

PREA Facility Audit Report: Final

Name of Facility: Clayton County Prison

Facility Type: Prison / Jail

Date Interim Report Submitted: 09/16/2019

Date Final Report Submitted: 10/31/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Melinda Allen	Date of Signature: 10/31/2019

AUDITOR INFORMATION	
Auditor name:	Allen, Melinda
Address:	
Email:	preaaudit@gmail.com
Telephone number:	
Start Date of On-Site Audit:	08/13/2019
End Date of On-Site Audit:	08/14/2019

FACILITY INFORMATION	
Facility name:	Clayton County Prison
Facility physical address:	11420 S.L.R. Blvd, Lovejoy, Georgia - 30250
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Randal Holsey
Email Address:	Randal.Holsey@claytoncountyga.gov
Telephone Number:	7704735777

Warden/Jail Administrator/Sheriff/Director	
Name:	Dennis Nelson
Email Address:	Dennis.Nelson@claytoncountyga.gov
Telephone Number:	7704735777

Facility PREA Compliance Manager	
Name:	Randal Holsey
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Telephone Number:	M: (770) 473-5777

Facility Health Service Administrator On-site	
Name:	Lisa Smith/CorrectHealth
Email Address:	lisa.smith@correcthealth.org
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Facility Characteristics	
Designed facility capacity:	256
Current population of facility:	253
Average daily population for the past 12 months:	241
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	
Age range of population:	36
Facility security levels/inmate custody levels:	Med / Min
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	59
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	19

AGENCY INFORMATION	
Name of agency:	Clayton County Corrections Department
Governing authority or parent agency (if applicable):	
Physical Address:	11420 S.L.R. Blvd, Lovejoy, Georgia - 30250
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Neysa Mayfield	Email Address:	neysa.mayfield@claytoncountyga.gov

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The Clayton County Corrections Institute contracted with the auditor on July 2, 2019 to conduct a PREA audit August 13, 2019 through August 14, 2019. CCCI is operated by the Clayton County Correctional Institute located at 11420 S.L.R. Boulevard, Lovejoy, GA 30250. The contracting process initially started in June 2019 to include expectations, timelines, etc.

Audit Methodology

1. Pre-Onsite Audit Phase

During the pre-audit phase the auditor conducted a review of the Pre-Audit Questionnaire (PAQ) as well as other documents provided by the facility through August 12, 2019. The auditor also reviewed Clayton County Correctional Institutes (CCCI) Annual PREA Reports for 2012- 2018, their public website and other related PREA information e.g., forms, inmate educational DVD and PREA posters.

During the course of the pre-onsite audit phase, the auditor emailed the PREA Compliance manager several times and reviewed the process map for the audit, the auditor's unimpeded access to every area of the facility, document and record review, and interviews with the staff, volunteers, contractors and inmates. Additionally, an overview of the audit process, the audit goals, audit expectations and the submission of the Interim Report of the auditor's findings to CCCI was discussed, to include allowing the inmates to correspond with the audit team confidentially. The agency advised that they do not open outgoing mail. After several emails and telephone calls, Auditor Allen emailed the following documents to the PREA Coordinator:

- Pre-Audit Questionnaire
- Audit Process Map
- Document checklist

A. Notice of Audit Posting: The Notice of the audit posting was in both English and Spanish and printed on white paper. Audit notice was posted at CCCI on July 3, 2019. The facility provided a sampling of pictures of the audit posting throughout the facility. The English version stated: The Clayton County Correctional Institute will be undergoing an audit for compliance with the United States Department of Justice's National PREA Standards to Prevent, Detect, and Respond to Prison Rape under the Prison Rape Elimination Act (PREA) for prisons during the following period, August 13-14, 2019.

Any person with information relevant to this compliance audit may confidentially* correspond with the auditor via the following address:

Melinda Allen
P.O. Box 703
Braselton 30517

*CONFIDENTIALITY – All written and verbal correspondence and disclosures provided to the designated auditor are confidential and will not be disclosed unless required by law. There are exceptions when confidentiality must be legally breached. Exceptions include, but are not limited to the following:

- if the person is an immediate danger to her/himself or others (e.g. suicide or homicide);
- allegations of suspected of child abuse, neglect or maltreatment;
- in legal proceedings where information has been subpoenaed by a court of appropriate jurisdiction.

This statement was translated into Spanish and posted also throughout the facility. The auditor did not receive any correspondence as a result of the audit notice postings as of the start of the onsite audit.

The auditor received photographic verification of posting of the notices of audit on July 3, 2019 and observed Notices of Audit posted throughout the facility during the onsite.

B. Timeline:

Prior to the onsite audit, the auditor provided the facility with an Audit Schedule that included information regarding the need for unimpeded access to all areas of the facility and access to documents and staff for interview. The process and timelines for the interim report, corrective action, and recommendations were also reviewed with the facility.

The Pre-Audit Questionnaire (PAQ) was completed by the facility on August 8, 2019. The auditor initiated her review of the PAQ and supplied documents that accompanied the report. The auditor utilized the Audit Compliance Tool in order to ensure completeness and accuracy in gathering required materials. The auditor printed a hard copy of the Audit Compliance Tool and highlighted areas where additional information was to be secured during the onsite.

C. Research:

The auditor conducted research on Clayton County Correctional Institute (CCCI) to ascertain if there were articles and information regarding PREA-related news or events and accomplishments. The auditor did not find any articles pertinent to sexual abuse or sexual harassment other than the required agency postings of reports, how to file a report, etc. No other information was found during this research. The facility's annual PREA annual reports, 2012-2018, posted to its public website were also reviewed.

The auditor reviewed the relevant laws of Georgia concerning certification of juveniles as adults (relevant to youthful inmates). The age of criminal responsibility in the State of Georgia is 17. In the State of Georgia, a "Youthful offender" means any male offender who is at least 17 but less than 25 years of age at the time of conviction and who in the opinion of the department has the potential and desire for rehabilitation. Georgia Code 42-7-2.

The audit team reviewed the mandatory reporting laws for Georgia to ascertain who is mandated to report abuse or neglect of a vulnerable adult. This publication organizes the information in a user-friendly format and expressly demonstrates all staff of the CCCI are mandatory reporters in the state of Georgia: <https://aging.georgia.gov/abuse-neglect-and-exploitation-risk-adults-georgia>.

D. External Contacts:

External organizations were contacted prior to the on-site audit phase including Just Detention International (JDI) and the Southern Crescent Sexual Assault and Child Advocacy Center (SCSACAC). Just Detention International (JDI) reported having not received any information regarding sexual safety at the Clayton County Correctional Institute in the last 12 months. The Southern Crescent Sexual Assault and Child Advocacy Center (SCSACAC) reported having a partnership with the CCCI via a MOU to provide emotional support services, 24/7 crisis support line, specialized counseling, accompany victims to hospital for forensic medical examinations and provide notification of allegations of sexual abuse and sexual harassment originating within the jail to CCCI officials. The SCACAC has not received any complaints from inmates. They would provide emotional support services in-person as well as via the helpline to inmate victims of sexual abuse.

E. Listing of Allegations:

The CCCI has one certified PREA investigator who conduct investigations and and is responsible for both administrative and criminal investigations. During the onsite audit phase, the facility reported the following cases in 2018:

Type of Allegation:

- Staff-on-inmate Sexual Abuse (Misconduct) 0
- Staff-on-inmate Sexual Harassment 5
- Inmate-on-Inmate Nonconsensual Sexual Acts 0
- Inmate-on-inmate Sexual Abuse 0
- Inmate-on-inmate Sexual Harassment 0

Case Findings:

- Number Substantiated 0
- Number Unsubstantiated 0
- Number Unfounded 5

Of the 5 allegations that were reviewed, all 5 were administrative. No allegations were referred for criminal investigation. The facility may contact the Georgia Department of Corrections Investigative Team or the Clayton County Police Department to assist with criminal investigations for sexual abuse and sexual harassment.

2. Onsite Audit Phase

The rated capacity of the facility is 256 inmates. On August 13, 2019, the first day of the onsite audit, the inmate population of the facility was 256 inmates. On August 14, 2019 it was 256.

CCCI is made up of one single floor building and houses minimum and medium security custody levels. There are a total of four open bay dorms and six segregation cells used for disciplinary or administrative segregation. The facility has a designed capacity of 256 inmates.

During the onsite review, the auditor observed that records are securely stored. Classification and Screening data are secured electronically in SCRIBE, an electronic Offender Management System and access to these are on a need to know basis.

Site Review:

The auditor arrived at CCCI on August 13, 2019 at 07:30 am and the PREA coordinator met the auditor. The public access staff verified the identification of the auditor for daily access into the facility. At 8:30 am an in-brief meeting was held in the Warden's Conference Room, attended by members of the facility and the auditor. During the meeting, the auditor explained the audit process and expectations. CCCI leadership in attendance included the Warden, PREA Coordinator, and PREA Compliance Manager. Following the in-brief, the auditor was escorted by the PREA Coordinator and PREA Compliance Manager for an extensive site review of the facility.

The audit team toured and reviewed the following locations/areas:

- Administration
- General Population pods
- Laundry
- Intake
- Medical Unit
- Segregation and Protective Custody Unit pods and the Female pods.
- Education
- Chapel
- Kitchen
- Control

The auditor observed processes and talked with staff at intake to observe the procedure for booking, intake, classification, property, searching, PREA education, and screening protocols while the inmates were being processed into the institution. The auditor observed and reviewed camera placement, potential cross gender viewing of shower and toilet areas, placement of PREA education materials, placement of PREA reporting options and the functionality of those reporting options. Particular attention was given to camera placement, lines of sight, privacy for inmates in bathrooms, showers and changing areas, PREA reporting signs, victim advocacy signage, door and key security, inmate movement, and staff and inmate interactions. The auditor also stayed alert to blind spots.

The auditor also reviewed the inmate intake and counselor areas, where education materials about PREA and the SCACAC was made available as a resource for emotional support surrounding sexual safety issues.

The box for receipt for grievances/request for administrative remedies was observed by the auditor in each dorm. Grievance forms were readily available in all units.

The housing units were open bay dorms with a day room space. Recreation areas are available outdoors

but most inmates do not partake in this exercise opportunity after working all day. The segregation housing unit is comprised of six single cell with a small day room and a single stall shower. Toilets were in each cell for privacy and in the shower area, doors and shower curtains were observed as having the capability to prevent cross gender viewing from camera angles as well as staff walking on the housing area.

The medical unit is a small triage space only. No inmates would be housed in this unit overnight.

PREA education materials were mounted on the walls of the housing units and adjacent to telephones. There were Zero Tolerance reporting posters in the housing unit. The poster displayed information on reporting sexual abuse through the phone system to an answering service. The PREA Hotline phone number on the poster, #7732, was successfully tested by the auditor. A return message from the operator from the message center was left for the auditor on her phone's voice mail indicating receipt of the test phone call. The call was returned within eight hours of having left the message.

The auditor also conducted informal interviews with staff and inmates encountered while on the site review in the various areas. The auditor observed the audit notification in various locations throughout the facility, including the inmate housing units, programming and work areas, staff and visitor access areas to ensure that CCCI staff, inmates and visitors had the opportunity to contact the auditor.

The auditor conducted tests of the PREA reporting hotline in two inmate housing units and a test of the victim advocacy support line was also conducted from an inmate telephone. All tests were successful.

The auditor asked the intake staff to walk them through the entire intake process from arrival, screening, classification to housing assignment, of which they did, and they also discussed the grievance and mail process.

The auditor reviewed staffing rosters and ratios of staff to inmates during the onsite review. During each day of the onsite, the auditor reviewed the staffing rosters and determined that all required posts were filled. Copies of the staffing rosters were secured for each day the audit was conducted. The Clayton County Correctional Institute currently employs 59 staff who have regular contact with inmates.

The facility is equipped with cameras located inside and out. Officers in Central Control monitor these cameras 24 hours a day, 7 days a week. There are safety and emergency communications systems to increase safety of employees and inmates. There are cameras located in all housing units, hallways and common areas where inmate may go. The facility has excellent camera coverage. In a few areas, the cameras were augmented with the use of mirrors.

3. Interviews:

The auditor requested and was provided with rosters of staff available at the facility for the days of the audit, indicating post and shift hours. In addition, rosters were received indicating which individuals filled specialized staff positions. The auditor randomly selected staff assigned from the facility rosters representing a diverse sampling of staff to include male and female, various job responsibilities, job assignments, levels of experience, sworn, and civilian.

A roster was received detailing all inmates housed at the facility on each day of the audit. The auditor requested rosters of targeted categories of inmates but the facility was unable to identify any that were

present. These rosters were used to select the staff and inmates to participate in random, targeted and specialized interviews. The facility was unable to identify or provide rosters of Limited English Proficiency (LEP), Lesbian, Gay, Bisexual, Transgender and Intersex (LGBTI) and disabled inmates.

