronica King, Sanitation Officer; Officer Lakenyia Williams, Key and Tool Officer; Theresa Bogan, Superintendent Secretary and Chanala Latson, Personnel.

Following the entrance meeting I toured the West Central Integrated Treatment Facility on March 15 from 1:45 to 2:30. On the tour with me was Mizell Davis, Superintendent; Marsha Dawson, Chief of Security; Benjamin Ford, Superintendent; Officer Janet Miller, Compliance Manager; Officer Veronica King, Sanitation; Lakenyia Williams, Key and Tool Officer and Sgt. Gwendolyn Green, Shift Supervisor. On the tour I noticed facility notices had been placed in all living units, activity areas, visitation and front lobby, these notices were posted on February 13, 2016. Cross gender announcements were made in all living areas.

I received the Pre Audit Questionnaire and documentation on February 11, 2016 and had ample time to review the documentation provided and request additional documentation or clarification.

I asked for an alpha listing of all detainees housed at West Central Integrated Treatment Facility and randomly selected 11 detainees as well as any detainees who were limited English speaking or had hearing/vision impairment to be interviewed. There was no hearing/vision impairment detainees or Limited English speaking detainees. I also asked for any detainees who were transgender/intersex, which there was none. I did interview 2 detainees who disclosed sexual victimization during the risk screening. I also asked for a shift roster and randomly selected 7 staff to interview, there are only 3 assigned to a shift. I conducted 12 specialized interviews.

There were 3 sexual assault/harassment allegation cases, all relatively recent (within the past year) 1 substantiated and 2 unsubstantiated.

DESCRIPTION OF FACILITY CHARACTERISTICS:

This center was originally built as a male Probation Detention Center. It was re-missioned in 1996 as a male medium security prison. It was re-missioned in 2002 as a female

Probation Detention Center. It was again re-missioned in 2008 as a female Pre Release Center. In July, 2012 the current mission began as an integrated treatment facility for female probation violators with co-occurring conditions (138 beds) who receive mental health and substance abuse treatment as well as female detainees (46 beds) who support the work mission of West Central Integrated Treatment Facility.

It consists of four open dormitories with bunk beds, housing 46 in each dorm. There are also five isolation/segregation cells.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded: 4

Number of standards met: 37

Number of standards not met:

Number of standards not applicable: 2

§115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A.1; Georgia Organizational Chart; Organizational Chart; memo appointing PREA Compliance Manager and interviews with PREA Coordinator and PREA compliance manager in find they meet this standard.

Georgia Department of Corrections has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlines Georgia Department of Corrections' approach to preventing, detecting, and responding to such conduct.

Georgia Department of Corrections employs or designates an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards.

West Central Integrated Treatment Facility has designated a PREA compliance manager with sufficient time and authority to coordinate West Central Integrated Treatment Facility's efforts to comply with the PREA standards

§115.12 Contracting with other agencies for confinement of detainees

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A.2 and interview with agency's contract compliance manager I find they meet this standard.

All contracts include the entity's obligation to adopt and comply with the PREA standards.

Any new contract or contract renewal provides for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

§115.13 Supervision and monitoring

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A. 3; SOP II. A. 07-0012; Staffing Plan; Shift Roster; Employee Position Budget Status Report; Monthly Phase Census & Certification Report; Annual Review of staffing and interview with Superintendent: PREA Compliance Manager and PREA Coordinator I find they meet this standard.

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

In circumstances where the staffing plan was not complied with, West Central Integrated Treatment Facility documented and justified all deviations from the plan on the shift roster.

Georgia Department of Corrections completes an annual review, in consultation with the PREA coordinator required by § 115.11, to assess, determine, and document whether adjustments are needed. Annual report was reviewed to ensure compliance with this standard.

§115.14 Youthful 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)
- X Not Applicable Standard

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

Based on review of GDOC SOP 208.06 IV A. 4. (a-c,)West Central Integrated Treatment Facility does not house youthful detainees.