The auditor conducted a total of 28 inmate interviews out of a population of 256 inmates in population on the first day of the audit. This number consisted of 25 random inmates, being interviewed and 3 targeted inmates being interviewed. Inmates were interviewed from every housing unit and security classification, with diversity in age, race, and gender. There was one LGBTQI inmate, one inmate who had reported sexual victimization during screening and one inmate with a cognitive disability located to interview. The auditor was unable to locate any transgender or intersex inmates, youthful inmates, deaf inmates, or inmates who reported a sexual abuse,

The auditor conducted a total of 30 staff interviews. The auditor conducted 12 random staff interviews out of 59 staff employed who have contact with inmates. The auditor also conducted 18 interviews with specialized staff, as detailed below. Some specialized staff had multiple responsibilities and provided information to interviewers from multiple specialized staff interview protocols. Staff were interviewed from all shifts, and members of the auditor interviewed both sworn and civilian staff. The warden as the agency head was also interviewed.

Formal interviews were conducted with inmates and staff in the Warden's conference room to ensure confidentiality.

The facility does have access to a language line for interpretation services for non-English speaking inmates, but it was not in usage due during the site review. The auditor did not test the system during the onsite phase.

Interview Selection Methodology:

Random and Targeted Inmates:

The auditor's inmate methodology selection was as follows:

- Auditor conducted 25 interviews of random inmates, selected at random using every 5th name on the inmate roster for each housing unit.

Note: According to the Auditor's Handbook 13 targeted inmates were to be interviewed but the auditor was only able to interview three. Once the auditor depleted the targeted inmate listing, she supplemented this number by interviewing additional random inmates.

The auditor conducted 3 interviews of targeted inmates selected inmates were from the following targeted populations:

Category and number of inmate interviews in that category:

- LGBTQI- 1
- Inmates who disclosed victimization during a risk assessment- 1
- Cognitive Disability- 1

Inmates were not selected from lists. The auditor discovered two of the targeted inmates while

conducting random interviews. The third inmate was identified by the PREA Coordinator. There was no systematic selection as there were a limited number of individuals to interview.

Barriers to identifying targeted inmates: no inmates that had a physical disability, Limited in English Proficiency, who had been assigned to segregated housing due to a high risk of sexual victimization, deaf, blind, or who had reported sexual abuse. The PREA coordinator further indicated that CCCI did not have a process in for identifying and providing this information to the auditor.

Random Staff:

The auditor conducted 12 interviews of random staff. The auditor's staff methodology selection was as follows:

- The auditor made random selections from the daily staff rosters provided on the first day and second of the onsite audit. The auditor selected random staff, choosing from all shifts.

Specialized Staff:

The auditor team conducted 18 interview protocols with specialized staff, with some staff members being asked questions from multiple interview protocols based on their assigned job responsibilities. The facility did not provide a list of Specialized Staff but the PREA Coordinator and the Auditors discussed which staff fill each role in order to determine precisely who needed to be interviewed during the onsite audit.

The interviews conducted with specialized staff were as follows: PREA coordinator (1), Agency contract Administrator (1), Human Resources (1), Volunteers (1), Intermediate or higher-level (1), Investigators (1), Staff who Monitor Retaliation(1), Staff who supervise Segregated (Isolation)(1), Staff who conduct screening (2), Medical and Mental Health staff (1), Line staff who supervise Youthful Inmates (0), Volunteers and Contractors (2), Intake and Classification staff (1), Non-medical staff who conduct strip searches(0), Agency head(1), Education/Program staff for Youthful inmates (0), SANE (1), Incident Review Team member (1), First responder and Non-security First responder (1).

4. File Review Methodology (Staff, Volunteers and Contractors):

The auditor's file review methodology selection was as follows:

From the 23 staff and volunteers identified, 23 files were selected for review to ascertain if criminal background checks and reference checks were being conducted, if criminal background checks were being conducted every five years and if letters were sent to previous institutional employers on new hires to ascertain if there had been any allegation of sexual abuse and sexual harassment. Of the files reviewed 4 were newly hired staff, with 12 months, 1 was medical staff (including contractors), 1 was an investigator, 2 were civilian staff and 2 were religious volunteers. The employee file review for hiring and promotion requirements were conducted in the administration area of the facility.

The Volunteer file review for training requirements were conducted in the administration. The auditors selected 2 staff names from the volunteer roster provided that included new staff, more seasoned staff, administrators, supervisory staff, line staff, volunteers and contractors (medical). These names were also used in reviewing their training records.

The sampling of files the auditor selected were one (1) investigators, one (1) medical (employee and contractors, two (2) civilians, seventeen (17) correctional officer cadets and two (2) religious volunteers files to review.

The facility does not maintain a list of all contractors and volunteers within the facility. The auditor was unable to review this information. The auditor asked the PREA Coordinator if there were contractors/volunteers present on each day of the audit and selected from available volunteers to interview.

File Review Methodology (Inmate):

The auditor's file review methodology selection was as follows:

Twenty-six (26) inmate names and associated files were selected from a pool of all known victims/abusers targeted categories and some random inmates to ascertain the following documentation:

- Date and time when the initial Risk Assessment and re-assessments were conducted
- Applicable medical and mental health follow-up for disclosing prior victimization
- Receipt of PREA information during the intake process Comprehensive education provided within 30 days of intake.

Inmate files reviewed were selected from random and targeted inmates interviewed during the audit process to corroborate the testimony of the inmates during interviews as well as reviewing additional files of inmate victims/abusers as determined from the targeted categories.

Category and number of inmate files reviewed:

- Cognitive disability-1
- Random inmates- 23
- Inmates who disclosed victimization during a risk assessment- 1
- LGBTQI-1

Other files reviewed included:

Investigative Files – 5

Sexual Abuse

- o Inmate on Inmate (0)- 0 substantiated, 0 Unsubstantiated, 0 Unfounded
- o Staff on Inmate (0)- 0 Substantiated, 0 Unsubstantiated, 0 Unfounded

Sexual Harassment

- o Inmate on Inmate (0)- 0-Substantiated, 0-Unsubstantiated, 0 Unfounded
- o Staff on Inmate (5)- 0-Substantiated, 0-Unsubstantiated, 5 Unfounded

Staff Misconduct (0)

For the purpose of selection of investigative files, the auditor reviewed all of the reports from 2018 and one report from 2015.

Grievances – The auditor reviewed the list of grievances. The list was not thoroughly reviewed as any grievance alleging sexual abuse or sexual harassment would be treated as a PREA allegation and immediately converted to an investigation, rather than being treated as a grievance. The agency advised there were no grievances alleging sexual harassment or sexual abuse in 2018. These files were not reviewed.

Incident Reports- The auditors did not review all incident reports submitted to the agency in 2018. All incidents reported that alleged sexual harassment or sexual abuse were reviewed as part of the investigative review.

The agency did not provide a list of all hotline calls received in 2018.

Logs of Unannounced Rounds

5. Facility Debriefing on the last day of the onsite audit:

On August 14, 2019 at 5:30 pm the auditor conducted an out brief with the facility leadership. The auditor presented the strengths, challenges and encountered barriers to the facility leadership, which were as follows.

A. Facility strengths:

- PREA Coordinator's efficiency
- Booking and Intake process
- Good use of cameras for prevention and detection of sexual abuse and sexual harassment.
- Willingness to change and improve sexual safety for inmates.

B. Facility challenges:

- Background and Criminal History accountability
- Required Questions during hiring process
- Inmate education DVD. Staff needed a Spanish Version, which was provided by the auditor.

C. Barriers encountered:

There were no barriers encountered during the documentation review, site review, informal interviews with random staff and inmates, formal interviews with random and specialized staff and formal interviews with random and targeted inmates.

Conclusion:

At the end of the out brief, the facility administrative staff asked questions, sought clarity, and the auditor discussed next steps to include additional requests for documentation and the receipt of the Interim Report within the next 45 days.

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Clayton County Correctional Institute (CCCI) located at 11420 S.L.R Boulevard, Lovejoy, GA 30250 opened in 1992. The Correctional Institute is a open bay dorm design, with indirect supervision, and has a designed facility capacity of 256 inmates and a current average daily population of 253. The facility only houses male inmates from the State of Georgia Department of Corrections. This is a work camp. The agency does not house youthful offenders under the age of 18. There are 4 living units or "dorms" on one floor. The standard pod has 64 bunks on 1 level, with a central Day Area where meals are served, and leisure time is spent. The facility does not have a very diverse ethnic population. Their population is similar to the ethnic makeup of the population of the area comprised predominately of blacks, whites and a few hispanics.

All prisoners are "classified" according to their security and program support needs and are assigned to dorms based on classification within 48 hours of admission. Medical services are provided within the institution, which includes clinic services.

The Clayton County Correctional Institution currently employees 59 staff who have regular contact with inmates. The facility is equipped with cameras located inside and out. Officers in Central Control monitor these cameras 24 hours a day, 7 days a week. There are safety and emergency communications systems to increase safety of employees and inmates.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	2
Number of standards met:	43
Number of standards not met:	0

The interim report was provided on September 16, 2019, to the Clayton County Correctional Institute reporting:

Exceed Standards: 02

Met Standards: 41

Do Not Met Standards: 02

Number of Standards Exceeded: 02

§115.17, §115.33

Number of Standards Met: 41

§115.11, §115.12, §115.13, §115.14, §115.16, §115.31, §115.32, §115.34, §115.35, §115.42, §115.43, §115.51, §115.52, §115.53, §115.54, §115.61, §115.62, §115.63, §115.64, §115.65, §115.66, §115.67, §115.68, §115.71, §115.72, §115.73, §115.76, §115.77, §115.78, §115.81, §115.82, §115.83, §115.86, §115.87, §115.88, §115.89, §115.401, §115.403

Number of Standards Not Met: 02

§115.15, §115.41

Summary of Corrective Action:

Clayton County Corrective Action:

115.15 (d) CCCI must provide for privacy in the showers and toilet areas. At a minimum, the windows into the showers must be covered in a way that allows for privacy of the genitals of the inmates while still allowing for safety and security of the inmates. The auditor suggests a partial cover on the windows and door openings to the shower area, allowing for viewing above the shoulders and below the genitals. This would also allow for some privacy for the inmates preventing viewing by inmates in adjacent beds or

standing at the water fountains.

Update Standard 115.15 September 25, 2019:

The auditor requested the facility take photographs from outside the housing unit with someone in the shower and toilet area so she could have a better visual of what the view is from outside the dorm. The photographs conclude that the genitals of inmates are not visible from this viewpoint. All cross gender staff announce their presence when entering the facility, affording the inmates sufficient privacy to shower, dress and use the toilets.

Recent guidance from the PREA Resource Center:

Aside from opposite-gender viewing announcements, facilities must implement policies and procedures that enable inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks, or genitalia..." 115.15(d). Curtains would seem to be one of the more practical ways to accomplish the requirements of the standard in this context.

115.41 (f) CCCI must complete a reassessment of inmates within a period of 30 days from the inmate's arrival at the facility.

For clarification on this standard, I have detailed information gleaned from the PREA Resource Center's Frequently Asked Questions webpage:

Q: Standards 115.41(f) and 115.241(f) require that the facility "reassess the inmate's/resident's risk of victimization or abusiveness based on any additional, relevant information received by the facility since the intake process" and that it do so no more than 30 days after intake. The question is whether this standard subsection requires that EVERY inmate be reassessed within 30 days of arrival at the facility to determine whether any relevant new information exists; OR, alternatively, whether it requires that some process be in place to capture new information that arrives at the facility within 30 days and, when new information arrives, it prompts a reassessment?

A: The standard requires both. First, there is a general and continuing obligation to conduct a screening reassessment whenever warranted upon receipt of additional relevant information. Specifically, standard 115.41(g) requires that "[a]n inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness." This continuing obligation extends through the duration of the inmate's incarceration.

By contrast, the standards also require an affirmative reassessment within a set time period, but no later than 30 days of intake. Specifically, standard 115.41(f) requires that "[w]ithin a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening" (emphasis added).

While standard 115.41(f) requires an affirmative reassessment within 30 days, the reassessment need not "start from scratch." For example, as noted in the PREA Notice of Final Rule, a facility may generally rely upon information previously gathered, so long as the reassessment "captures any changes in risk

factors that may have occurred subsequent to the facility's prior gathering of information regarding that inmate."

While a facility may (and should) have a system in place for capturing additional or new information from a variety of sources (e.g., mental health assessment, disciplinary history, or allegations of relevant threats or victimization), the 30-day affirmative reassessment requires, at a minimum, that screening staff consult available sources (including the inmate) to determine whether any previously unknown triggering event or information has become available and to document such review. In short, as opposed to the "passive" requirements under standards 115.41(g), standard 115.41(f) requires screening staff to affirmatively "look and inquire."

Some risk factors are subject to change within the first 30-days after intake and may only be determined by making affirmative inquiry of the inmate. For example, the "inmate's own perception of vulnerability" can only be known by the inmate. See standard 115.41(d)(9). In addition, the inmate may have experienced unreported sexual victimization during this time period. See standard 115.41(d)(8). Accordingly, all 30-day reassessment requires consultation with the inmate.

As noted in the PREA Notice of Final Rule, "[t]he final standard requires that inmates who remain in custody undergo a more extensive classification process [within 30 days]." This requirement recognizes that information relevant to the risk and classification needs will become available as staff interview, assess, and observe the inmate, and as the facility receives information from other agencies and sources.

During the Corrective Action Period, staff need to complete reassessments of inmates who have been in their custody for 30 days. Institute a procedure for ensuring the reassessments are completed within 30 days. The auditor suggests printing a list of inmates at 21 days to allow for sufficient time to complete the reassessments within the 30 day requirement.