§115.15 Limits to cross gender viewing and searches

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A. 5. (a-g); SOP II. B. 01-0013; Moss Group Training – Guidance in Cross Gender Transgender Pat Search's; Signed Acknowledgement; Data Report Officer Certification and Opposite Gender announcement Policy Information Bulletin I find they meet this standard.

West Central Integrated Treatment Facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances. In the event a cross gender search is done West Central Integrated Treatment Facility documents all cross-gender strip searches and cross-gender visual body cavity searches.

West Central Integrated Treatment Facility has policies and procedures 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 detainees housing unit. The male officers do not work the housing units.

While West Central Integrated Treatment Facility has not had any transgender or intersex detainees they have policies in place to address the following:

West Central Integrated Treatment Facility does not search or physically examine a transgender or intersex detainees for the sole purpose of determining the detainees' genital status. If the detainees' genital status is unknown, it is determined during conversations with the detainees, 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. All staff has received training through the Moss Group on how to conduct a proper search of transgender detainees.

Georgia Department of Corrections trains security staff in how to conduct cross-gender patdown 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.

§115.16 Detainees with disabilities and limited English speaking

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A. 6 (a & b); Language Line-Fluent Language Solutions contract; training records; PREA Pamphlet and random detainees and staff interviews I find they meet this standard.

At the time of the audit there were no detainees with disabilities who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities. Processes are in place to provide education to these individuals.

Georgia Department of Corrections takes appropriate steps to ensure 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 Georgia Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

West Central Integrated Treatment Facility does not rely on detainee's interpreters, detainee's readers, or other types of detainee's assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainees' safety. None have been used or required.

§115.17 Hiring and promotion decisions

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A. 7 (a-d); SOP IV. O. 03-0012 and SOP IV. O. 05-0001; Criminal/Driver History Consent Form; Criminal Histories; Pre-Employment Questions; Previous Employer Questions and interview with Human Resource Administrator and review of background checks I find they meet this standard.

Georgia Department of Corrections 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 any criminal justice facility, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above. Georgia Department of Corrections considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees.

West Central Integrated Treatment Facility performs a criminal background records check before enlisting the services of any contractor who may have contact with detainees performs a records check annually on all security staff and every 5 years of current employees and contractors who may have contact with detainees. Reviewed background checks. Starting in January 2017 they are going to start to perform annual background checks on all staff/contractors and volunteers.

§115.18 Upgrades to facilities and technology

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV A. 8. and interview of agency head and superintendent I find the facility meets this standard.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, West Central Integrated Treatment Facility considers how such technology may enhance West Central Integrated Treatment Facility ability to protect detainees from sexual abuse. There have been no substantial expansion or modifications to existing facilities, however due to a PREA assessment 31 mirrors were installed and there are bids for an upgrade of the security camera system. Currently the kitchen has five cameras, this is the only place where cameras are located.

§115.21 Evidence protocol and forensic medical exams

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV B. 1(a-f); SOP IK01-0006; SANE Callout; NIC Certificate for PREA-Behavioral Healthcare for Sexual Assault Victims in Confinement; Sexual Abuse Response Checklist; Procedure for SANE nurse Evaluation/Forensic Collection; GNESA-Sexual Violence Victim Advocacy Training Certificate; Southern Crescent Sexual Assault & Child Advocacy Center handout; NIC Certificate for PREA Healthcare for Sexual Assault Victims in a Confinement Setting and interview with SANE staff and PREA compliance manager.

To the extent West Central Integrated Treatment Facility is responsible for investigating allegations of sexual abuse; West Central Integrated Treatment Facility follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions

West Central Integrated Treatment Facility offers all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations are be performed by Sexual Assault Nurse Examiners (SANEs) from Southern Crescent Sexual Assault & Child Advocacy Center.

West Central Integrated Treatment Facility makes available to the victim a victim advocate from Southern Crescent Sexual Assault & Child Advocacy Center.

As requested by the victim, a victim advocate from Southern Crescent Sexual Assault & Child Advocacy Center accompanies and supports the victim through the forensic medical examination process and investigatory interviews and are provide emotional support, crisis intervention, information, and referrals.