Update: October 31, 2019

During the Corrective Action Period, the facility completed all 30-day reassessments and implemented a process where they could ensure the reassessments are completed in a timely manner. The auditor requested a copy of the facility census in order to select inmate files to review. Once the auditor made her selections, the facility promptly provided verification of each file requested.

All standards were updated to meet standard on October 31, 2019.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents Reviewed: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> a. Clayton County Correctional Institute (CCCI) LOP 104.1 b. Pre-Audit Questionnaire (PAQ) completed by CCCI c. Facility Organizational Chart d. Memorandum of Assignment of PREA Coordinator/ PREA Compliance Manager e. Georgia Department of Corrections (GDOC) Policy 208.06, Revised, March 2, 2018 2. Interviews: <ol style="list-style-type: none"> a. PREA coordinator <p>Findings:</p> <p>§115.11 (a) The Clayton County Correctional Institute (CCCI) operates one facility . The facility is contracted with the State of Georgia Department of Corrections. to house inmates in a work camp environment. The CCCI is required to follow the State of Georgia Policies and Practices pertinent to the Prison Rape Elimination Act. The facility has also developed their own Local Operating Procedures that reflect many of the policies outlined by the State of Georgia Department of Corrections. The agency PREA Coordinator provided the CCCI's Local Operating Procedure (LOP) 401.1 Prison Rape Elimination Act 104.1, I, A as where the agency's zero tolerance policy exists. Specifically, the policy statement states that "Clayton County Prison has a zero tolerance policy toward all forms of sexual abuse, sexual harassment and sexual activity among offenders." This policy mandates a zero tolerance in philosophy and in its operation.</p> <p>§115.11 (b): The agency has PREA coordinator according to the organizational chart provided during the pre-audit phase. The GDOC Policy 208.06, Section IV, A, 1, states, "The Department shall employ or designate an upper-level, Department PREA Coordinator with sufficient time and authority to develop, implement, and oversee Department efforts to comply with the PREA standards in all facilities." GDOC's policy ensures that the PREA coordinator has sufficient time to develop, implement, and oversee the agency efforts to comply with the PREA Standards in its facility. The PREA coordinator did indicate during her interview with the auditor that she has sufficient time and the authority to develop, implement and oversee CCCI's efforts to comply with the PREA standards in this facility. She also indicated that she has the support and authority from the facility's Deputy Warden and Warden when carrying out required her duties and responsibilities as the PREA coordinator.</p> <p>§115.11 (c): The Clayton County Correctional Institute (CCCI) does have a PREA compliance manager. At the CCCI, the Deputy Warden serves as the PREA Compliance Manager. The PREA Compliance Manager works closely with the PREA coordinator to coordinate the facility's efforts to comply with the PREA standards if they so choose.</p>	

	<p>Corrective Action Recommendation:</p> <p>None</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)</p> <p>a. Clayton County Department of Corrections LOP PREA Policy 104.1 b. Georgia Department of Corrections Policy §208.06, Revised, March 2, 2018 c. Completed Pre-Audit Questionnaire</p> <p>2. Interviews:</p> <p>a. PREA Coordinator</p> <p>Findings:</p> <p>The Clayton County Correctional Institute does not contract with other facilities to house their inmates. They do contract directly with the Georgia Department of Corrections (GDOC) to house inmates in Clayton County. Part of the contract with the state DOC requires the CCCI to closely follow the GDOC PREA policies.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> a. Clayton County Correctional Institute Staffing Plan b. Pre-Audit Questionnaire Completed by CCCI c. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program d. Annual Review of Staffing Plans e. Staff Daily Tour Logs <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA coordinator b. Warden c. Intermediate and Higher-level staff <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. Blind spots b. Camera placement in the facility c. Control station d. Staffing levels of housing units <p>Findings:</p> <p>115.13 (a) The CCCI has a staffing plan that is missing the analysis of each of the factors dictated in the Standard. The Staffing Study provided provides a list of items reviewed for the purposes of the staffing study and documents the analysis of each factor required in the standard.</p> <p>115.13 (b) The CCCI documents each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The primary reason for non-compliance would be staff calling out. Positions are back filled to ensure the minimum staffing required is covered at all times.</p> <p>115.13 (c) The CCCI is required to review the staffing plan annually with the PREA Coordinator to see whether adjustments are needed to: (a) the staffing plan, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. The facility provided several annual reviews of the staffing plan.</p> <p>115.13 (d) The CCCI has implemented a policy requiring intermediate or higher level supervisory staff to conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Interviews with supervisors indicate that unannounced PREA rounds are</p>

conducted all all shifts. The auditor also reviewed logbook entries and video footage to verify that the unannounced rounds are completed. Supervisors interviewed indicated that they ensure that staff are not alerted when the unannounced rounds are occurring by routing the checks randomly and at various times.

Corrective Action Recommendation:

None

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> a. Clayton County Correctional Institute LOP 104.1 b. Pre-Audit Questionnaire Completed by CCCI c. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program d. Housing Rosters of Facility Population <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA coordinator b. Warden <p>Findings:</p> <p>The Clayton County Correctional Institute does not house youthful offenders at this facility.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.)</p> <ul style="list-style-type: none"> a. Clayton County Correctional Institute LOP PREA Policy 104.1 b. Georgia Department of Corrections PREA Policy § 208.06, Revised 3.2.2018 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Training documentation <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager c. Interviews with random section of inmates d. Random sample of Staff <p>Findings:</p> <p>115.15 (a) The CCCI and GDOC policies prohibit cross-gender strip searches completely and has an exigent circumstances exception. GDOC policy also prohibits staff from performing intrusive or invasive body cavity searches under all circumstances; staff is permitted to do a visual inspection of a resident’s mouth cavity only. Cross-gender pat searches are authorized only in exigent circumstances and with supervisor approval. The CCCI reports that it has conducted no cross-gender strip or cross-gender visual body cavity searches of residents in the last 12 months. Additionally, CCCI reports no cross-gender pat down searches were conducted. There were no exigent circumstances searches in any category conducted.</p> <p>115.15 (b)The CCCI does not house female inmates.</p> <p>115.15 (c) CCCI Policy 104.1, Section VI, A, 8 requires the Clayton County Prison to document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female offenders by incident report. The CCCI does not house female inmates. The CCCI reports that it has conducted no cross-gender strip or cross-gender visual body cavity searches of residents in the last 12 months. Additionally, CCCI reports no cross-gender pat down searches were conducted. There were no exigent circumstances searches in any category conducted.</p> <p>115.15(d) The CCCI/GDOC policies ensures that residents are able to shower, perform bodily functions, and change clothing with privacy. However, during the on site review of the facility, it was discovered that showers and toilets are visible to all staff conducting tours in the housing areas. There are windows that allow staff to see into the shower areas that can be seen from outside the Dorm. Staff of the opposite gender are required to announce their presence when entering the unit, but this would not allow for privacy in the shower area. Inmates generally shower one at a time, even though there are four shower heads in each shower area. Inmates</p>

line up their towels as place holders for sequence of showering upon return from work details. Policy and practice require announcement when staff of the opposite gender enter the housing unit and the shower/toilet area. Interviews with residents and staff confirm this as the policy and actual practice of the program on a consistent basis.

115.15 (e) Policy prohibits staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. GDOC policy and practice prohibit searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.

115.15(f) The agency has provided some basic training to staff regarding how to conduct cross-gender pat down searches and searches of transgender and intersex residents in a professional manner.

Corrective Action Recommendation:

115.15 (d) CCCI must provide for privacy in the showers and toilet areas. At a minimum, the windows into the showers must be covered in a way that allows for privacy of the genitals of the inmates while still allowing for safety and security of the inmates. The auditor suggests a partial cover on the windows and door openings to the shower area, allowing for viewing above the shoulders and below the genitals. This would also allow for some privacy for the inmates preventing viewing by inmates in adjacent beds or standing at the water fountains.

Recent guidance from the PREA Resource Center:

Aside from opposite-gender viewing announcements, facilities must implement policies and procedures that enable inmates to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breast, buttocks, or genitalia..." 115.15(d). Curtains would seem to be one of the more practical ways to accomplish the requirements of the standard in this context.

Update: September 25, 2019:

The auditor requested the facility take photographs from outside the housing unit with someone in the shower and toilet area so she could have a better visual of what the view is from outside the dorm. The photographs conclude that the genitals of inmates are not visible from this viewpoint. All cross gender staff announce their presence when entering the facility, affording the inmates sufficient privacy to shower, dress and use the toilets.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. GDOC Policy: §208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Samples of PREA poster and brochure translated into Spanish d. PREA Training Materials for inmate education e. Service Agreement with The Language Line for interpretation services. f. Clayton County Correctional Institute Policy 104.1 <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager c. Warden d. Random sample of facility staff e. Random sample of residents <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. PREA Posters and Signage <p>Findings:</p> <p>115.16 (a) The CCCI/GDOC policy requires the program to ensure residents with special needs 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 harassment. The CCCI is unique in that as a work camp that only receives inmates from State DOC that are physically, mentally and otherwise capable of working a job. They do not receive inmates that are disabled, deaf, or blind. They may receive an inmate that is Limited English Proficient; however, there were none to interview onsite during the audit.</p> <p>115.16 (b) The CCCI has established procedures for providing inmates with limited English proficiency the opportunity to participate in the agency's PREA education sessions aimed at prevention, detection and response to sexual abuse and sexual harassment. In addition to having staff that speak English, the facility has a contract with The Language Line to assist in translation services. PREA pamphlets and posters are provided in Spanish, the most frequent non-English language spoken in this area. PREA posters and brochures are located throughout the facility in English and Spanish.</p> <p>115.16 (C) Facility Policy 104.1 104.1, VI,A,9,c prohibits the use of residents/clients as interpreters when dealing with first responder situations or any allegation/investigations of sexual abuse or harassment. The CCCI reports that there have been no instances in the past 12 months where resident</p>

interpreters have been used.

Corrective Action Recommendation:

None

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. CCCI Local Operation Procedures (Hiring and Promotion Decisions, Interview Process and Hiring Interview Questionnaire) b. GDCO PREA Policy 208.06 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Review of Random sample of personnel files e. Review of newly promoted or hired staff files <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager c. HR Administrative Staff <p>Findings:</p> <p>115.17 (a) The GDOC PREA policy 208.06 and the CCCI LOP 104.1 VI,A,10,a prohibit the hiring, promotion or retention of any employee, or contractor that has the prohibited conduct specified in this standard. The agency completes a criminal background check to verify that there are no convictions for this conduct.</p> <p>115.17 (b) The CCCI LOP 104.01 VI,A,10,b requires the agency to consider any incidents of sexual harassment in determining whether to hire or promote staff or to enlist the services of a contractor that may have contact with residents. Files of staff hired in the past few years inquired about incidents of sexual harassment and the facility completes a form to document the inquiry.</p> <p>115.17 (c) The CCCI conducts the required criminal history checks prior to hiring new employees who may have contact with residents. The policy requires the agency to use its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. During the onsite, the auditor reviewed employee files for completion of a criminal history background check and verified that prior institutional employers are contacted for reference checks.</p> <p>115.17 (d) The PREA policy requires criminal history checks before enlisting the services of a contractor who may have contact with residents. The auditor reviewed the criminal background checks completed for contractors.</p> <p>115.17 (e) GDOC PREA policy 208.06 and CCCI Policy 104.01 require criminal history checks on all employees at least every five (5) years. However, CCCI conducts a criminal history background check on all staff annually. This exceeds the standard required.</p>

115.17(f) The facility provided copies of a form which is to be included with each application for new hires as proof documentation to confirm that all applicants and employees are asked about previous misconduct described in paragraph (a) of this standard in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of the reviews of current employees. The agency also imposed a continuing affirmative duty to disclose any such misconduct. A review of employee files revealed that the agency has developed a to use as part of the application process to document that the required questions have been asked.

115.17 (g) Agency policy 104.01 VI,A,10,e states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

115.17 (h) The GDOC/ CCCI has a policy and practice requiring the agency to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for who such employee has applied to work. The GDOC policy 208.06 imposes a continuing duty to disclose any misconduct listed in §115.17(a).