At the time of release all detainees are given the business card for Southern Crescent Sexual Assault & Child Advocacy Center in case they need these services in the future.

§115.22 Policies to ensure referrals of allegations for investigations

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV B. 1; SOP IK01-0005 and interview with agency head and investigative staf I find they meet this standard.

Georgia Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Review of the investigations files confirms this standard. There have been no cases involving any staff member that reached the level of criminal.

Georgia Department of Corrections has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Georgia Department of Corrections publishes such policy on its <u>www.dcor.state.ga.us</u>. Georgia Department of Corrections documents all such referrals.

§115.31 Employee training

X Exceeds Standard (substantially exceeds requirement of standard)

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

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

Based on review of GDOC SOP 208.06 IV C. 2; In Service Training Records; Sexual Assault/Sexual Misconduct Acknowledgement Statement; PREA Reporting Process; Power Point; Training Roster – Sign In Sheet and interview with random staff I find they exceed in this standard.

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

(1) Its zero-tolerance policy for sexual abuse and sexual harassment;

(2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;

(3) Detainees' 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 training is tailored to the gender of the detainees at West Central Integrated Treatment Facility. The employees receive additional training if the employee is reassigned from a facility that houses only male detainees to a facility that houses only female detainees, or vice versa.

The Superintendent conducted training with all management staff and the Sergeant conducts training at briefing. PREA is discussed by supervisors during the course of everyday business and detainees are even questioned during inspections about PREA. PREA training is covered annually at In Service. Based on the staff interviews I conducted I found the staff to be extremely knowledgeable.

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

§115.32 Volunteer and contractors training

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV C. 3 (a-c) Sexual Assault/Sexual Misconduct Acknowledgement Statement for Supervised Visitors; Power Point Training; Volunteer Training sign In Sheet; Criminal/Driver History Consent Form Volunteer/Contractor; PREA Contractor Acknowledgment Form; Volunteer Training Orientation Checklist; signed Employee Standards of

Conduct Acknowledgment Statement and interview with volunteer and contractors I find they meet this standard.

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

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

West Central Integrated Treatment Facility has documentation confirming that volunteers and contractors understand the training they have received.

§115.33 Detainees education

X Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV C.4; SOP II B18-0001; Sexual Abuse Review Checklist; PREA Sexual Victimization/Aggressor classification Screening; Detainees Orientation Checklist; Detainees Handbook; PREA Orientation Signed Acknowledgment; PREA Detainees Handbook Signed sheet; posters; Video; Case Notes; PREA Pamphlet; PREA Video logbook; Handbook Issue logbook and interview with random detainees and intake staff I find they exceed in this standard.

During the intake process, detainees receive information explaining Georgia Department of Corrections' zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Staff starts explaining PREA to the detainees as soon as they get off the bus. The PREA video is shown when they arrive in intake and again during orientation. This was confirmed during the random detainees interviews.

Immediately upon arrival, West Central Integrated Treatment Facility provides a comprehensive education to detainees either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

West Central Integrated Treatment Facility provides detainee's education in formats accessible to all detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to detainees who have limited reading skills. There is documentation of detainee's participation in these education sessions. The handbook is available in Spanish. All other languages are available by use of the language line. Deaf detainees have access to sign language via the language line. Visually impaired have large print handouts for their use.

§115.34 Specialized training: Investigators

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV C. 5; In Service Training Records; NIC Certificate PREA Investigating Sexual Abuse in a Confinement Setting; GDC Internal Investigations Unit; Compliance Manager Training; PowerPoint Lesson Plan and interview with investigative staff I find they meet this standard.

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

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

§115.35 Specialized training: Medical and mental health care

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of NIC Certificate – PREA Medical Health Care and Lesson Plan PREA Compliance Manager and interview with medical and mental health I find they meet this standard.

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

West Central Integrated Treatment Facility maintains documentation that medical and mental health practitioners have received the training.