Corrective Action Recommendation:

None

115.18	Upgrades to facilities and technologies
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1193 360">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 412 1023 445">a. Clayton County Correctional Institute Local Policy 104.01 <li data-bbox="252 456 927 490">b. Georgia Department of Corrections Policy 208.06 <li data-bbox="252 501 1002 535">b. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 546 959 580">c. CCCI Security Map showing video camera locations <li data-bbox="252 591 695 624">d. Technology Upgrades for CCCI <p data-bbox="252 674 427 707">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 759 389 792">a. Warden <li data-bbox="252 804 523 837">b. PREA Coordinator <li data-bbox="252 848 647 882">c. PREA Compliance Manager <p data-bbox="252 931 472 965">3. Onsite review:</p> <ul style="list-style-type: none"> <li data-bbox="252 1016 592 1050">a. Construction in process <p data-bbox="252 1099 373 1133">Findings:</p> <p data-bbox="252 1184 1437 1346">115.18 (a) The CCCI is in the process of expanding and modifying the current Correctional Institute building. The building is not yet ready to be occupied. Facility staff were advised to make sure they document the effect of the design acquisition, expansion, or modification to the agency's ability to protect inmates from sexual abuse.</p> <p data-bbox="252 1397 1485 1906">115.18 (b) The facility has recently added additional cameras to the video monitoring system. The agency leadership considered a variety of factors when upgrading technology in the facility including primarily sight lines, blind spots, and inaccessible areas. Interviews with facility leadership indicate that placement of cameras and mirrors are discussed frequently to keep enhancing safety for all residents. The facility has both external and internal video camera monitoring. Cameras are strategically located on all external entrances/exits from the building and covering the inmate yard and outdoor area. Cameras internally are located in hallways, common areas (laundry, kitchen, property room), and entrances to building. Each CCCI dorm has cameras in the living areas. There are no cameras in the shower/toilet areas. Video cameras are monitored 24/7 by the main control booth. Interviews with the Warden and PREA Coordinator reveal that inmate sexual safety and security was considered when deciding on placement of the additional cameras.</p> <p data-bbox="252 1957 724 1991">Corrective Action Recommendation:</p> <p data-bbox="252 2040 325 2074">None</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Clayton County Correctional Institute PREA Policy 104.01 b. GDOC Policy 208.06 c. Completed Pre-Audit Questionnaire submitted by CCCI d. GDOC SOP 103.10, Evidence Handling and Crime Scene Processing e. GDOC SOP 103.06, Investigations of Allegations of Sexual Contact, Sexual Abuse, Sexual Harassment of Offenders. f. U.S. Department of Justice's A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Compliance Manager b, SAFE/SANE Nurse c. No inmates were present that had reported sexual abuse to interview at the time of the audit. <p>Findings:</p> <p>115.21 (a) The local Sexual Abuse Response Team (SART) is responsible for the administrative and criminal investigation of all allegations of sexual abuse or Sexual Harassment. The Sexual Allegation Response Checklist is completed for all PREA allegations. In cases where allegations are made against staff members and the SART inquiry deems the allegation is unfounded or unsubstantiated by evidence, the case can be closed at the facility level. If the allegation is criminal in nature, the warden is consulted and the case may be handled by Georgia Department of Corrections investigators or the Clayton County Police Department. When conducting a sexual abuse investigation, agency investigators follow a uniform evidence protocol. These protocols are evident in GDOC Policies 103.06 and 103.10 and the US Department of Justice's (DOJ) National Protocol for Sexual Assault Medical Forensic Examinations.</p> <p>115.21 (b) The DOJ's A National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents is developmentally appropriate for youth.</p> <p>115.21 (c) CCCI Policy 104.01 VI,B,1,c allows for all inmates who experience sexual abuse are afforded access to a forensic medical examination. A SANE nurse is available to the CCCI by contacting the Georgia Diagnostic Center in Jackson, Georgia, a part of the Georgia Department of Corrections, to coordinate the services. These forensic examination can be conducted onsite. For off-site forensic examinations, the Georgia Regional Hospital System provides forensic examinations in Clayton, Cobb, Dawson, DeKalb, Douglas, Forsyth, Fulton, Gwinnett, Hall, Newton and Rockdale counties. Examinations are provided without cost to the victim. When possible, examinations are conducted by a SAFE/SANE nurse. If a SAFE/SANE</p>

is not available, a qualified medical practitioner would complete the examination. The facility has secured access to a SAFE/SANE for examinations. The facility has not requested any forensic medical examinations in the past year.

115.21 (d) The CCCI has entered into an MOU with the Southern Crescent Sexual Assault and Child Advocacy Center to provide a victim advocate to the victim in person or by other means. This MOU was signed on July 1, 2019 and is good for a period of three years. If the Southern Crescent Sexual Assault and Child Advocacy Center is not available to provide victim advocacy services, an advocate would be requested from the Georgia Diagnostic Correctional Prison. There were not victims of sexual abuse present at the facility to interview during the onsite.

115.21 (e) If requested, the CCCI would provide an advocate from the Southern Crescent Sexual Assault and Child Advocacy Center if they were not available to provide victim advocacy services, an advocate would be requested from the Georgia Diagnostic Correctional Prison to accompany the victim during the forensic medical examination to provide emotional support, crisis intervention, information and referrals. There were not victims of sexual abuse present at the facility to interview during the onsite for compliance measures.

115.21 (f) The Warden will assign the individual who conducts the internal investigation; all individuals conducting investigations must have previously received the special internal investigations training. A Lieutenant who is the Sexual Abuse Response Team (SART) investigator will normally complete the investigation. If the cursory review of evidence indicates that a criminal activity has occurred, the case may be forwarded to the GDOC Investigators for completion.

115.21 (g) The Auditor is not required to audit this provision.

115.21 (h) This provision is non-applicable as the agency always uses a qualified individual from a Rape Crisis Center to accompany the victim.

Corrective Action Recommendation:

None

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	1. Documents Reviewed: (Policies, directives, forms, files, records, etc.): a. Clayton County Correctional Institute LOP 104.01 b. GDOC Policy 208.06 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Clayton County Department of Corrections website:

<https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act>

e. Sample internal investigations (6)

2. Interviews:

a. Warden

b. PREA Coordinator

Findings:

115.22 (a) The CCCI policy 104.01 states, "An administrative and/or criminal investigation shall be completed for all allegations of sexual abuse and sexual harassment. Allegations that involve potentially criminal behavior will be referred for investigation to the OIC Criminal Investigations Division (CID)." In the past 12 months, there have been five allegations of sexual harassment or sexual abuse. All five cases were administrative investigations. None of the cases were referred for criminal investigation. All five of the investigations were completely in a timely manner.

115.22 (b) CCCI policy requires that all allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations. including if they conduct their own investigations, unless the allegation does not involve potentially criminal behavior. The agency's website includes information regarding this referral. The website states, "Any allegations of sexual abuse or harassment will be thoroughly investigated by both Clayton County Prison and also outside agencies. For inmate on inmate allegations, reports will be investigated by GDC Office of Professional Standards. For staff on inmate allegations, reports will be investigated by Clayton County Police Department as well as Georgia Department of Corrections. Further information on the PREA policy can be found on the GDC Public Website or contact the Clayton County Prison PREA Compliance Manager (Deputy Warden Randal Holsey) at 770-473-5777." The web address is <https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act>.

The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal behavior.

115.22 (c) CCCI Policy 104.01, page 9, B, 1, g. requires that when a separate entity is responsible for conducting criminal investigations, "the requirements of paragraphs (a) through (e) of this section shall also apply to any entity outside of the Department that is responsible for investigating allegations of sexual abuse in prisons or jails."

115.22 (d) Auditor is not required to audit this provision.

115.22 (e) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. PREA Training at Lesson Plan for all GDOC and Contracted Facility Employees (Lesson Plan and PowerPoint 2019) d. Review of random staff personnel files e. Random sample of employee training records f. PREA Acknowledgement Form for employees <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Interviews with random staff regarding their PREA training and knowledge <p>Findings:</p> <p>115.31 (a) The CCCI policy 104.01, requires all new employees who have contact with inmates to have in-depth training on PREA and Sexual Harassment in the Workplace. This includes the zero-tolerance policy for sexual harassment and sexual abuse (p. 3). Employees are trained on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting and response policies and procedures (pp. 4-47). All employees are trained on the right of inmates to be free from sexual harassment and sexual abuse (p. 28). Employees are trained on the rights of inmates and employees to be free from retaliation for reporting sexual abuse or sexual harassment (p. 28). The agency trains staff on the dynamics of sexual abuse and sexual harassment in confinement (pp. 32, 33, 47). Staff are trained on the common reactions of sexual abuse and sexual harassment victims (p. 21). Staff are trained in how to detect and respond to signs of threatened and actual sexual abuse (p. 21). Staff also receive training on how to avoid an inappropriate relationship with an inmate (p. 18). Staff receive training on how to communicate effectively and professionally with lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates (pp. 42-46). Finally, staff are trained in how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities (pp. 17-22). The auditor interviewed 12 random staff and all were fluent in the required training.</p> <p>115.31 (b) The training presented is tailored for housing of male inmates. This agency only manages one facility, so there are no reassignments to facilities housing opposite gender inmates.</p> <p>115.31 (c) The CCCI conducts training annually as required by the Georgia Peace Office Standards and Training. PREA is taught at least every other year and during the years that PREA is not taught, there are refresher courses on current policies regarding sexual abuse and sexual harassment. The typical PREA refresher class is one hour in length and covers a variety of topics each year.</p>

115.31 (d) The agency documents all PREA training and staff sign an acknowledgment of having received and understand the training. A random sample of training records were reviewed for compliance.

Corrective Action Recommendation:

None

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. PREA Training curriculum and materials for volunteers and contractors d. PREA Acknowledgement Form for Volunteers and Contractors <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Contractor b. Volunteer c. PREA Coordinator d. PREA Compliance Manager e. Warden <p>Findings:</p> <p>115.32 (a) The agency's PREA policy requires all volunteers and contractors who may have contact with residents to be trained on PREA requirements.</p> <p>115.32 (b) The level of training provided is based on the services provided and the level of contact they have with inmates. All contractors and volunteers that have contact with inmates are trained in the zero-tolerance policy regarding sexual harassment and sexual abuse and are informed on how to report an incident should they become aware of an incident. One volunteer was interviewed and compliance was found with this standard. Each individual interviewed was familiar with the zero-tolerance policy and how to report an incident of sexual harassment or sexual abuse.</p> <p>115.32 (c) The agency maintains documentation confirming that volunteers and contractors understand the training they have received. There are 19 volunteers and one contractor authorized in the facility. A review of randomly selected training confirm compliance with this provision.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.33	Inmate education
Auditor Overall Determination: Exceeds Standard	
Auditor Discussion	
<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. PREA Acknowledgement Forms d. PREA Video with Closed Captioning as well as the Spanish version e. CCCI Offender Handbook f. Orientation Checklist g. PREA Posters and Brochures posted and displayed in the facility h. Review of inmate files <p>2. Interviews</p> <ul style="list-style-type: none"> a. Random Sample of inmates b. Intake staff c. Staff who provides the comprehensive PREA training for residents d. PREA Coordinator <p>Findings:</p> <p>115.33 (a) The CCCI reported that 473 offenders have been admitted in the past 12 months and all have been provided comprehensive age-appropriate information within 7 days of intake. All residents in the CCCI are provided PREA orientation materials at intake. Staff interviewed indicate that intake education normally happens on the first day or second day the resident is admitted to CCCI.</p> <p>115.33 (b) All inmates receive the comprehensive PREA training within 30 days of arriving at CCCI. The GDOC PREA policy 208.06 requires this additional education within 15 days, but interviews with staff that provide the comprehensive PREA education/orientation indicate this training is normally done with the first week after the offender enters the facility. A review of inmate records indicated that inmates received this training within seven days. This far exceeds the required standard. The training consists of an open forum training lecture, the viewing of a video and an open discussion of what constitutes sexual harassment and sexual abuse within the facility. Inmates are advised that they have a right to be free from sexual abuse and harassment as well as free from retaliation if they report an incident. Inmates are informed as to how to report an incident. The video shown has an option for subtitles for the hearing impaired. However, visually impaired offenders are not housed in this facility since it is a work camp. Inmates are screened and for disabilities before being transferred to this facility. Offenders sign the PREA Acknowledgement Statement form and the PREA Video form to demonstrate they have received PREA training and they understand their rights under PREA and specifically understand the ways they can report sexual abuse and sexual harassment. The facility ensures key information about PREA is continuously and readily available and visible to offenders. PREA posters were observed in every housing unit as well as common</p>	

areas where inmates may spend some time such as the cafeteria, law library, programs area, etc. CCCI displays PREA posters in common areas of the facility with the abuse hotline number in bold print. Posters are displayed in English and Spanish.

115.33 (c) All CCCI inmate have received the required PREA training. CCCI only operates one facility.

115.33 (d) All inmates transferring into the facility from another facility receive training regarding their right to be free from both sexual abuse and sexual harassment and retaliation for reporting and incident as well as the agencies policies and procedures for responding to an incident.

115.33 (e) The CCCI maintains documentation of inmate education. An acknowledgement form is signed by each inmate. The auditor reviewed a sample of files for compliance.

115.33 (f) CCCI has key information posted throughout the facility that is continuously and readily available or visible to inmates through posters, handbooks, and pamphlets.