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

§115.41 Screening for risk of victimization and abusiveness

X Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV D. 1 (a-h); Victim/Aggressor Classification Rating; PREA Detainees PREA Classification Detail; Case Notes; 30 day review Case Notes and interview with random detainees and intake staff responsible for screening. Only limited staff has access to the risk screening form only Medical, Mental Health and Superintendent; the intake screenings take place immediately upon arrival and based on this I find they exceed in this standard.

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

Intake screenings take place immediately upon arrival at West Central Integrated Treatment Facility.

Reviewed screening form for West Central Integrated Treatment Facility and confirmed they use an objective screening instrument.

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

- (1) Whether the detainees has a mental, physical, or developmental disability;
- (2) The age of the detainees;
- (3) The physical build of the detainees;
- (4) Whether the detainees has previously been incarcerated;
- (5) Whether the detainees' criminal history is exclusively nonviolent;
- (6) Whether the detainees has prior convictions for sex offenses against an adult or child;

(7) Whether the detainees are or are perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

- (8) Whether the detainees has previously experienced sexual victimization;
- (9) The detainees' own perception of vulnerability; and
- (10) Whether the detainees is detained solely for civil immigration purposes.

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

Within 30 days from the detainees' arrival at West Central Integrated Treatment Facility, West Central Integrated Treatment Facility reassesses the detainees' risk of victimization or abusiveness based upon any additional, relevant information received by West Central Integrated Treatment Facility since the intake screening. Mental health staff sees each detainee within 30 days.

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

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

Georgia Department of Corrections implements appropriate controls on the dissemination within West Central Integrated Treatment Facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the detainees' detriment by staff or other detainees.

§115.42 Use of screening information

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV D. 2 (a-d); LOP Facilities Division 208.06; Local Procedure Directive; PREA Sexual Victim/Aggressor Classification Screening and interview with PREA compliance manager and staff responsible for risk screening I find they meet this standard.

West Central Integrated Treatment Facility uses information from the risk screening to decide housing, bed, work, education, 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. Dorms 2-4 are their designated safe dorms and Dorm 1 is used for predators.

West Central Integrated Treatment Facility makes individualized determinations about how to ensure the safety of each detainee.

In deciding whether to assign a transgender or intersex detainees to a facility for male or female detainees, and in making other housing and programming assignments, Georgia Department of Corrections considers on a case-by-case basis whether a placement would ensure the detainees' health and safety, and whether the placement would present management or security problems.

While West Central Integrated Treatment Facility has not had any transgender/intersex detainees they do have policies in place that address the following:

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

A transgender or intersex detainees' own views with respect to her own safety are given serious consideration.

Transgender and intersex detainees are given the opportunity to shower separately from other detainees.

Georgia Department of Corrections does not place lesbian, 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 judgment for the purpose of protecting such detainees.

§115.43 Protective custody

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV D. 3. (a-d) and interview with Superintendent I find they meet this standard.

No detainees have been placed in involuntary segregation housing, however they have policies in place that address the following:

Detainees at high risk for sexual victimization are not placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers.

Detainees placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If West Central Integrated Treatment Facility restricts access to programs, privileges, education, or work opportunities, West Central Integrated Treatment Facility documents the opportunities that have been limited, the duration of the limitation; and the reasons for such limitations.

West Central Integrated Treatment Facility 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 West Central Integrated Treatment Facility clearly documents the basis for West Central Integrated Treatment Facility's concern for the detainees' safety; and the reason why no alternative means of 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. No detainee stays in segregation at this facility for more than 30 days.

§115.51 Detainees reporting

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV E. 1. (a-e) Detainees Handbook; PREA Information Pamphlet and interviews with random staff and detainees.

West Central Integrated Treatment Facility provides multiple internal ways for detainees to privately report 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. Detainees can report to the PREA hotline *7732; write to the State Board of Pardons & Parole and Ombudsmen or send an email on the kiosk to the statewide PREA Coordinator. PREA hotline number was checked to ensure it functions as required.

West Central Integrated Treatment Facility provides at least one way for detainees to report abuse or harassment to a public or private entity or office that is not part of Georgia Department of Corrections, and that is able to receive and immediately forward detainees reports of sexual abuse and sexual harassment to agency officials, allowing the detainees to remain anonymous upon request. Detainees can contact Southern Crescent Sexual Assault & Child Advocacy Center.

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

Georgia Department of Corrections provides a method for staff to privately report sexual abuse and sexual harassment of detainees. Staff can report via the website <u>www.dcor.state.ga.us</u>.

§115.52 Exhaustion of administrative remedies

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDC 208.06 IV. E. 1.2. and SOP IIB05-0001 I find they meet this standard.

No detainee has filed a grievance regarding a PREA related incident.

Georgia Department of Corrections does not impose a time limit on when detainees may submit a grievance regarding an allegation of sexual abuse.

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

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

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

Third parties, including fellow 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 are also be permitted to file such requests on behalf of detainees.

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

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

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

§115.53 Detainees access to outside confidential support services

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on GDC SOP 208.06 IV. E. 3; PREA Pamphlet; MOU Southern Crescent Sexual Assault & Child Advocacy Center; Detainees Handbook and interview with random detainees I find they meet this standard.

West Central Integrated Treatment Facility provides detainees with access to outside victim advocates through Southern Crescent Sexual Assault & Child Advocacy Center for emotional support services related to sexual abuse by giving detainees mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. West Central Integrated Treatment Facility enables reasonable communication between detainees and these organizations and agencies, in as confidential a manner as possible.

West Central Integrated Treatment Facility informs detainees, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. This information is posted on the signs within the housing units.

Georgia Department of Corrections maintains memoranda of understanding with Southern Crescent Sexual Assault & Child Advocacy Center.

§115.54 Third party reporting

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV E. 4.; Detainees Handbook; PREA Pamphlet and MOU Southern Crescent Sexual Assault Center I find they meet this standard.

Georgia Department of Corrections has a method to receive third-party reports of sexual abuse/harassment and distributes publicly, information on how to report sexual abuse and sexual harassment on behalf of detainees. Visitors can go to <u>www.dcor.state.ga.us</u>

§115.61 Staff and agency reporting duties

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

Based on review of GDOC SOP 208.06 IV F. 1. (g-i); PREA brochure and interviews with random staff; Superintendent and medical/mental health staff I find they meet this standard.

Georgia Department of Corrections requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of Georgia Department of Corrections; retaliation against 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.

Apart from reporting to designated supervisors or officials, staff does 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.

If the alleged victim is considered a vulnerable adult under a State statute Chapter 5 of Title 30 of the Official Code of Georgia 1-10 Annotated, the "Disabled Adults and Elder Persons Protection Act, Georgia Department of Corrections reports the allegation to the designated State or local services agency under applicable mandatory reporting laws.

West Central Integrated Treatment Facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to West Central Integrated Treatment Facility's designated investigators.

§115.62 Agency protection duties

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC 208.06 IV.F.2; Detainees Personal Data Summary with Case Notes; Detainees PREA Classification Detail and interviews with random staff, and Superintendent I find they meet this standard.

Immediate action is taken to protect detainees when West Central Integrated Treatment Facility learns that a detainee is subject to a substantial risk of imminent sexual abuse.

§115.63 **Reporting to other confinement facilities**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV F. 3 (a-d) and interview with agency head and Superintendent I find they meet this standard.

According to the superintendent none of these reports have been received.

Upon receiving an allegation that an detainees was sexually abused while confined at another facility, the head of West Central Integrated Treatment Facility that received the allegation notify's the head of West Central Integrated Treatment Facility or appropriate office of Georgia Department of Corrections where the alleged abuse occurred. Such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented.

§115.64 Staff first responder duties

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV F. 4; Institutional Plan and interview with security staff who are first responders and random staff I find they meet this standard.

There have been no sexual assault cases reported, however there are policies in place that address the following:

Upon learning of an allegation that an detainees was sexually abused, the first security staff member to respond separates the alleged victim and abuser; preserves and protects any crime scene until appropriate steps can be taken to collect any evidence; and if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, including, as appropriate 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. During the interviews staff confirmed they knew the steps to take in the event of a sexual assault.