Corrective Action Recommendation:

None

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.1,VI,C,5,a-d c. Completed Pre-Audit Questionnaire submitted by CCCI d. Training curriculum for PREA: Investigating Sexual Abuse in a Confinement Setting e. Training curriculum for PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations f. Training documentation for staff completing the specialized training <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Investigative Staff b. PREA Coordinator c. PREA Compliance Manager d. Warden <p>Findings:</p> <p>115.34 (a) CCCI Local Policy 104.01 ,VI,C,5,a-d provides guidance on employee training. All investigators are required to have training on how to conduct an investigation in a confined setting, to include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The agency maintains documentation that agents and investigators have completed the required specialized training in conducting sexual abuse investigations. When an outside entity investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations. The CCCI investigators are able to investigate criminal and administrative cases. From time to time, the warden may choose to ask the Georgia Department of Corrections investigators or the Clayton County Police Department to investigate a case within the facility. The CCCI has one trained investigator.</p> <p>115.34 (b) Investigative staff complete the National Institute of Correction's PREA: Investigating Sexual Abuse in Confinement training. This curriculum covers each provision of this standard. The investigator interviewed was well versed on the curriculum and training received.</p> <p>115.34 (c) CCCI properly documents the training received by the Investigator. Copies of the Certificate of Completion are maintained in the employee's file as well as denoted on the Georgia Peace Officer's Standard and Training records. There is currently only one investigator assigned to CCCI.</p> <p>115.34 (d) The Auditor is not required to audit this provision.</p>

Corrective Action Recommendation:

None

115.35	Specialized training: Medical and mental health care
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1193 360">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 416 927 450">a. Georgia Department of Corrections Policy 208.06 <li data-bbox="252 461 608 495">b. CCCI LOP 104.01 VI,C,6 <li data-bbox="252 506 847 539">c. CCCI LOP 501.01 Contracted Medical Staff <li data-bbox="252 551 999 584">c. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 595 831 629">d. PREA Training completed by medical staff <p data-bbox="252 674 427 707">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 763 456 797">a. Medical Staff <li data-bbox="252 808 520 842">b. PREA Coordinator <li data-bbox="252 853 647 887">c. PREA Compliance Manager <p data-bbox="252 931 368 965">Findings:</p> <p data-bbox="252 1021 1477 1267">115.35 (a) The CCCI Local operating policy 104.01 and policy 501.01, relate to training of medical staff. This facility does not have Mental Health staff assigned to them. Inmates requiring mental health assistance are transferred to the Georgia Diagnostic Center for assistance. The medical staff member at CCCI has received the training required by this policy. There is only one nurse assigned to this facility. A review of the Medical staff personnel files include a copy of the required PREA training.</p> <p data-bbox="252 1323 1445 1435">115.35 (b) Medical staff at CCCI do not conduct forensic examinations. Inmates needing a forensic examination may be transferred to the Georgia Diagnostic Center or the a Georgia Regional Hospital in Clayton County that conducts forensic examinations.</p> <p data-bbox="252 1491 1422 1570">115.35 (c) CCCI maintains records of the training completed my medical staff. These files were located in the employee's personnel file.</p> <p data-bbox="252 1626 1461 1693">115.35 (d) Medical staff received the same training required of contractors and volunteers as well as the training required by employees. The medical provider is a contract nurse.</p> <p data-bbox="252 1749 719 1783">Corrective Action Recommendation:</p> <p data-bbox="252 1827 320 1861">None</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01, VI,D,1 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument (located in SCRIBE) <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Staff that complete the Risk Screening Assessment b. PREA Coordinator c. PREA Compliance Manager <p>Findings:</p> <p>115.41 (a) Agency policy 104.01 VI,D,1 requires screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates.</p> <p>115.41 (b) The GDOC policy requires that all offenders have an initial needs assessment/intake summary performed by a Counselor within 24 hours of entering the facility. This intake process utilizes a variety of assessment processes to gather information about the offender. The screening process is very thorough and gathers a significant amount of information that is used to determine the offender's needs. The CCCI reports that 473 offenders have entered the facility within the past 12 months and were screened as required by this standard. All of these offenders length of stay was at least 72 hours. All offenders were screened within the required 72 hours. Most often, inmates are screened the same day they enter the facility. This exceeds the standard.</p> <p>115.41 (c) The CCCI uses the Risk Screening Assessment Tool prescribed by the Georgia Department of Corrections. This form is electronic and stored in an offender management program named SCRIBE.</p> <p>115.41 (d) The Risk Screening instrument appropriately covers nine of the ten areas of information as detailed in this standard. The screening instrument does not reveal if the offender is being held solely for the purposes of civil immigration, however, this is a work camp strictly for housing criminally convicted offenders. There would not be an incident where an individual would be held solely for civil immigration purposes. Additional information received in the intake assessment through other screening instruments adds key information that is used to house offenders appropriately.</p> <p>115.41 (e) When assessing inmates for risk of sexual abuse the screening considers prior acts of sexual abuse, prior convictions for violent offenses and any history of institutional violence</p>

or sexual abuse. Counselors review criminal histories, interview inmates and review records of institutional violence.

115.41 (f) CCCI LOP 104.01 VI,D,5 requires that inmates be reassessed within 30 days based upon any additional, relevant information received by the facility since the intake screening. CCCI only completed one reassessment in 2018. This is not in compliance with the standard and will require corrective action.

115.41 (g) CCCI Policy 104.01 VI, D, 5 requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. There was one incident where a reassessment was completed under this provision in 2018.

115.41 (h) CCCI LOP 104.01 VI,D,3 and VI,D,7 state that inmates may not be disciplined for not disclosing complete information in response to questions asked as part of the risk screening assessment.

115.41 (i) CCCI Policy 104.01 VI,D,5 regulates the control of access to the risk screening assessments. The facility has implemented appropriate controls on the dissemination of the information received at intake. Only Counselors have immediate access to the screening instruments. PREA Coordinator and PREA Compliance Managers may gain access to the screening instrument by going to the counselors and requesting to see the instruments. Counselors conduct the screening and all files are kept locked in counselor's offices.

Corrective Action Recommendation:

115.41 (f) CCCI must complete a reassessment of inmates within a period of 30 days from the inmate's arrival at the facility.

For clarification on this standard, I have detailed information gleaned from the PREA Resource Center's Frequently Asked Questions webpage:

Q: Standards 115.41(f) and 115.241(f) require that the facility "reassess the inmate's/resident's risk of victimization or abusiveness based on any additional, relevant information received by the facility since the intake process" and that it do so no more than 30 days after intake. The question is whether this standard subsection requires that EVERY inmate be reassessed within 30 days of arrival at the facility to determine whether any relevant new information exists; OR, alternatively, whether it requires that some process be in place to capture new information that arrives at the facility within 30 days and, when new information arrives, it prompts a reassessment?

A: The standard requires both. First, there is a general and continuing obligation to conduct a screening reassessment whenever warranted upon receipt of additional relevant information. Specifically, standard 115.41(g) requires that "[a]n inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness." This continuing obligation extends through the duration of the inmate's incarceration.

By contrast, the standards also require an affirmative reassessment within a set time period, but no later than 30 days of intake. Specifically, standard 115.41(f) requires that “[w]ithin a set time period, not to exceed 30 days from the inmate’s arrival at the facility, the facility will reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening” (emphasis added).

While standard 115.41(f) requires an affirmative reassessment within 30 days, the reassessment need not “start from scratch.” For example, as noted in the PREA Notice of Final Rule, a facility may generally rely upon information previously gathered, so long as the reassessment “captures any changes in risk factors that may have occurred subsequent to the facility’s prior gathering of information regarding that inmate.”

While a facility may (and should) have a system in place for capturing additional or new information from a variety of sources (e.g., mental health assessment, disciplinary history, or allegations of relevant threats or victimization), the 30-day affirmative reassessment requires, at a minimum, that screening staff consult available sources (including the inmate) to determine whether any previously unknown triggering event or information has become available and to document such review. In short, as opposed to the “passive” requirements under standards 115.41(g), standard 115.41(f) requires screening staff to affirmatively “look and inquire.”

Some risk factors are subject to change within the first 30-days after intake and may only be determined by making affirmative inquiry of the inmate. For example, the “inmate’s own perception of vulnerability” can only be known by the inmate. See standard 115.41(d)(9). In addition, the inmate may have experienced unreported sexual victimization during this time period. See standard 115.41(d)(8). Accordingly, all 30-day reassessment requires consultation with the inmate.

As noted in the PREA Notice of Final Rule, “[t]he final standard requires that inmates who remain in custody undergo a more extensive classification process [within 30 days].” This requirement recognizes that information relevant to the risk and classification needs will become available as staff interview, assess, and observe the inmate, and as the facility receives information from other agencies and sources.

During the Corrective Action Period, staff need to complete reassessments of inmates who have been in their custody for 30 days. Institute a procedure for ensuring the reassessments are completed within 30 days. The auditor suggests printing a list of inmates at 21 days to allow for sufficient time to complete the reassessments within the 30 day requirement.

Update: October 31, 2019

During the Corrective Action Period, the facility completed all 30-day reassessments and implemented a process where they could ensure the reassessments are completed in a timely manner. The auditor requested a copy of the facility census in order to select inmate files to review. Once the auditor made her selections, the facility promptly provided verification of each file requested.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI c. Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Staff that complete the Risk Screening Assessment b. PREA Coordinator c. PREA Compliance Manager d. Interview with LGBTQI Inmate (1) <p>Findings:</p> <p>115.42 (a) CCCI uses the information gleaned from the Risk Assessment tool in determining housing, work, bed, education and program assignments with the goal to keep separate inmates that may be vulnerable to sexual abuse from inmates that are sexually abusive.</p> <p>115.42 (b) Agency policy 104.01, VI D, 10 requires the agency makes individualized determination based on how to ensure the sexual safety of each inmate.</p> <p>115.42 (c) Policy 104.01, VU, D, 11 requires the facility staff to make individualized determinations of how to ensure the safety of each transgender or intersex inmate offender on a case-by-case basis.</p> <p>115.42 (d) Placement and programming assignments for each transgender or intersex inmate are reassessed at least twice a year to review any threats to safety experienced by the inmate.</p> <p>115.42 (e) Transgender and intersex inmate's own views with respect to their own safety is given serious consideration when determining housing, programming, education, work and bed assignments. This facility has not had any transgender or intersex inmates in the facility. The State of Georgia Department of Corrections has not sent them any Transgender or Intersex inmates to date. The facility is capable of managing the situation should it arise.</p> <p>115.42 (f) Transgender and intersex inmates would be afforded the opportunity to shower separately from other inmates.</p> <p>115.42 (g) CCCI does not place gay, bisexual, transgender or intersex inmates in dedicated facilities, units, or wings solely in the basis if such identification or status. They are not under</p>

any sort of consent decree, legal settlement or legal judgment for the purpose of protecting such inmates. The CCCI has reported they have had one LGBTI offenders in the program for the previous 12 months. The auditor did interview one inmate that identified as a gay individual. He was not placed in a dedicated facilities, units, or wing. In fact, I do not believe the facility has knowledge that he is gay. This was revealed during an interview with the individual.

Corrective Action Recommendation:

None

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 VI,D,13 b. Georgia Department of Corrections SOP 209.06, Administrative Segregation. c. Completed Pre-Audit Questionnaire submitted by CCCI d. Georgia Department of Corrections PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument e. Review of housing assignments of LGBTQI Offender <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Staff that complete the Risk Screening Assessment b. Intake Staff c. Warden d. PREA Coordinator e. PREA Compliance Manager f. Interview with LGBTQI Offender <p>Findings:</p> <p>115.43 (a) The GDOC PREA Policy 208.06 and the CCCI LOP 104.01VI, D, 13 policies prohibit the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. In the past 12 months no inmates have been segregated in involuntary housing pending completion of assessment.</p> <p>115.43 (b) GDOC policy prohibits offenders at high risk for sexual victimization or aggression from being placed in involuntary segregation based solely on that determination unless a determination has been made that there is no available alternative means of separation from likely abusers. Offenders placed in segregation would receive services in accordance with GDOC SOP 209.06, Administrative Segregation.</p> <p>115.43 (c) If inmates were placed involuntarily in segregated housing only until and alternative means of separation could be arranged, the assignment would not exceed a period of thirty days. Operationally, if an inmate was identified that needed to be kept separate, the State of Georgia would be notified and the inmate moved to a better location to allow for his safety and security.</p> <p>115.43 (d) There were no files to review for compliance with this standard as no inmates have been placed in segregated housing for their safety based on risk of sexual abuse.</p>

115.43 (e) If there were an inmate placed in segregate housing the facility would review the inmate's status every thirty days to determine if there is a continuing needs for separation from the general population. CCCI Policy 104.01 VI,D,13,d states, "Every 30 days, the facility shall afford each such offender a review to determine whether there is a continuing need for separation from the general population." There were no files available for review as no inmates had been housed in this status in the past 12 months.

Corrective Action Recommendation:

None

115.51	Inmate reporting
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Offender educational materials (Inmate handbook; PREA handout; posters, brochures) d. Orientation Checklist e. Inmate Handbook <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Random Sample of staff b. Random Sample of Inmates c. PREA Coordinator d. PREA Compliance Manager <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. Testing of the PREA Hotline by auditor b. Tour of facility where abuse hotline number readily visible to offenders and staff through posters and pamphlets <p>Findings:</p> <p>115.51 (a) The CCCI provides offenders multiple internal ways to report sexual abuse and sexual harassment, retaliation, and staff neglect. Offenders receive education about reporting at intake, through comprehensive PREA education within 15 days and through visible and available information in the facility at all times. Interviews with random staff and inmates revealed that inmates and staff are all well aware of the variety of mechanisms through which they can report. During the onsite review, the auditor observed PREA Posters mounted on the walls of all dorms and housing areas as well as pamphlets that are readily available to inmates. The reporting methods include verbally telling a staff member, medical staff, volunteer, contractor, PREA Coordinator or the PREA Compliance Manager; calling the PREA hotline; submitting a written grievance; having a third-party submit an oral or written complaint on the individuals behalf; offenders may write a kite (informal written correspondence to supervisory staff). The facility provides offenders with access to tools necessary to make a written report.</p> <p>115.51 (b) The Department maintains a sexual abuse hotline, currently known as the "PREA" hotline (*7732, toll-free from any dorm phone). Inmates may This call will not require the use of the offender's PIN number. Monitoring of this line is the responsibility of the Office of Investigations and Compliance, with immediate oversight by the Department's PREA</p>	

Coordinator, or designee. Inmates may remain anonymous if they prefer when reporting an incident. The auditor tested the hotline to ensure that the system is operational. The auditor left a voice mail message that was returned in less than 12 hours. The CCCI does not house inmates solely for immigration purposes. However, they do provide consular information for inmates as needed.