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

§115.65 **Coordinated response**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV F.5.; Institutional Plan and interview with Superintendent I find they meet this standard.

West Central Integrated 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 facility leadership.

§115.66 **Preservation of ability to protect detainees 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)
- X Not applicable Standard

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

Based on review GDC SOP 208.06 IV. F. 4 and interview with Commissioner Georgia Department of Corrections does not have collective bargaining, therefore I find this standard does not apply.

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV F. 6 (a-e); Institutional Plan and interview with Commissioner, superintendent, designated staff member charged with monitoring retaliation I find they meet this standard.

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

West Central Integrated Treatment Facility has multiple protection measures, such as housing changes or transfers for detainee's victims or abusers, removal of alleged staff or detainee's 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, West Central Integrated Treatment 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 act promptly to remedy any such retaliation. There is periodic status checks performed. Items West Central Integrated Treatment Facility should monitor include any detainee's disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. West Central Integrated Treatment Facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

If any other individual who cooperates with an investigation expresses a fear of retaliation, West Central Integrated Treatment Facility takes appropriate measures to protect that individual against retaliation.

§115.68 **Post allegation protective custody**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDC SOP 208.06 IV. F.13. and interview with Superintendent I find they meet this standard.

Any use of segregated housing to protect detainees who is alleged to have suffered sexual abuse receives all the same rights and privileges as general population detainees.

§115.71 Criminal and administrative agency investigation

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV G. 3; NIC Certificate – PREA Investigation Sexual Abuse in a Confinement Setting and interview with investigative staff I find they meet this standard.

When West Central Integrated Treatment Facility 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, West Central Integrated Treatment Facility uses investigators who have received special training in sexual abuse investigations from NIC in PREA-Behavioral Healthcare for Sexual Assault Victims in Confinement; and PREA: Investigating Sexual Abuse in a Confinement Setting.

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

When the quality of evidence appears to support criminal prosecution, Georgia Department of Corrections conducts compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. An investigator from GDCI conducts all criminal and administrative related investigations. There have not been any allegations that have gone criminal.

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

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

Substantiated allegations of conduct that appears to be criminal are referred to Georgia Department of Corrections Internal Affairs for prosecution.

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

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The departure of the alleged abuser or victim from the employment or control of West Central Integrated Treatment Facility or agency does not provide a basis for terminating an investigation.

§115.72 Evidentiary standard for administrative investigation

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV G. 14 and interview with investigative staff I find they meet this standard.

Georgia Department of Corrections imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.73 **Reporting to detainees**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV G. 15; PREA Allegation Notification Letter and interview with Superintendent and investigative staff I find they meet this standard.

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

Following a detainees' allegation that a staff member has committed sexual abuse against the detainees, Georgia Department of Corrections subsequently informs the detainees (unless Georgia Department of Corrections has determined that the allegation is unfounded) whenever the staff member is no longer posted within the detainees' unit; the staff member is no longer employed at West Central Integrated Treatment Facility; Georgia Department of Corrections learns that the staff member has been indicted on a charge related to sexual abuse within West Central Integrated Treatment Facility; or Georgia Department of Corrections learns that the staff member has been convicted on a charge related to sexual abuse within West Central Integrated Treatment Facility.

Following a detainees' allegation that they had been sexually abused by another detainees, Georgia Department of Corrections subsequently informs the alleged victim whenever Georgia

Department of Corrections learns that the alleged abuser has been indicted on a charge related to sexual abuse within West Central Integrated Treatment Facility; or Georgia Department of Corrections learns that the alleged abuser has been convicted on a charge related to sexual abuse within West Central Integrated Treatment Facility.

All such notifications or attempted notifications are documented.

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

West Central Integrated Treatment Facility notifies all detainees of the outcome of the investigation even on sexual harassment cases.

§115.76 **Disciplinary sanctions for staff**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV H; and signed Sexual Assault/Sexual Misconduct Acknowledgment Statement and review of personnel files I find they meet this standard.

No staff has been involved in a PREA related incident.

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.

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

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

§115.77 **Corrective action for contractors and volunteers**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV H. 2; Sexual Assault/ Sexual Misconduct Acknowledgement Statement – Unsupervised Visitors and interview with superintendent I find they meet this standard.

No contractor or volunteer has been involved in a PREA related incident.

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

West Central Integrated Treatment Facility takes appropriate remedial measures, and considers whether to prohibit further contact with detainees, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

§115.78 Disciplinary sanctions for detainees

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV H.3.; SOP II. B 02-0001 and interview with medical/mental health staff I find they meet this standard.

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

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

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

West Central Integrated Treatment Facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse thru Spectrum. Spectrum is a counseling service located in 14 Georgia prisons that provide mental health services. There are 7 counselors on staff and 1 psychologist who provides a treatment plan for each detainee that can include one on one counseling; group sessions on Violence Prevention and Seeking Safety (trauma).

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

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

Georgia Department of Corrections prohibits all sexual activity between detainees and may discipline detainees for such activity. There are disciplinary sanctions in place to address this.

§115.81 Medical and Mental health screening; history of sexual abuse

X Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of MH/MR Referral and Mental Health Reception Screening form and interviews with staff responsible for risk screening; medical/mental health staff and two detainees who disclosed prior sexual victimization. Based on my interview and reviewing intake documentation I have determined they exceed in this standard due to mental health seeing a detainee the same day of arrival. for all detainees identified at intake as having been a victim/perpetrated sexual abuse in the past.

If the screening indicates that a detainee has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensures that the detainees is offered a follow-up meeting with a medical or mental health practitioner. Medical and Mental Health staff see these detainees the same day they are screened.

If the screening indicates that an detainees has previously perpetrated sexual abuse/prior sexual victimization, whether it occurred in an institutional setting or in the community, staff ensure that the detainees is offered a follow-up meeting with a mental health practitioner. Medical and Mental Health staff see these detainees the same day they are screened. They have not received any detainee who has perpetrated sexual abuse/prior sexual victimization.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Medical and mental health practitioners obtain informed consent from detainees before reporting information about prior sexual victimization that did not occur in an institutional setting.

§115.82 Access to emergency medical and mental health services

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of SOP IIA21-0001; SANE nurse Call Roster; HIV Antibody Negative Post Test Counseling; Medical PREA Log and interview with medical and mental health staff I find they meet this standard.

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

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

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

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

§115.83 **Ongoing medical and mental health care for sexual abuse victims**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDC SOP VG55-0001 – Mental Health Management of Suspected Sexual Abuse, Contact or Harassment; Medical PREA Log and interview with medical/mental health staff I find they meet this standard.

West Central Integrated Treatment Facility offers medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Spectrum is a counseling service located in 14 Georgia prisons that provide mental health services. There are 7 counselors on staff and 1 psychologist who provides a treatment plan for each detainee that can include one on one counseling; group sessions on Violence Prevention and Seeking Safety (trauma).

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.

West Central Integrated Treatment Facility provides such victims with medical and mental health services consistent with the community level of care.

Detainee's victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

Detainee's 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.

§115.86 Sexual abuse incident reviews

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of GDOC SOP 208.06 IV J; PREA Committee Meeting and interview with Superintendent, PREA compliance manager, incident review team I find they meet this standard.

West Central Integrated Treatment Facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. This review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. I reviewed the three investigation files and review the incident reviews for each.

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

§115.87 Data collection

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on review of Georgia Department of Corrections annual report I find they meet this standard.

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

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

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

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

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

§115.88 **Data review for corrective action**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on interview with PREA coordinator and review of annual report I find they meet this standard.

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

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

Georgia Department of Corrections' report is approved by Georgia Department of Corrections head and made readily available to the public through its website www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2015.pdf

§115.89 **Data storage, publication and destruction**

□ Exceeds Standard (substantially exceeds requirement of standard)

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

□ Does Not Meet Standard (requires corrective action)

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

Based on interview with PREA coordinator and review of annual report I find they meet this standard.

Georgia Department of Corrections makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2015.pdf

All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of Georgia Department of Corrections under review.

Katherine Brown

March 18, 2016

Auditor Signature

Date