115.51(c) CCCI LOP 104.01, VI,E,1,d states, "Staff members shall accept reports made verbally, in writing, and from third parties and shall promptly document any verbal reports. The staff member receiving a report of sexual abuse or sexual harassment must divulge the name of the person from whom they received the report, if known." A review of investigative files revealed that staff do document reports of sexual harassment and sexual abuse as required.

115.51 (d) Staff may privately report an incident of sexual harassment or sexual abuse utilizing the same resources that are available to inmates. They may also contact the PREA Coordinator or any supervisor to file a report. Staff have been trained in these procedures as part of biennial PREA Training.

Corrective Action Recommendation:

None

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policies: 208.06 and 227.02 b. Completed Pre-Audit Questionnaire submitted by CCCI c. CCCI Offender Handbook d. Review of Grievances (2018) e. CCCI LOP 104.01, VI,E,2 <p>2. Interviews:</p> <ul style="list-style-type: none"> a. There were no offenders located on site that had filed an emergency grievance to interview. <p>Findings:</p> <p>115.52 (a) Georgia Department of Corrections Policy 227.02, Grievances, VI, B, 2, i, states, "Sexual Abuse and Sexual Harassment shall be forwarded to the Institutional Sexual Assault Response Team (SART) and processed according to SOP 208.06, Prison Rape Elimination Act: Sexually Abusive Behavior Prevention and Intervention Program;" Complaints received regarding sexual abuse or sexual harassment are not treated administratively. They are immediately forwarded to the SART team to be processed according to policy 208.06, Prison Rape Elimination Act: Sexually Abusive Behavior Prevention and Intervention Program;</p> <p>115.52 (b) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>115.52 (c) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>115.52 (d) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>115.52 (e) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>115.52 (f) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>115.52 (g) The CCCI is exempt from this standard as it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p>Corrective Action Recommendation:</p>

None

Best Practice Recommendation:

Provide information in the inmate handbook that details that any grievance for sexual abuse or sexual harassment will be treated as a PREA complaint and dealt with according to GADOC Policy 208.06 and CCCI LOP 104.01.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policies: 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Offender Handbook; PREA handout; posters, brochures d. CCCI LOP 104.01 e. MOU with SCSACAC <p>2. Interviews</p> <ul style="list-style-type: none"> a. Random sample of offenders b. PREA Compliance Manager c. Investigative Staff d. SCSACAC personnel (telephonic) <p>Findings:</p> <p>115.53 (a) The CCCI has entered into an agreement with the Southern Crescent Sexual Assault and Child Advocacy Center located in Clayton County to assist with victim advocacy for emotional support services related to sexual abuse and sexual harassment. The facility provides inmates with a pamphlet of information on how to contact the advocates for assistance. The facility does not house inmates solely for immigration purposes. Inmates may make these calls confidentially.</p> <p>115.53 (b) Inmates are provided a handout during the intake process that provides contact information for the Southern Crescent Sexual Abuse and Child Advocacy Center (SCSACAC) while states that all calls to the SCSACAC are confidential.</p> <p>115.53 (c) The CCCI has entered into an MOU with SCSACAC for providing Advocacy services to inmate victims of sexual abuse or sexual harassment. The latest MOU was signed on July 1, 2019 and is valid for a period of three years.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policies: 208.06 (PREA) and 227.02, Grievance Procedures b. Completed Pre-Audit Questionnaire submitted by CCCI c. Review of Agency Website d. Review of Investigative Files e. CCCI LOP 104.01 <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Random sample of offenders b. PREA Compliance Manager c. Investigative Staff <p>Findings:</p> <p>115.54 (a) The Clayton County Correctional Institute website provides information on how to report sexual abuse and sexual harassment to the state PREA hotline or directly to the facility. Basic PREA information regarding zero tolerance and how to report an incident are found on the website at: https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act. This information is located on their website as well as being posted in the facility in areas where visitors, attorneys and the public may enter.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. CCCI LOP 104.01 d. Investigative Files. <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Compliance Manager b. Warden c. Random sample of staff d. Medical staff e. No mental health providers were interviewed as there are none assigned to this facility. <p>Findings:</p> <p>115.61 (a) Georgia Department of Corrections Policy 208.06 and CCCI LOP 104.01 both require staff to be mandatory reporters of an incident of sexual harassment and sexual abuse, retaliation for reporting and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews conducted with staff reveal that they are familiar with the mandatory reporting standard and how to report an incident.</p> <p>115.61 (b) CCCI LOP 104.01 VI, F, 1, i states, "Staff members shall not disclose any information concerning sexual abuse, sexual assault, sexual harassment, or sexual misconduct of an offender, including the names of alleged victims or perpetrators, except to report the information as required by this policy or the law, or to discuss such information as a necessary part of performing their job." Staff interviewed understand the sensitivity of an allegation of sexual abuse and sexual harassment and the need for confidentiality.</p> <p>115.61 (c) Contracted medical staff are required to report sexual abuse and to inform inmates of the practitioner's duty to report and the limitations of confidentiality, at the initiation of services. The CCCI has one nurse assigned to this facility. The nurse was well versed in mandatory reporting the limitations of confidentiality. The nurse indicated that a counselor explains the nurse's limitation of confidentiality and the duty to report to the inmate. This facility does not have mental health staff. Should an inmate require mental health services they would be transferred to the Georgia Diagnostic Center for services.</p> <p>115.61 (d) CCCI does not house inmates under the age of 18. Georgia Code 30-5-5 addresses vulnerable adults in the state of Georgia. Georgia has strict mandated reporting laws that require medical professionals, caregivers, and even employees of financial institutions to report abuse of vulnerable adults to local authorities as well as to Adult Protective Services.</p>

115.61 (e) CCCI staff are required to report any incident of sexual abuse or sexual harassment to the facility's designated investigator. This includes reports received via third party complaints. The warden and Investigator confirmed in interviews that this is common practice and investigative files were reviewed to confirm as well.

Corrective Action Recommendation:

None

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. CCCI LPO 104.01 <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Random sample of staff b. PREA Compliance Manager c. Interview with counselors who conduct intake screening and assessment d. Warden <p>Findings:</p> <p>115.62 (a) The agency reports that there have been no situations in the past 12 months where the facility determined an offender was subject to substantial risk of imminent sexual abuse. Review of policy and interviews with the PREA Coordinator, PREA Compliance Manager, and a random sample of staff demonstrated the protective measures that would be taken in the event it was found that a resident was at imminent risk of sexual abuse.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Compliance Manager b. Warden <p>Findings:</p> <p>115.63(a) CCCI Policy 104.01, VI,F,3,a states, "In cases where there is an allegation that sexual abuse occurred at another Department facility, the Warden/Superintendent (or his/her designee) of the victim's current facility will provide notification to the Warden/Superintendent of the identified institution and the Department's PREA Coordinator. In cases alleging sexual abuse by staff at another institution, the Warden/Superintendent of the offender's current facility refers the matter directly to the Regional SAC. For non-Department facilities, the Warden/Superintendent will notify the appropriate office of the facility where the abuse allegedly occurred and the Department's PREA Coordinator." The agency reported that in the past 12 months, the facility has received no allegations that a CCCI offender was abused while confined at another facility.</p> <p>115.63 (b) CCCI LOP 104.01 VI,F,3,b requires the agency to provide notification as soon as possible but no later than 72 hours after receiving an allegation of sexual abuse or sexual harassment.</p> <p>115.63 (c) The CCCI policy requires staff to document that it has provided notice to a facility with 72 hours of receiving the allegation. There were no such reports in 2018 or 2017 that that required documentation.</p> <p>115.63 (d) The CCCI reports that in the past 12 months, the agency has received no notifications of sexual abuse from other facilities. Interviews with the facility Warden and PREA Coordinator demonstrate compliance with this standard.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Georgia Department of Corrections Sexual Allegation Response Checklist form <p>2. Interviews</p> <ul style="list-style-type: none"> a. Random Sample of Staff <p>Findings:</p> <p>115.64 (a) The CCCI reports that in the past 12 months, there have been zero allegations that a resident was sexually abused. Thus, there were no victims available for interview by the auditor. Nor were there any first responder staff (security or non-security staff) to interview. The agency PREA policy requires the use of the Georgia Department of Corrections Sexual Allegation Response Checklist form when there is an incident of sexual abuse. GDOC policy requires that security staff first responders are required to:</p> <p>Notify your shift OIC and ensure the victim is separated from the aggressor. Instruct the alleged victim to refrain from changing clothes, drinking eating, brushing teeth or any other activity that could destroy physical evidence. If known, instruct the alleged perpetrator to refrain from changing clothes, drinking, eating brushing teeth or any other activity that could destroy physical evidence. Secure the crime scene if applicable to restrict access to the area and to prevent handling evidence until an internal investigator arrives. Interviews with staff indicate that do understand all of the the duties required of a first responder to the victim and abuser. Staff were well versed in their duties in responding to a sexual abuse incident.</p> <p>115.64 (b) A non-security staff first responder is required to request the victim to not destroy evidence (as detailed in standard) and then notify a security staff member. There were no allegations in the past 12 months that involved non-security staff to respond.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. GADOC Coordinated Response Plan Attachment 7 from policy 208.06 <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Warden <p>Findings:</p> <p>116.65 (a) The CCCI has developed an individualized written institutional plan to coordinate actions taken in response to an incident of sexual abuse. The Georgia Department of Corrections Policy 208.06 attachment 7 served as a guideline for a written institutional plan. The plan is an excellent document that details the requirements of this standard. CCCI LOP 104.01, VI,F,5,a,1-6also details what the plan should contain.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Warden/Agency Head <p>Findings:</p> <p>115.66 (a) The CCCI does not have any collective bargaining agreements in place and has not had any at any time. Clayton County is non-union and therefore has no union collective bargaining agreements. Thus, it was determined this standard is non-applicable.</p> <p>115.66 (b) Auditor is not required to audit this provision.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. GCDOC Attachment 8 to Policy 208.06, Retaliation Monitoring Form <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Warden b. PREA Compliance Manager c. PREA Coordinator d. No Inmates were placed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse to interview e. No inmates who reported a Sexual Abuse were located in the facility <p>Findings:</p> <p>115.67 (a) The CCCI reports that in the past 12 months there have been zero incidents of retaliation reported, known or suspected. The agency PREA policy clearly states that retaliation against any offender or staff member that reports sexual abuse or participates in an investigation is not tolerated. The agency has appointed an individual responsible for retaliation monitoring.</p> <p>115.67 (b) The CCCI LOP 104.01 page 24, VI,F,6, b states, "Multiple protection measures include offender housing changes or transfers, removal of alleged staff members or offender abusers from contact with victims, and emotional support services for offenders or staff members who fear retaliation for reporting or for cooperating with investigations."</p> <p>115.67 (C) While there have not been any incidents that required retaliation monitoring in the past 24 months, staff interviewed were well versed on their requirements to meet this provision. Interviews with key leadership staff indicate the requirements of this standard would be met in the event the agency does gain knowledge, suspicion or an actual allegation of retaliation. The GADOC has provided an attachment to Policy 208.06 that is a form to be used for retaliation monitoring. The form covers a variety of monitoring techniques and guidance in what to document.</p> <p>115.67 (d) Monitoring for retaliation requires periodic checks of the victim.</p> <p>115.67 (e) Any individual that cooperates with an investigation would be protected from retaliation if they expressed a fear of retaliation. The facility would take measures to protect the individual, staff or inmate, from retaliation.</p>

	<p>115.67 (f) Auditor is not required to audit this provision.</p> <p>Corrective Action Recommendation:</p> <p>None</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. Completed Pre-Audit Questionnaire submitted by CCCI c. There were no 30 day reviews to observe. <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Segregated Housing Unit Staff b. No inmates were available to interview that were placed in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. Tour of the facility indicates there are a few Isolation/Segregation cells that are used for Administrative or Disciplinary purposes. <p>Findings:</p> <p>115.68 (a) The CCCI has minimal segregation cells in the facility. GDOC and CCCI LOP policy mandates that offenders would only be placed in involuntary segregation when a determination has been made that there is no available alternative means of separation from likely abusers. In the event of a sexual abuse incident the alleged perpetrator would most likely be moved to another facility for secure housing. There were no inmates involuntarily placed in segregation housing in the past 12 months who have alleged sexual abuse. The CCCI would seek alternate housing for the inmate to include sending the inmate to the Georgia Diagnostic Center for placement.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Training records for select staff who have completed the Conducting Internal Investigations training e. Review of training curriculum for Conducting Internal Investigations f. Review of investigative files g. Georgia Department of Corrections Policy 103.06 <p>2. Interview</p> <ul style="list-style-type: none"> a. PREA Coordinator b. PREA Compliance Manager c. Investigative Staff d. No Inmates were present that had reported sexual abuse. <p>Findings:</p> <p>115.71 (a) CCCI Policy 104.01, VI, G governs Investigations in the facility. Facility Investigative staff make an initial inquiry to determine if a report of sexual abuse or sexual harassment is a rumor or an allegation. The local Sexual Abuse Response Team (SART) is responsible for the initial inquiry and subsequent administrative investigation of all allegations of sexual abuse or sexual harassment with limitations. In cases where allegations are made against staff members and the SART inquiry deems the allegation is unfounded or unsubstantiated by evidence of facility documentation, video monitoring systems, witness statements, or other investigative means, the case can be closed at the facility level. Cases rising to the criminal level are completed by the Georgia Department of Corrections Investigative staff or the Clayton County police department. The agency treats third-party or anonymous reports of sexual abuse in the same manner as they would an initial outcry by a victim.</p> <p>115.71 (b) All allegations of sexual abuse are investigated by staff that have received specialized training for conducting investigations in a confinement pursuant to 115.34. Investigative staff have completed the required training.</p> <p>115.71 (c) Investigators gather and preserve direct and circumstantial evidence, including available physical and DNA evidence, any electronic monitoring data, and interview alleged victims, suspected perpetrators, and witnesses. During the investigation, investigative staff review prior complaints and reports of sexual abuse involving the suspected perpetrator. A review of investigative files indicates that investigative staff perform these duties.</p> <p>115.71 (d) In cases that appear to be criminal in nature, the agency would only conduct</p>

compelled interviews after consulting with prosecutors. Cases that rise to the level of criminal activity will typically be handled by the GDOC Investigators or the Clayton County Police Department.

115.71 (e) The credibility of the alleged victim, suspect or witness is assessed on an individual basis and is not based on the fact that the individual is incarcerated or a staff member. The agency does not require victims to submit to a polygraph examination or other truth-telling devices as a condition for proceeding with the investigation. No Inmates were present to interview that had reported sexual abuse.

115.71 (f) Staff completing Administrative investigations attempt to determine if staff actions or inactions contributed to the abuse. Administrative investigative reports include a description of physical evidence, the reasoning behind the credibility assessment and the investigative facts and findings. There were no criminal investigative cases to review.

115.71 (g) All criminal investigations are documented in writing. Policy mandates that the reports include a description of the physical, testimonial and documentary evidence. Copies of all documentary evidence are to be attached to case file, when feasible.

115.71 (h) All substantiated cases that appear to be criminal are referred for prosecution. There have not been any substantiated allegations since the last PREA Audit conducted in 2016.

115.71 (i) CCCI retains all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The GADOC PREA policy 208.06 requires investigation notes on criminal and administrative cases be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years; or 10 years from the date of the initial report, whichever is greater.

115.71 (j) Interviews with investigative staff revealed that if an alleged victim leaves their control or the abuser leaves their employment the agency will continue the investigation.

115.71 (k) Auditor is not required to audit this provision.

115.71 (l) When outside agencies investigate sexual abuse, the facility cooperate with outside investigators by providing support, collecting evidence and ensuring all electronic monitoring data is secured. The Investigator and PREA Compliance Manager work with the outside entities to stay informed about the progress of the investigation.

Corrective Action Recommendation:

None

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Review of Investigative Files <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Investigative staff b. PREA Compliance Manager <p>Findings:</p> <p>115.72 (a) The CCCI reports that they use the preponderance of the evidence for determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with investigative staff confirm compliance with this standard. A review of investigative files confirm this as well.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.73	Reporting to inmates
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 1193 358">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 414 1407 448">a. Georgia Department of Corrections Policy 208.06, PREA and 203.03, Incident Reports <li data-bbox="252 459 518 492">b. CCCI LOP 104.01 <li data-bbox="252 504 1002 537">b. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 548 1125 582">c. Review of completed investigations to include notices to inmates. <p data-bbox="252 627 418 660">2. Interviews</p> <ul style="list-style-type: none"> <li data-bbox="252 716 513 750">a. Investigative staff <li data-bbox="252 761 651 795">b. PREA Compliance Manager <li data-bbox="252 806 1236 840">c. There were no inmate that had reported sexual abuse onsite to interview. <p data-bbox="252 884 375 918">Findings:</p> <p data-bbox="252 974 1481 1299">115.73 (a) The CCCI reports that there have been five investigations of alleged resident sexual abuse or sexual harassment that were completed by the agency in the past 12 months. All five cases were administrative investigations. CCCI policy requires them to inform inmates that claim sexual abuse or sexual harassment whether the allegation was determined to be substantiated, unsubstantiated or unfounded. CCCI uses a PREA Disposition Offender Notification Form to notify inmates of the status of the investigation. Copies were observed in all investigative files for compliance. There were no inmates present to interview that had claimed sexual abuse.</p> <p data-bbox="252 1355 1471 1512">115.73 (b) In the event CCCI does not complete the investigation, they will request status updates from the investigative agency so they can keep the inmate informed of the outcome of the case. There were no cases alleging sexual abuse completed by outside agencies in the past 12 months, therefore no notices were reviewed.</p> <p data-bbox="252 1568 1439 1814">115.73 (c) CCCI Policy 104.1, VI, G, 15 requires that If an inmate alleges that a staff member sexual abused him, the facility will inform the victim when the staff member is no longer employed by the agency, when the staff member is indicted on a charge related to sexual abuse within the facility, or if they learn that the staff member was convicted of a charge related to sexual abuse within the facility. There were no cases to review in the past 12 months.</p> <p data-bbox="252 1870 1468 1982">117.73 (d) CCCI policy 104.01 requires the facility to notify the victim is an inmate abuser has been indicted or convicted of a sexual abuse case within the facility. There were no cases to review in the past 12 months.</p> <p data-bbox="252 2038 1481 2116">115.73 (e) Facility policy 104.01, VI, G, 16 page 26 requires staff to documented this notice on SOP 208.06 attachment 3, Offender Notification Form.</p>

115.73 (f) Auditor is not required to audit this provision.

Corrective Action Recommendation:

None

115.76	Disciplinary sanctions for staff
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 280">Auditor Discussion</p> <p data-bbox="252 327 1193 358">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 414 927 445">a. Georgia Department of Corrections Policy 208.06 <li data-bbox="252 456 517 488">b. CCCI LOP 104.01 <li data-bbox="252 499 1002 530">b. Completed Pre-Audit Questionnaire submitted by CCCI <p data-bbox="252 586 427 618">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 674 512 705">a. Investigative staff <li data-bbox="252 716 651 748">b. PREA Compliance Manager <li data-bbox="252 759 523 790">c. PREA Coordinator <p data-bbox="252 846 373 878">Findings:</p> <p data-bbox="252 934 1481 1176">115.76 (a) CCCI Policy 104.01, VI,I,1,a, page 27 states, "Staff members that engage in sexual misconduct with an offender shall be banned from correctional institutions or subject to disciplinary action, up to and including termination, whichever is appropriate, and may also be referred for criminal prosecution when appropriate." The CCCI reported that in the past 12 months, there were no staff terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="252 1232 1465 1429">115.76 (b) Policy 104.01, VI,I,1,b, page 27 requires that termination be the presumptive disciplinary sanction for sexual misconduct. Pursuant to O.C.G.A. § 16-6-5.1, it is a felony for correctional staff to have sexual contact with an offender. In the past twelve months, no staff have been terminated or resigned in lieu of termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="252 1485 1449 1646">115.76 (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) is be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="252 1702 1449 1863">115.76 (d) CCCI LOP 104.01 ,VI,I,1,d requires that all cases that all criminal cases be reported to the Georgia Peace Officer Standards and Training Council (POST). POST is the licensing body responsible for all Peace Officers in the State of Georgia to include, Law Enforcement, Fire, and Corrections. There were no cases reported in the past 12 months.</p> <p data-bbox="252 1919 724 1951">Corrective Action Recommendation:</p> <p data-bbox="252 2007 325 2038">None</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Review of Investigative Files <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Investigative staff b. PREA Compliance Manager c. Warden <p>Findings:</p> <p>115.77 (a) CCCI LOP 104.01, VI,1,2 page 28 states, "Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with offenders, in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer." Interviews with the Warden confirm that volunteers and contractors that violate the sexual abuse policies would be reported to law enforcement agencies if a crime had been committed and to relevant licensing bodies. Accused contractors and volunteers would be banned from entry into the facility. The contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. The facility reports that there were no cases to report in the past 12 months.</p> <p>115.77 (b) Any contractor or volunteer that violates CCCI sexual abuse or sexual harassment policies would be banned from contacting the alleged victim.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06, PREA, 209.01, Inmate Discipline and 508.18, Inmates with Mental Health Discipline Procedures. b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. CCCI Inmate Handbook e. Investigative Reports <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Compliance Manager b. Warden c. Medical staff <p>Findings:</p> <p>115.78 (a) CCCI policy 104.01, VI, I, 3, b states that inmates may be disciplined for violations of this standard. The GDOC Policy 209.01, Inmate Discipline, provides a formalized disciplinary policy surrounding sexual abuse and sexual harassment. Inmates would be subjected to disciplinary action only following a formal disciplinary process following a criminal finding of guilt for inmate on inmate sexual abuse. There were no cases reported in the past 12 months.</p> <p>115.78 (b) Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>115.78 (c) When determining what types of sanction, if any, should be imposed, the facility disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. GDOC Policy 508.18 addresses Inmates with Mental Health that are facing disciplinary action.</p> <p>115.78 (d) CCCI does not offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. Should inmates need these services, they would be transferred to the Georgia Diagnostic Center for mental health services.</p> <p>115.78 (e) CCCI Policy 104.01 states inmate can only be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to the contact.</p> <p>115.78 (f) Inmates are not disciplined for making a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred. There have been no</p>

incidents where residents were disciplined for PREA-related conduct, the auditor could not interview anyone and no documentation exists to review.

115.78(g) CCCI LOP 104.0, VI,1,3,a prohibits all sexual activity between inmates. Inmates may be disciplined for sexual activity only if the facility determines that the activity was coerced.

Corrective Action Recommendation:

None

115.81	Medical and mental health screenings; history of sexual abuse
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Staff that complete Risk Screening Assessments b. Medical staff c. PREA Compliance Manager d. PREA Coordinator <p>Findings:</p> <p>115.81 (a) -1,2,3 The CCCI reports that in the past 12 months, no inmates have disclosed prior victimization during screening; thus, no inmates were offered follow-up meetings with mental health practitioner. Agency policy requires the 14-day follow-up meeting with medical or mental health practitioner if sexual victimization or sexual perpetration is disclosed during screening at intake. Medical staff would maintain secondary materials related to these services as the inmate would be sent to another facility for mental health follow up.</p> <p>115.81 (b) CCCI is a prison but they do not provide mental health care onsite. Inmates who have previously perpetrated sexual abuse, as indicated during the screening process would be offered a follow up meeting with a mental health practitioner at the Georgia Diagnostic Center. This follow up would be within the required 14 days of the intake screening. In the past 12 months there have not been any inmates who have previously perpetrated sexual abuse as indicated through the screening process. This is a work camp that receives inmates that were previously screened at the state level.</p> <p>115.81 (c) Not applicable as this is not a jail facility, see 115.81 (a).</p> <p>115.81 (d) CCCI LOP 104.1,VI,J,1,a states, "Information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and other staff as necessary for treatment, security, and management or others as required by law." Interviews with Medical and PREA Coordinator verify that this is the practice at the facility. All Medical records are securely maintained.</p> <p>115.81 (e) On-site medical personnel provide informed consent disclosures. It should be noted that this is an Inmate Work Camp and this facility does not have on site Mental Health services. Inmates requiring Mental Health services would be transported to the Georgia Diagnostic Center located in nearby Jackson, GA. for mental health services.</p>	

	Corrective Action Recommendation:
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Medical staff b. Regional SANE <p>Findings:</p> <p>115.82 (a) The CCCI reports no inmate victims of sexual abuse in the past 12 months; thus there were no medical records for this auditor to review for inmate victims. Agency policy requires that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of the services are determined by medical and mental health practitioners (Georgia Diagnostic Center) according to their professional judgment. Medical staff at CCCI maintain secondary materials such as logs or forms documenting the timeliness of emergency medical treatment and crisis intervention services that were provided and the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. There were no inmates present at that had claimed sexual abuse to interview for verification and no records to review as the facility has not had a sexual abuse case.</p> <p>115.82 (b) If no qualified medical 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 pursuant to § 115.62 and immediately notify the appropriate medical and mental health practitioners. CCCI has one nurse assigned to the facility. All Mental Health services are provided by the Georgia Diagnostic Center.</p> <p>115.82 (c) Inmate victims of sexual abuse would be offered timely information about and access to emergency contraception and sexually transmitted infection prophylaxis.</p> <p>115.82 (d) CCCI LOP 104.01 requires that treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Corrective Action Recommendation:</p> <p>None</p>



115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy 208.06, PREA b. CCCI LOP 104.01 c. Completed Pre-Audit Questionnaire submitted by CCCI d. Georgia Department of Corrections SOP 103.06, Investigations of Allegations e. Georgia Department of Corrections SOP 103.10, Evidence Handling <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Medical staff b. PREA Coordinator <p>Findings:</p> <p>115.83 (a) CCCI offers medical (onsite) and mental health evaluation (offsite) and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. CCCI does not have mental health practitioners at this facility. On-going Mental Health Services cannot be provided at Clayton County Prison. An inmate needing on-going Mental Health Services are referred to Georgia Diagnostic Center Prison (the Catchment facility) and transported to such facility for services.</p> <p>115.83 (b) Medical follow up treatment would include following a treatment plan, and when necessary referrals for continued care following the transfer or placement in, other facilities, or their release from custody. All Mental Health services would be managed by the Georgia Diagnostic Center.</p> <p>115.83 (c) CCCI provides victims with medical and mental health services (via Georgia Diagnostic Center) consistent with the community level of care.</p> <p>115.83 (d) This provision is non-applicable as it is an all male prison.</p> <p>115.83 (e) This provision is non-applicable as it is an all male prison.</p> <p>115.83 (f) Interviews with medical staff confirm that Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.</p> <p>115.83 (g) Interviews with Medical Staff and PREA Coordinator confirm that 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. There have not been any cases to review for verification.</p> <p>115.83 (h) CCCI would make arrangements with the GDGP to conduct a mental health</p>

evaluation of known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Typically, this would have already been handled at the catchment facility prior to transfer to CCCI, but if discovered while at CCCI, arrangements would be made to ensure the inmate was offered treatment.

Corrective Action Recommendation:

None

115.86	Sexual abuse incident reviews
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1197 358">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 414 1468 481">a. Georgia Department of Corrections Policy 208.06 to include Attachment 9, Incident Review Checklist <li data-bbox="252 492 1005 526">b. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 537 518 571">c. Investigative Files <p data-bbox="252 627 430 660">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 705 654 739">a. PREA Compliance Manager <li data-bbox="252 750 526 784">b. PREA Coordinator <li data-bbox="252 795 391 828">c. Warden <p data-bbox="252 884 375 918">Findings:</p> <p data-bbox="252 974 1484 1086">115.86 (a) The CCCI reports that in the past 12 months, there have been zero criminal and/or administrative investigations of alleged sexual abuse completed at the facility. Thus, the facility reports zero sexual abuse incident reviews were conducted.</p> <p data-bbox="252 1142 1484 1388">115.86 (b) The agency's PREA policy, 104.01, establishes a formalized sexual abuse incident review team or process. Interviews with the PREA Coordinator and PREA Compliance Manager indicate a formal process exists with monthly reviews completed by the PREA Coordinator, SART and leadership staff. A report would be prepared with recommendations to be discussed with facility leadership. CCCI reported zero sexual abuse incident reviews in the past year, thus no incident reviews were conducted.</p> <p data-bbox="252 1444 1452 1556">115.86 (c) Interviews with the PREA Coordinator and PREA Compliance Manager indicate a formal process exists for reviews to be completed by the PREA Coordinator, Medical, SART and leadership staff.</p> <p data-bbox="252 1612 1468 1859">115.86 (d) The review team follows the Sexual Abuse Incident Review Checklist, which is Attachment 9 of the Georgia Department of Corrections PREA Policy 208.06. This form reviews the criteria in §§ 115.86(d)(1)-(d)(5), and makes recommendations for improvement. A written report of the review is generated documenting the actions and presented to the facility head and PREA compliance manager. Typically, the Warden, PREA Coordinator and PREA Compliance Manager would all be a part of the review itself.</p> <p data-bbox="252 1915 1436 1982">115.86 (e) The facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p data-bbox="252 2038 726 2072">Corrective Action Recommendation:</p> <p data-bbox="252 2128 327 2161">None</p>

115.87	Data collection
	<p data-bbox="252 275 895 309">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 353 523 387">Auditor Discussion</p> <p data-bbox="252 432 1193 465">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 521 927 555">a. Georgia Department of Corrections Policy 208.06 <li data-bbox="252 566 1002 600">b. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 611 1217 723">c .Clayton County Correctional Institute Website: https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act <li data-bbox="252 734 1094 813">d. Georgia Department of Corrections website: http://www.dcor.state.ga.us/Divisions/ExecutiveOperations/PREA <li data-bbox="252 824 488 857">e. Annual Reports <li data-bbox="252 869 501 902">f. Aggregated Data <p data-bbox="252 947 427 981">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 1037 651 1070">a. PREA Compliance Manager <li data-bbox="252 1081 523 1115">b. PREA Coordinator <p data-bbox="252 1160 371 1193">Findings:</p> <p data-bbox="252 1249 1477 1406">115.87 (a) CCCI collects accurate, uniform data for every allegation of sexual abuse at the facility using a standardized instrument or set of definitions. CCCI follows the guidelines for complete the Survey of Sexual Violence (SSV) report. The auditor reviewed annual reports for 2012-2018.</p> <p data-bbox="252 1462 1477 1574">115.87 (b) CCCI aggregates the incident based sexual abuse data annually. Annual reports were reviewed and the Warden and PREA Coordinator were interviewed in order to determine compliance.</p> <p data-bbox="252 1630 1406 1709">115.87 (c) CCCI follows the guidelines for complete the Survey of Sexual Violence (SSV) report. The auditor reviewed annual reports for 2012-2018.</p> <p data-bbox="252 1765 1437 1843">115.87 (d) CCCI maintains, reviews and collects data as needed from all available incident-based documents, including report, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="252 1899 1437 1977">115.87 (e) CCCI does not contract with any private facilities for the confinement of inmates. This provision is not applicable.</p> <p data-bbox="252 2022 1477 2101">115.87 (f) CCCI provides all data from the previous calendar year to the Department of Justice no later than June 30 when requested. This data was not requested for 2018.</p>

Corrective Action Recommendation:

None

115.88	Data review for corrective action
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 1193 360">1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> <li data-bbox="252 416 927 450">a. Georgia Department of Corrections Policy 208.06 <li data-bbox="252 461 517 495">b. CCCI LOP 104.01 <li data-bbox="252 506 1002 539">b. Completed Pre-Audit Questionnaire submitted by CCCI <li data-bbox="252 551 1214 663">c. Annual PREA aggregated data reports 2012-2018 posted at: https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act <p data-bbox="252 707 427 741">2. Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="252 797 651 831">a. PREA Compliance Manager <li data-bbox="252 842 523 875">b. PREA Coordinator <li data-bbox="252 887 384 920">c. Warden <p data-bbox="252 976 368 1010">Findings:</p> <p data-bbox="252 1055 1469 1391">115.88 (a) The agency's PREA Coordinator reports that the first annual report was produced in 2013. Interviews with the Warden and PREA Coordinator demonstrate compliance with this standard. The auditor reviewed annual reports posted on the website from 2012-2018. The agency reviews the aggregated data annually to evaluate and assess their efforts see if they can improve on the effectiveness of their prevention, detection and response to sexual abuse and sexual harassment. They also review training curriculum, identify problem areas such as blind spots or where they may better benefit from an electronic monitoring device. The annual reports include a comparison from year to year as well as any corrective actions needed.</p> <p data-bbox="252 1447 1374 1559">115.88 (b) CCCI annual reports include a comparison from year to year as well as any corrective actions needed. The annual report provides an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="252 1615 1453 1771">115.88 (c) CCCI completes an annual report that available on it's website at: https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act. The Warden confirmed in an interview that he approves all annual reports.</p> <p data-bbox="252 1827 719 1861">Corrective Action Recommendation:</p> <p data-bbox="252 1917 320 1951">None</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Georgia Department of Corrections Policy: 208.06 b. CCCI LOP 104.01 b. Completed Pre-Audit Questionnaire submitted by CCCI c. Historical data, annual reports <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA Compliance Manager b. PREA Coordinator c. Warden <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. Secure office space where investigative files and PREA related files are stored. <p>Findings:</p> <p>115.89 (a) The agency's PREA Coordinator reports that the first annual report was produced in 2012. Subsequent reports have been completed annually. Interviews with the Warden and PREA Coordinator demonstrate compliance with this standard. The incident-based and aggregate data are securely retained in a locked office space. The auditor was able to request files from various years to confirm that data is retained.</p> <p>115.89 (b) CCCI provides posts all of its aggregated sexual abuse data on their website. They only have direct control over their own facility. They do not contract with any private facilities for the confinement of inmates.</p> <p>115.89 (c) CCCI removes all personal identifiers before making aggregated data publicly available.</p> <p>115.89 (d) All sexual abuse data is maintained for a period of 10 years after the date of the original collection, unless local, state or federal law requires otherwise.</p> <p>Corrective Action Recommendation:</p> <p>None</p>

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. 2016 Audit Report b. Agency website of Audit and annual Reports <p>2. Interviews:</p> <ul style="list-style-type: none"> a. Random Sample of Inmates b. Random Sample of Staff c. Specialized Staff d. Targeted Inmates, where available <p>3. Site review observations:</p> <ul style="list-style-type: none"> a. Toured entire facility b. Camera placement in the facility c. Control station <p>Findings:</p> <p>115.401 (a) The CCCI operates one facility. The CCCI was initially audited in 2016, during the third year of the first cycle. This audit was conducted in the third year of the second cycle. This audit was their second audit and it was conducted in the third year of Audit Cycle 2.</p> <p>115.401 (b) Since the CCCI is an independent county correctional institute, they should be conducting their audit the first year of the audit cycle. Globally, they are a contract facility for the Georgia Department of Corrections paid a sum of money for each day that they house state inmates. As an independent agency/facility, they should shift their audit to the first year of the third cycle. The agency must ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency is audited.</p> <p>The Third Audit Cycle is as follows:</p> <p>Third Audit Cycle:</p> <p>First Year: Ends August 19, 2020 Second Year: Ends August 19, 2021 Third Year: Ends August 19, 2022</p> <p>The agency needs to complete their audit for cycle three no later than August 19, 2020.</p> <p>This information is provided for clarification from the PREA Resource Center's Frequently Asked Questions:</p>

b. As another hypothetical, what happens if an agency has only one facility but receives no audit by the conclusion of the first year of the first audit cycle (by August 19, 2014)?

Because the standards require that an agency have “at least” one-third of its facilities audited during each year of the three-year audit cycle, an agency with a single facility is required to receive an audit during the initial year of the audit cycle to be compliant as of August 19, 2014. In other words, an agency with a single facility cannot be said to have had at least one third of its facilities audited by August 19, 2014, if it has had no facility audits. However, a single-facility agency could become fully compliant at any point during the remainder of the three-year audit cycle (concluding on August 19, 2016) subject to a successful audit of that facility. So for example, a single-facility agency that is not compliant as of the conclusion of the first year of the audit cycle because it had received no audits by August 19, 2014, could nevertheless become fully compliant with the audit standards if it receives an audit one month later (early in the second year of the audit cycle) and would remain compliant with this standard through the remainder of the first audit cycle.

115.401 (h) The auditor was granted full access to the facility for the purposes of the tour review. The PREA Coordinator and Deputy Warden provided the tour and unlocked all secured access doors to allow me to visually observe all areas of the facility. This included all areas within the facility to include the inmate housing areas, recreation yard, storage, kitchen, law library, programs area, and intake areas etc.

115.401 (i) The auditor provided with copies of all policies and granted access to review documentation of inmate records. I was permitted to copy or to request copies of all documents needed to conduct a thorough audit to include electronic data.

115.401 (m) The auditor was provided a private setting to conduct interview with staff and offenders without interruption. Inmates and Staff interviewed were informed of the confidentiality of the audit prior to conducting the interviews.

114.401 (n) Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. The auditor did not receive any letters from offenders at this facility. The facility posted the Notices of Audit on July 3, 2019. The facility provided the auditor with photographic evidence of the postings. During the onsite review, the auditor observed Notices of Audit, in both English and Spanish posted throughout the facility where inmates, staff and the public would frequent. Inmates interviewed indicated the signs had been up for a period of time in line with what the auditor believed to be valid.

Corrective Action Recommendation:

None

Best Practice Recommendation:

Complete your PREA Audit during Year one of teach audit cycle.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1. Documents Reviewed: (Policies, directives, forms, files, records, etc.):</p> <ul style="list-style-type: none"> a. Pre-Audit Questionnaire Completed by CCCI b. Georgia Department of Corrections Policy 208.06, Prison Rape Elimination Act (PREA) Sexually Abusive Behavior Prevention and Intervention Program c. Link to website:https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act <p>2. Interviews:</p> <ul style="list-style-type: none"> a. PREA coordinator b. Warden <p>Findings:</p> <p>115.403 (f) The CCCI Final Audit Report for 2016 is posted on the agency website as required by this standard on https://www.claytoncountyga.gov/government/corrections-department/clayton-county-prison/prison-rape-elimination-act. The report was also found on the Georgia Department of Corrections webpage located at: http://www.dcor.state.ga.us/sites/default/files/Claton%20County%20Camp.pdf with whom they contract.</p> <p>Corrective Action Recommendation:</p> <p>None.</p>

Appendix: Provision Findings

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

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

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na

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

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes

	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	no

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na

115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

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

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na

115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes