

PREA Facility Audit Report: Final

Name of Facility: Walker State Prison & Northwest Regional Substance Abuse Treatment Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 02/20/2021

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: Lynni OHaver	Date of Signature: 02/20/2021

AUDITOR INFORMATION	
Auditor name:	O'Haver, Lynni
Email:	scarlettohara1@mac.com
Start Date of On-Site Audit:	01/04/2021
End Date of On-Site Audit:	01/06/2021

FACILITY INFORMATION	
Facility name:	Walker State Prison & Northwest Regional Substance Abuse Treatment Center
Facility physical address:	97 Kevin Lane, Rock Spring, Georgia - 30739
Facility Phone	
Facility mailing address:	P.O. Box 98, Rock Spring, Georgia - 30739

Primary Contact	
Name:	Jeanie Kasper
Email Address:	jeanie.kasper@gdc.ga.gov
Telephone Number:	O: (706) 764-3616

Warden/Jail Administrator/Sheriff/Director	
Name:	Jeanie Kasper
Email Address:	jeanie.kasper@gdc.ga.gov
Telephone Number:	O: (706) 764-3616

Facility PREA Compliance Manager	
Name:	Ryan Clark
Email Address:	ryan.clark@gdc.ga.gov
Telephone Number:	O: (706) 764-3627

Facility Health Service Administrator On-site	
Name:	Cindy McDade
Email Address:	Cindy.McDade@gdc.ga.gov
Telephone Number:	706/764-3626

Facility Characteristics	
Designed facility capacity:	644
Current population of facility:	480
Average daily population for the past 12 months:	545
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	19-74 years old
Facility security levels/inmate custody levels:	Medium Based for Inmates and 200 Beds for Detainees
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	145
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	24
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	349

AGENCY INFORMATION	
Name of agency:	Georgia Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	300 Patrol Rd., Forsyth, Georgia - 31029
Mailing Address:	
Telephone number:	(478) 992-5374

Agency Chief Executive Officer Information:	
Name:	Timothy C. Ward
Email Address:	Timothy.Ward@gdc.ga.gov
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Grace Atchison	Email Address:	grace.atchison@gdc.ga.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.

Audit Narrative

Georgia Department of Corrections, Walker State Prison is located at 97 Kevin Lane, Rock Spring, Georgia. Rock Spring Georgia is located in northwest Georgia, approximately 14 miles south of Chattanooga Tennessee.

Walker State Prison is participating in the Prison Rape Elimination Act (PREA) audit. The on-site portion of the audit was conducted by a certified Department of Justice PREA Auditor, at the above address on January 4 - 6, 2021. The assigned PREA Auditor is an independent sub-contractor with no conflict of interest, working for the primary contract holder for the Georgia Department of Corrections. This is the third audit for Walker State Prison; the first audit was completed on August 24, 2015; and the second audit was completed on April 10 - 11, 2017.

Walker State Prison includes the Northwest Residential Substance Abuse Treatment Center and a Fire House. Unless stated otherwise, for the purpose of this report, the Auditor's use of Walker State Prison encompasses all three (Walker State Prison, NWRSAT, and the Fire House).

The initial on-site audit dates for Walker State Prison were scheduled for April 27 – 29, 2020, however due to the COVID 19 pandemic; the on-site dates were rescheduled twice (July 2020; September 2020) before a final on-site date was set for January 4 – 6, 2021.

The *Pre-Audit Questionnaire* was initially completed in anticipation of the original on-site dates (April 27 – 29, 2020). Due to the change in the on-site dates, the information initially entered in the PAQ required an update to reflect the significant shift in the 12 months prior to the audit parameters. The facility uploaded the updated information into the Supplemental file located in the Online Audit System (OAS).

Pre-Onsite Audit Phase

Initial correspondence between the Auditor and the facility originated on February 18, 2020; with the rescheduling of the on-site dates, the auditor sent additional correspondence on November 30, 2020.

The Auditor sent an introduction email to Walker State Prison Facility Warden, PREA Compliance Manager, and the Georgia Department of Corrections Statewide PREA Coordinator.

Along with a brief introduction, in the Auditor's email to the facility and to the GDC PREA Coordinator the Auditor discussed the use of the Online Audit System (OAS), audit logistics, audit schedule / timelines, goals, and expectations of the audit. The Auditor also included the PREA Audit Notifications (English/Spanish), which contained the mailing address (P.O. Box) for confidential correspondence from offenders or staff relating to PREA prior to, during, and after the PREA audit; the Auditor also requested the notifications be posted in accordance with the required standards.

The audit notifications contained the scheduled dates of the audit, the purpose of the audit, the Auditor's name and contact information, and a statement regarding the confidentiality of any communication between the Auditor and offenders who respond to the notice with the exception of mandatory reporting laws that may apply to the Auditor. The Post Office box acquired for the audit was used strictly for correspondence from offenders or staff for the purpose of the PREA Audit.

During the on-site tour of the facility, the Auditor observed the audit notifications posted throughout the facility compound, to include Walker State Prison, Northwest RSAT, and the Fire House. The audit notifications were posted in visible locations where offender traffic is high. These locations included every housing dormitory, throughout each building – programs, educational, and vocational – in assigned offender work areas, (Food Service, Laundry, & Maintenance), Chapel, and Visitor multi-purpose room.

On November 30, 2020, the Auditor began a systematic review process of the *Pre-Audit Questionnaire* responses to each standard and the supporting documentation, policies, and procedures. Supporting documentation included, but not limited to:

- Georgia Department of Corrections Policies & Procedures
- Existing contracts between FDC and external entities (Advocacy Services, SANE/SAFE)
- Offender intake screenings & assessments
- Offender medical & mental health assessments
- All Sexual abuse & sexual harassment Administrative Investigations – (January 2020 – December 2020)
 - (Substantiated, unsubstantiated, offender-on-offender, staff-on-offender)
- All Sexual abuse & sexual harassment Criminal Investigations – (January 2020 – December 2020)
 - (Substantiated, unsubstantiated, offender-on-offender, staff-on-offender)

Upon completion of the systematic review of the PAQ and supporting documentation, the Auditor emailed the facility on November 30, 2020, with a request for additional documentation from the facility for review prior to the on-site. The Facility Staff Member uploaded the additional documentation into the OAS Supplemental file. The documents uploaded to the OAS Supplemental file include:

- Documentation of hotline calls made in the 12 months preceding the audit
- All allegations of sexual abuse & sexual harassment reported in the 12 months preceding the audit
- Staff roster (certified & civilian staff, contract, & volunteer; requested by shift assignment/work hours)
- List of New Hires & Promotions from the last 12 months
- Offender Rosters by Housing location for Walker State Prison, NWRSAT, and Fire House
- Offenders identified as LEP; hearing, cognitive, vision, and physically impaired;
- Offenders who identify as LGBTI
- Informal & Formal PREA related grievance reports
- Facility Site Map
- Camera Totals (interior and exterior)

On December 29, 2020, the Auditor emailed the facility and provided the staff interviews list and documents/files to be reviewed during the on-site visit:

- Agency Head or Designee
- Administrative (Human Resources) Staff
- Agency Contract Administrator
- Classification Staff
- Contractors & volunteers who have contact with offenders
- Designated Staff who monitor retaliation
- Incident Review Team
- Intake Staff
- Intermediate or Higher-level Facility Staff
- Investigative Staff
- Medical & Mental Health Staff
- PREA Compliance Manager
- PREA Coordinator
- SANE/SAFE Staff
- Security Staff – First Responders
- Staff who perform screening for risk of victimization
- File review – personnel, volunteer/contractor, offender & Medical and Mental Health (victims of SA/SH)
- All Walker State Prison PREA investigative case files

The total number of PREA hotline calls reported during the 12 months preceding the audit were zero. The number of sexual abuse and sexual harassment allegations in the 12 months prior to the audit (January 2020 – December 2020) was two. The following charts provide a breakdown of the two allegations:

Total Number of Allegations			
	Offender-on-Offender</th>	Staff-on-Offender>	Total
Substantiated	1	0	1
Unsubstantiated	0	0	0
Unfounded	1	0	1
In progress	0	0	0
Total	2	0	2

Total Number of Sexual Abuse Allegations			
	Offender-on-Offender	Staff-on-Offender	Total
Substantiated	0	0	0
Unsubstantiated	0	0	0
Unfounded	1	0	1
In progress	0	0	0
Total	1	0	1

Total Number of Sexual Harassment Allegations			
	Offender-on-Offender</th>	Staff-on-Offender>	Total
Substantiated	1	0	1
Unsubstantiated	0	0	0
Unfounded	0	0	0
In progress	0	0	0
Total	1	0	1

Investigations			
	Offender-on-Offender	Staff-on-Offender	Total
Administrative	2	0	0
Criminal	0	0	0
Total	2	0	0

Referred for Prosecution		
	Sexual Abuse	Sexual Harassment
Offender-on-Offender	0	0
Staff-on-Offender	0	0

Research

During the pre-on-site audit phase, the Auditor conducted an internet search on the facility to include reviewing the Department website. The Department website contained multiple links to previous annual reports and audits for Walker State Prison as well as other facilities under the Department's jurisdiction. The Auditor reviewed the prior PREA Audits (August 2015; April 2017) and the Annual Reports (§115.88). The Auditor also reviewed the mandatory reporting laws for the State of Georgia.

The Auditor contacted Just Detention International (JDI), a health and human rights organization that seeks to end sexual abuse in all forms of confinement. The Auditor submitted an inquiry to determine if the agency had received any complaints from Walker State Prison within the past 12 months; a representative from Just Detention International informed the Auditor that Just Detention International had not received any complaints regarding Walker State Prison. The Auditor also conducted research, specific to Walker State Prison on the websites of the Department of Justice Civil Rights Division and the Southern Poverty Law Center with negative results from each.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included

the SANEs/SAFEs evidence protocol, contracts between GDC and the Georgia Correctional HealthCare, Satilla Advocacy Services and between GDC and the Sexual Assault Victims Advocacy Center, Inc. Both contracts use clear and concise language, provides the Department's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each.

The Sexual Assault Nurse Examiners are contracted through Georgia Correctional HealthCare with the GDC. The Satilla Advocacy Services is a non-profit organization that provides services for sexual assault survivors and is the headquarters for the Sexual Assault Nurse Examiners.

During the on-site phase of the audit, the Auditor conducted an interview with the certified SANE Nurse, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department of Justice (DOJ) *National Protocol for Sexual Assault Medical Forensic Examinations Adults*. The SANE Nurse explained when they receive a notification for services request from the facility, either herself or another SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either she or one of the other SANE Nurses are available 24/7. The SANE Nurse confirmed there were no forensic medical examinations completed for Walker State Prison during the past 12 months.

The Sexual Assault Victims Advocacy Center, Inc. is a non-profit rape crisis center located in Fort Oglethorpe Georgia. The Advocacy Center and the satellite offices provide the community with advocacy services for victims of sexual assault.

The Sexual Assault Victims Advocacy Center provides offenders incarcerated at Walker State Prison with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Sexual Assault Victims Advocacy Center provides emotional support services, victim advocacy services upon request and provides offenders with the mailing address and phone number for services and support.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Sexual Assault Victims Advocacy Center and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Walker State Prison to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested the phones inside the dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

The Auditor did not receive any correspondence from staff or offenders prior to, during, or after the PREA audit.

On-Site Audit Phase

Under the jurisdiction of the State of Georgia Department of Corrections, Walker State Prison is located at 97 Kevin Lane, Rock Spring, Georgia. Rock Spring Georgia is located in northwest Georgia, approximately 14 miles south of Chattanooga Tennessee.

The Walker State Prison is classified as a Security Level 3 / Custody Level – Medium and Minimum. Security level is the level of security the physical plant provides whereas Custody Level is the offenders classification.

Georgia Department of Corrections designates specific institutions and programs for youthful offenders. Walker State Prison is not designated as a youthful offender facility.

The rated capacity of Walker State Prison is 644 with an average daily population (ADP) of 545 for the 12 months preceding the audit. The offender population on the first day of the audit was 466.

Walker State Prison is designed as a medium-security facility with the perimeter secured by two 15.6 feet high fences, the outer fence of which has three strands of razor wire at the top, one row in the center and one row on the top. The inner fence topped with two rows of razor ribbon at the top. The fence does not have any motion sensors or microwaves to detect anything that may be on the fence. The inner fence is monitored by officers located in two towers on the outside of the fence.

The Northwest Residential Substance Abuse Treatment Center is a minimum-security satellite facility on the site of and outside the perimeter but adjacent to Walker State Prison. The NWRSAT facility's perimeter includes high fences with strands of razor wire.

The perimeter security for Walker State Prison and NWRSAT is supplemented with a 24/7 armed mobile patrol and two towers (armed) staffed 24 hours a day.

The Fire House is adjacent to and outside the secure perimeter of Walker State Prison. The Fire House, with an experienced Fire Chief, utilizes up to eight probationers from NWRSAT who are trained in firefighting, hazmat, and Class F driving license. The Fire Department provides emergency services to the community residents by assisting with structure fires, vehicle fires, and vehicle accidents. The Fire Department is on-call 24/7.

The main building at Walker State Prison houses Administration office, Visitation, Offender Intake, General Population Dorms (all open bay), one Isolation / Segregation Unit, Food Service, Medical, Library, Education and Programs classrooms, Laundry, Barbershop, Security Office, and Gym. Buildings outside the perimeter include Storage and Recycling Barn, Warehouse, Mechanic and Maintenance Shop, Firing Range, Warden's Conference Center, and Training Building.

Walker State Prison is a designated Faith & Character based prison that provides pro-social, programmatic environment for change to those offenders who voluntarily request to participate in the program. The program fosters moral character development and cultivates pluralistic spiritual enrichment. Offenders are provided a variety of programs, vocational, religious, counseling, work, and recreation opportunities.

Walker State Prison multi-purpose area is the designated activity area. The multi-purpose room resembles the shape of an octagon, with offender housing units, Security Staff offices, Medical, Food Service, Chapel, and Visitation branching off the center of the octagon.

Walker State Prison housing units are located in four wings and are open dormitory style with showers and bathrooms located at the back of each unit. A 4' wall separate the bathroom area room the housing area in each dorm. The wall and additional privacy barriers provide offenders with privacy as well as ensure safety of each offender.

Walker State Prison Isolation/Segregation Unit has eight single man cells and eight double man cells. Single man showers for the Isolation/Segregation Unit are located within the unit and have walls for privacy.

The Northwest Residential Substance Abuse Treatment Center's building is located across from Walker State Prison. NWRSAT has a Probationer Intake, Administration, Visitation, Food Service, Medical Store, Housing Units, and Recreation Yard.

The Firehouse has one open dorm-housing unit within the Firehouse. The showers and bathroom are separate from the living quarters of the dorm and offer privacy.

On Monday January 4, the first day of the audit, an entrance meeting was held with the Facility Warden, PREA Compliance Manager, and Facility Supervisors. Following the entrance meeting, the Auditor toured the Walker State Prison from 0905 hours to 1015 hours. The Auditor was escorted by the Facility Warden, PREA Compliance Manager, and various Facility Staff members.

On Monday January 4, the first day of the audit, the Auditor toured NWRSAT from 1015 hours to 1130 hours. The Auditor was escorted by the Facility Warden, PREA Compliance Manager, and Facility Supervisors.

On Monday January 4, the first day of the audit, the Auditor toured the Firehouse from 1130 hours to 1200 hours. The Auditor was escorted by the Facility Warden, PREA Compliance Manager, and several Facility Supervisors.

The Auditor used the National PREA Resource Center, *PREA Compliance Instrument-Instructions for PREA Audit Tour* when conducting the on-site review. The areas visited, for each facility, include all dormitory areas, medical area, intake and transfer, security control rooms, offender classification, food service, laundry, library, educational, vocational, and program areas, work assignment areas, visitation area, and facility Chapel.

During the tour, the Auditor observed opposite gender announcements, tested the offender phone system in the dormitories, viewed PREA Audit notifications posted throughout, and PREA educational material and contact information for rape crisis counseling and emotional support services. The Auditor observed the PREA information posted in each dormitory, offender common areas, program and educational areas, and in the facility lobby.

The Auditor also observed multiple security cameras to include the camera angles, privacy, and line of sight for shower and toilets. The Auditor did not observe any issues with privacy or line of sight; announcements are made when opposite gender enters the dormitory. The shower and bathroom areas within each dorm contain concrete privacy walls, which are constructed in such a manner that provides privacy as well as allowing staff to have a partial view of the offender (walls covers midsection of the body); this allow privacy as well as ensuring the safety and security of all offenders. The Auditor did not observe blind spots during the facility tour.

Throughout the facility tour, the Auditor observed offenders participating in educational programs, various offender movement throughout the facility, and offenders actively working in assigned jobs throughout the facility compound. The Auditor was able to observe the interaction between staff and offenders inside the housing units and throughout the facility and conduct informal interviews of certified staff, civilian staff, contract staff, and offenders in each dormitory and throughout the facility compound.

Walker State Prison reported 38 cameras installed and operational throughout the facility; 34 cameras are located on the interior and four cameras are located on the exterior of the facility. NWRSAT reported 18 cameras installed and operational throughout the facility; 15 cameras are located on the interior and three are located on the exterior of the facility. The interior cameras are located in the facility lobby, throughout the facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and

along the outside perimeter.

Staff Interviews

The PREA Auditor handbook requires Auditors to interview a representative sample of staff, supervisors, and administrators in the audited facility. Auditors must conduct interviews with a random sample of staff selected from varying shifts and work assignments, as well as targeted interviews with staff, which have specialized roles and responsibilities within the facility.

The Auditor conducted twenty random sampling of staff interviews. This random sampling of staff included at least one member from each shift, staff from diverse work assignments, supervisors and line staff, males and females, and staff of various diversities. There are two security staff shifts. Dayshift hours are 0600 – 1800 hours and nightshift hours are 1800 – 0600 hours. Contract medical shift hours are the same as the facility security staff and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 145 staff employed at the facility who have contact with offenders.

Twenty-six specialized staff interviews were conducted and were selected based upon their work assignment and subject matter expertise. Interviews were conducted in designated rooms that provided privacy and all interviews were conducted without interruption.

At the time of the audit, the facility had 24 contractors and 349 volunteers authorized to enter the facility and who may have contact with offenders. Interviews with staff were conducted in designated rooms that provided privacy and were all completed without interruption.

All staff interviews were conducted in accordance with the National PREA Resource Center *PREA Compliance Audit Instruments Interview Guide*. Upon arrival to the facility, the Auditor requested an updated employee roster to assist with the selection process for the random and targeted staff interviews. A detailed list and quantities for each interviewed are listed below:

Staff Categories	Number of Interviews Conducted
Random Sample of Staff:	12
Agency and PREA Staff:	

Agency Head or Designee	1
Facility Warden	1
PREA Coordinator	1
PREA Compliance Manager	1
Specialized Staff:	
Agency Contract Administrator	1
Intermediate or Higher Level Facility Staff	2
Medical / Mental Health Staff	3
Administrative / Human Resources Staff	1
SANE / SAFE	1
Rape Crisis / Advocacy Center	1
Volunteers / Contractors	3
Investigative Staff	1
Staff who perform Risk Screening	1
Designated Staff Member Monitor Retaliation	1
First Responders	3
Staff who supervise offenders in Seg Housing	1
Intake Staff	1
Incident Review Team	2
Total Random Staff	12
Total Agency & PREA Staff	4
Total Specialized Staff	22
Total Staff Interviewed	38

Offender Interviews

The offender count on the first day of the audit was 466. In accordance with the *PREA Auditor Handbook Table 1: Required Number of Offender Interviews*, the Auditor was required to conduct 13 random sample offender interviews. All offender interviews were conducted in accordance with the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide*.

The Auditor conducted twenty random samples of offender interviews. The Auditor requested an up-to-date offender roster (in alphabetical order) from every housing dormitory and selected every tenth offender from the offender rosters provided; offenders interviewed included every housing dormitory and offenders of various diversities.

In accordance with the *PREA Auditor Handbook Table 1: Required Number of Offender Interviews*, the Auditor was required to interview at least 13-targeted offenders. The Auditor conducted nine targeted offender interviews. The facility provided documentation confirming they did not have the following targeted offender categories housed at their facility at the time of the on-site review. As a result, these categories of offenders were not interviewed:

- Youthful offenders
- Offenders in segregated housing for high risk of sexual victimization
- Offenders with a cognitive or physical disability
- Transgender Offenders

As previously stated in the report, at the time of the on-site phase of the audit, Walker State Prison does not house youthful offenders. Walker State Prison reported during the twelve months prior to the audit, there were no offenders placed in segregated housing due to risk of sexual victimization; at the time of the on-site there were no transgender offenders. Therefore, the categories of youthful offenders, transgender, and offenders in segregated housing for high risk of sexual victimization, and offenders with a cognitive or physical disability were not interviewed.

All offender interviews were conducted in accordance with the National PREA Resource Center *PREA Compliance Audit Instruments Interview Guide*. The Auditor requested an updated facility offender roster to assist with the selection process for the random and targeted offender interviews. All interviews were conducted in private and without interference. A detailed list and quantities for each interviewed are listed below:

Offender Categories	Number of Interviews Conducted
Random Sample of Offenders:	
Informal	26
Formal	20
Targeted Offenders:	
Offenders who are vision or hearing impaired	3
Offenders who are limited English proficient	1
Offenders who identify as gay or bisexual	3
Offenders who reported prior sexual victimization	1
Offenders who reported sexual abuse	1
Total Random Offenders	46
Total Targeted Offenders	9
Total Offenders Interviewed	55

On-site Documentation Review

During the 12 months prior to the audit, Walker State Prison reported two allegations of sexual abuse and sexual harassment; one allegation of sexual harassment and allegations of sexual abuse.

The two allegations included one sexual harassment allegation and one sexual abuse allegation. The sexual harassment allegation was an offender-on-offender allegation and was closed as substantiated. The sexual abuse allegation was an offender-on-offender allegation, which was closed as unfounded.

During the on-site phase, The Auditor reviewed two administrative investigations. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings. At the time of the Auditor's review, there were no cases referred for prosecution.

Employee criminal background checks and training records are maintained in the employee personnel files. The Auditor reviewed documentation from twenty employee personnel files. The Auditor selected files of a newly hired employee, long-term staff members, recently promoted staff members, and employees with specialized training. All files reviewed contained the required training documentation, revealed thorough background investigations, and included updated documentation of current background investigations (five-year intervals) of current staff members.

The Auditor reviewed thirty-one offender records. These records were selected based upon the offender sexual abuse investigations, length at facility, and offenders that disclosed sexual orientation as bisexual, gay, or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy.

Medical and mental health files are maintained in a secured section of the medical office. The Auditor reviewed nine secondary medical and mental health files. These files were reviewed based upon the screening for risk of sexual victimization, offenders who reported sexual abuse or sexual harassment, and those offenders who identify as transgender, gay, or bisexual.

The list below details the documentation reviewed from the various files:

Type of File	Number of Files Reviewed
Investigative Cases	2
Human Resources (Personnel / Training)	20
Offender Institutional Records	31
Medical & Mental Health Secondary	9
Total Number of Files Reviewed	62

Exit Briefing

At the conclusion of this audit, an exit meeting was held with the Facility Warden, PREA Compliance Manager, several Facility Supervisors, and Staff to discuss the audit findings. The Auditor informed all in attendance the need to review on-site observations, documentation, and interview responses in order to determine compliance for each standard and provision.

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.

Facility Characteristics

Georgia Department of Corrections, Walker State Prison is located at 97 Kevin Lane, Rock Spring, Georgia. Rock Spring Georgia is located in northwest Georgia, approximately 14 miles south of Chattanooga Tennessee. Under the jurisdiction of the State of Georgia Department of Corrections, Walker State Prison the main prison, Northwest Residential Substance Abuse Treatment Center and the Firehouse.

Walker State Prison is classified as a Security Level 3 / Custody Level – Medium and Minimum. Security level is the level of security the physical plant provides whereas Custody Level is the offenders classification.

Georgia Department of Corrections designates specific institutions and programs for youthful offenders. Walker State Prison is not designated as a youthful offender facility.

The rated capacity of Walker State Prison is 644 with an average daily population (ADP) of 545 for the 12 months preceding the audit. The offender population on the first day of the audit was 466.

Walker State Prison is designed as a medium-security facility with the perimeter secured by two 15.6 feet high fences, the outer fence of which has three strands of razor wire at the top, one row in the center and one row on the top. The inner fence topped with two rows of razor ribbon at the top. The fence does not have any motion sensors or microwaves to detect anything that may be on the fence. The inner fence is monitored by officers located in two towers on the outside of the fence.

The Northwest Residential Substance Abuse Treatment Center is a minimum-security satellite facility on the site of and outside the perimeter but adjacent to Walker State Prison. The NWRSAT facility's perimeter includes high fences with strands of razor wire.

The perimeter security for Walker State Prison and NWRSAT is supplemented with a 24/7 armed mobile

patrol and two towers (armed) staffed 24 hours a day.

The Fire House is adjacent to and outside the secure perimeter of Walker State Prison. The Fire House, with an experienced Fire Chief, utilizes up to eight probationers from NWRSAT who are trained in firefighting, hazmat, and Class F driving license. The Fire Department provides emergency services to the community residents by assisting with structure fires, vehicle fires, and vehicle accidents. The Fire Department is on-call 24/7.

The main building at Walker State Prison houses Administration office, Visitation, Offender Intake, General Population Dorms (all open bay), one Isolation / Segregation Unit, Food Service, Medical, Library, Education and Programs classrooms, Laundry, Barbershop, Security Office, and Gym. Buildings outside the perimeter include Storage and Recycling Barn, Warehouse, Mechanic and Maintenance Shop, Firing Range, Warden's Conference Center, and Training Building.

Walker State Prison is a designated Faith & Character based prison that provides pro-social, programmatic environment for change to those offenders who voluntarily request to participate in the program. The program fosters moral character development and cultivates pluralistic spiritual enrichment. Offenders are provided a variety of programs, vocational, religious, counseling, work, and recreation opportunities.

Walker State Prison multi-purpose area is the designated activity area. The multi-purpose room resembles the shape of an octagon, with offender housing units, Security Staff offices, Medical, Food Service, Chapel, and Visitation branching off the center of the octagon.

Walker State Prison housing units are located in four wings and are open dormitory style with showers and bathrooms located at the back of each unit. A 4' wall separate the bathroom area room the housing area in each dorm. The wall and additional privacy barriers provide offenders with privacy as well as ensure safety of each offender.

Walker State Prison Isolation/Segregation Unit has eight single man cells and eight double man cells. Single man showers for the Isolation/Segregation Unit are located within the unit and have walls for privacy.

The Northwest Residential Substance Abuse Treatment Center's building is located across from Walker State Prison. NWRSAT has a Probationer Intake, Administration, Visitation, Food Service, Medical Store, Housing Units (4), and Recreation Yard.

The Firehouse has one open dorm-housing unit within the Firehouse. The showers and bathroom are separate from the living quarters of the dorm and offer privacy.

Walker State Prison reported 38 cameras installed and operational throughout the facility; 34 cameras are located on the interior and four cameras are located on the exterior of the facility. NWRSAT reported 18 cameras installed and operational throughout the facility; 15 cameras are located on the interior and three are located on the exterior of the facility. The interior cameras are located in the facility lobby, throughout the facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and along the outside perimeter.

There are two security staff shifts. Dayshift hours are 0600 – 1800 hours and nightshift hours are 1800 – 0600 hours. Contract medical shift hours are the same as the facility security staff and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 145 staff employed at the facility who have contact with offenders.

Medical and Mental Health Staff are contracted with Georgia Correctional Healthcare. Contract medical shift hours are the same as the facility security staff. The facility provides various mental health services and programs. The Food and Canteen Service is staffed by Georgia Department of Corrections.

The PAQ indicated there are 24 contractors and 349 volunteers. Examples of services provided at the facility include Chaplain, Adult Basic Education, General Education Development, Faith & Character Based Programming, Spectrum Program, Thinking for a Change, Matrix, Veterans Services, Family Services, Cross Roads, Fatherhood Services, Wellness Education, various worship services, and religious programs. Vocational and OJT programs include Food Preparation, Building Maintenance, Mechanics, Laundry, Warehousing, Custodial, Maintenance, Metal Fabrication, Baker, Cooking, Barber, Outside Maintenance, and Outside Grounds.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	8
Number of standards met:	37
Number of standards not met:	0

Standards Exceeded: 115.11; 115.21; 115.41; 115.42; 115.64; 115.67; 115.71; 115.73

Standards Met: 115.12; 115.13; 115.14; 115.15; 115.16; 115.17; 115.18; 115.22; 115.31; 115.32; 115.33; 115.34; 115.35; 115.43; 115.51; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.65; 115.66; 115.68; 115.72; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.88; 115.89

Standards Not Met: N/A

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
	<p data-bbox="248 168 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1406 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="248 517 991 553">Georgia Department of Corrections Organizational Chart</p> <p data-bbox="248 736 596 772">Interviews conducted with:</p> <p data-bbox="248 813 491 848">PREA Coordinator</p> <p data-bbox="248 889 619 925">PREA Compliance Manager</p> <p data-bbox="248 1032 1481 1364">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the GDC has a zero-tolerance policy toward all forms of sexual abuse, sexual harassment, and sexual activity among offenders. The purpose of this policy is to strengthen the Department’s efforts to prevent occurrences of this nature by implementing key provisions on the prevention, detection, and response to sexual abuse in confinement facilities. This policy provides guidelines to address prohibited sexually abusive and/or harassing behavior of offender perpetrator against offender victim and staff perpetrator against offender victim.</p> <p data-bbox="248 1476 1481 1597">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the GDC has established the following guidelines to assist staff in:</p> <ul data-bbox="300 1666 1422 1998" style="list-style-type: none"> • Detecting incidents and identifying perpetrators & victims of sexual abuse and/or harassment; • Preventing sexually abusive and/or harassing behavior; • Protecting vulnerable offenders from abuse & harassment from sexually aggressive offenders; • Educating staff on how to intervene properly & in a timely manner; • Documenting, reporting, and investigating reported incidents; and • Disciplining and/or prosecuting perpetrators. <p data-bbox="248 2107 1406 2143">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior</i></p>

Prevention, & Intervention Program clearly defines prohibited behaviors regarding sexual abuse, sexual harassment, and sexual activity. Offenders who sexually abuse another offender will be disciplined and referred for criminal prosecution. Offenders who engage in sexual harassment, consensual sexual contact with another offender, attempt to engage in or solicit such contact, or help another engage in sexual contact with an offender will be disciplined.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states staff members who engage in sexual abuse or sexual harassment of an offender will be subject to disciplinary action, up to and including termination and banishment from all Georgia correctional institutions, whichever is applicable. Additionally, staff members who engage in sexual abuse of an offender will be subject to criminal prosecution. Pursuant to O.C.G.A. §16-6-5.1, it is a felony for correctional staff to have sexual contact with an offender.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* 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.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator who verified she has sufficient time and authority in her position to accomplish PREA responsibilities for the agency. The PREA Coordinator oversees eighty-eight PREA Compliance Managers, which also includes PREA Compliance Managers assigned to private and county facilities that house GDC inmates. The PREA Coordinator reports directly to the GDC Director of Compliance. A review of the GDC organizational chart provided evidence that the agency has designated an upper-level position as the PREA Coordinator.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states each facility shall have an assigned PREA Compliance Manager who has sufficient time and authority to coordinate the facility's efforts to comply with PREA standards.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and verified he has sufficient time and authority in his position to accomplish the PREA responsibilities for Walker State Prison. Evidence shows that the Georgia Department of Corrections has designated a facility PREA Compliance Manager for Walker State Prison as verified through a review of the GDC organizational chart and through interviews with the PREA Compliance Manager and the Facility Warden.

During the on-site phase of the audit, the Auditor interviewed the Facility Warden and confirmed the responsibilities of the PREA Compliance Manager assigned to Walker State Prison. The Facility Warden verified that the PREA Compliance Manager is provided sufficient time and authority in his position to accomplish these responsibilities.

Upon review of the policy and the agency organizational chart and upon completion of interviews conducted with the PREA Coordinator, PREA Compliance Manager, and Facility Warden during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 589 598 622">Interviews conducted with:</p> <p data-bbox="252 663 651 696">Agency Contract Administrator</p> <p data-bbox="252 808 1484 1055">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall ensure that contracts for the confinement of its offenders with private agencies or other entities, including other government agencies, shall include in any new contract renewal the entity's obligation to adopt and comply with the PREA standards. Any new contract or contract renewal shall provide for Department contract monitoring to ensure the contractor is complying with the PREA standards.</p> <p data-bbox="252 1167 1476 1413">During the on-site phase of the audit, the Auditor conducted an interview with the Agency Contract Administrator regarding how contracts are monitored to determine if the contractor complies with the PREA requirements of the contract. The agency Contract Administrator explained that all Georgia Department of Corrections contracts include verbiage related to the vendor's obligation to comply with the PREA Standards prior to entering into agreement with the agency. If the entity is not PREA compliant, the contract will not be executed.</p> <p data-bbox="252 1525 1412 1738">The agency Contract Administrator informed the Auditor the Georgia Department of Corrections currently has twenty-three county contracts and five private contracts for the confinement of offenders. The PREA compliance results for the twenty-eight contracts for confinement of offenders with the other entities are managed by the contract manager in accordance with the verbiage of the contract that is in place with each entity.</p> <p data-bbox="252 1850 1484 1973">Upon review of the policy and upon completion of the interview with the Agency Contract Administrator, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Walker State Prison Staffing Plan 2020</p> <p>Facility Housing Logs (all shifts)</p> <p>Interviews conducted with:</p> <p>Warden or Designee</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>Intermediate or Higher Level Facility Staff</p> <p>On-site Review Observations:</p> <p>Daily operational functions</p> <p>Staff interaction with offenders</p> <p>Inmate movement</p> <p>Supervisory staff conducting rounds</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Warden at each facility shall develop a written Staffing Plan to enhance the supervision and monitoring of offenders. Each facility shall document and make its best efforts to comply on a regular basis with the established staffing plan that provides for adequate levels of staffing and where applicable, video monitoring, to protect offenders against sexual abuse.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior</i></p>

Prevention, & Intervention Program states in circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations on the daily Post Roster. Facility management staff will review these deviations on a regular basis, no less than annually, to identify the most common reasons for deviations. No less than annually, each facility shall assess, determine, and document whether adjustments are needed to the established staffing plan. Revised plans shall be forwarded to the PREA Coordinator for review and approval.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states all new or existing facility designs, modifications, and technology upgrades will include consideration of how they could enhance the Department's ability to protect offenders against sexual abuse.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states unannounced rounds by supervisory staff, with the intent of identifying and deterring sexual abuse and sexual harassment, are required to be conducted every week, including all shifts and all areas. These rounds will be documented in the area logbooks and in the local Duty Officer logbook.

During the pre-on-site phase of the audit, the Auditor reviewed the GDC Walker State Prison Staffing. Upon review of the Walker State Prison Staffing Plan, the facility, when reviewing staffing requirements and the appropriate numbers of assigned staff, took into consideration the following requirements:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any inadequacy from internal or external oversight bodies;
- Any findings of inadequacy from Federal investigative agencies;
- All the components of the facility's physical layout (including blind spots);
- Composition of inmate population;
- Number of and placement of supervisory staff;
- Institution programs specific to each shift;
- Any applicable State or local laws, regulations, or standards;
- Prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- Any other relevant factors.

The GDC Walker State Prison Staffing Plan 2020 was extremely detailed and specific in each of the above categories. The Staffing Plan describes in detail, the staffing levels throughout the facility, video deployment, and the requirement of intermediate level or higher-level staff to conduct and document unannounced rounds. The report also discussed how staffing levels are based on the mission of the facility, inmate population, security levels of inmates, programs, work details, and the numbers of priority one posts. (Priority one posts are

considered critical posts and must be manned twenty-four hours a day, seven days a week.) Priority two and three posts are required for optimal operation of the facility, however lower priority posts may be closed to staff the higher priority level posts. Additionally, posts may be closed when their function is no longer needed and/or required.

The average daily number of inmates on which the facility-staffing plan was predicated on was 606. Walker State Prison reported zero deviations from the staffing plan in the twelve months prior to the audit. In past years, the most common reasons for deviation from the staffing plan included unexpected call-ins, unplanned hospital post, unplanned inmate transfers, and emergencies. The 2020 Staffing Plan noted that since the 2017 post staffing analysis, the facility has experienced very few issues with covering all required posts.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding Walker State Prison staffing plan. The Facility Warden discussed how Staffing Plans and reviews of the staffing plan are guided by a template developed by the agency PREA Team. The template was designed to ensure each facility addresses the required components in the PREA standards while addressing the facilities daily staffing levels. Additionally, when developing a staffing plan, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the inmate population, the prevalence of substantiated and unsubstantiated allegations of sexual abuse, and components of the facility's physical layout.

The Facility Warden also explained that video monitoring is also taken into consideration. Walker State Prison has thirty-eight video cameras and NWRSAT has eighteen video cameras installed throughout each facility that are reviewed on a regular basis. To ensure compliance with the staffing plan, Facility Warden and the Duty Officers conduct rounds throughout the facility for visual verification of staff assignments throughout the compound. The staffing plan is reviewed annually by the Facility Warden and PREA Compliance Manager along with the PREA Coordinator.

During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the PREA Coordinator; both confirmed the process of developing a staffing plan previously described by the Facility Warden. The PREA Coordinator also confirmed that an assessment of the facility-staffing plan is conducted annually and she is consulted regarding any adjustments to the staffing plan.

During the on-site phase, the auditor reviewed the average daily number of offenders' report, staff shift rosters, facility blueprint, and daily offender activity schedules to verify adequate staff coverage in comparison to offender population, offender movement, and facility size and layout.

The Auditor reviewed housing logs of supervisor unannounced rounds and verified the unannounced rounds are being conducted and documented in accordance to the facility policy and the PREA Standard. The sample of housing logs reviewed covered several days and were from every shift. In the samples reviewed, the Auditor did not find any consistent patterns or inadequacies.

During the on-site phase of the audit, the Auditor conducted supervisory level staff interviews and inquired how unannounced rounds are completed without staff knowledge. Supervisory level staff indicated this is completed by observing staff movement, monitoring radio transmissions, alternating movement patterns or being unpredictable with times or walking pattern, and listening to staff conversations while conducting rounds throughout the facility.

During the on-site phase of the audit, the Auditor toured the facility, to include all offender-housing areas and observed the daily operational functions, staff interacting with offenders, general offender movement, offenders participating in programs, offenders completing job assignments, and supervisory staff conducting rounds. These observations provided additional verification of policy and of standard compliance. Throughout the facility tour, the Auditor noted cameras and convex mirrors placed throughout the facility, and noted no blind spots.

Upon review of the policies and documentation provided and upon completion of interviews conducted with the Facility Warden, PREA Coordinator, PREA Compliance Manager, and Intermediate or Upper-level Supervisory Staff during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>PREA Compliance Manager</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states a youthful offender shall not be placed in a housing unit in which the youthful offender will have sight, sound, or physical contact with any adult offender through use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p>Georgia Department of Corrections Walker State Prison does not house youthful offenders. This was verified during interviews with the Facility Warden, PREA Compliance Manager, and Classification Staff.</p> <p>Upon review of the policy and upon completion of the interviews with facility staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Florida Department of Corrections Walker State Prison Housing Log</p> <p>Florida Department of Corrections PREA Training Curriculum / Records</p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>PREA Compliance Manager</p> <p>Random sample of Offenders</p> <p>Transgender/Intersex Offenders</p> <p>On-site Review Observations:</p> <p>Daily operational functions</p> <p>Staff interaction with Offenders</p> <p>Offender movement</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility shall implement procedures that enable offenders to shower, perform bodily functions, and change clothing without nonmedical staff members of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent</p>

circumstances or when such viewing is incidental to routine cell checks. Offenders should only shower, perform bodily functions, and change clothing without nonmedical staff members of the opposite gender viewing their breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states staff members of the opposite gender shall announce their presence when entering an offender-housing unit; this includes the officer assigned to the housing unit. It is understood that staff members might not make announcements when responding to circumstances that require immediate action in order to combat a threat to security.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offenders will be notified of the presence of opposite-gender staff members in several ways:

- Offenders are advised of the requirement to remain clothed, and the presence of cross-gender staff members generally, during the intake screening process and the admission & orientation process;
- The following notice will be posted, "Notice to Offenders: Male and female staff members routinely work in and visit housing areas";
- For staff members with offices in housing units, the most recent schedule is posted in the unit so offenders are aware of when opposite-gender staff may be present;
- An announcement shall be made each time an opposite-gender staff member comes into a housing unit area and;
- Nothing in this section should preclude opposite-gender staff members from viewing live or recorded video, or participating in an offender suicide watch.

Documentation provided by the facility indicated there were no cross-gender strip searches or cross-gender visual body cavity searches conducted during the last 12 months. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and the PREA Compliance Manager and verified that no cross-gender strip searches or cross-gender visual body cavity searches were conducted.

During the on-site phase of the audit, the Auditor reviewed the provided documentation to include shift schedules, shift rosters, and daily offender activity schedule. The Auditor compared the information reviewed with her observations made during the facility tour and noted the number of male staff members is more than adequate and covers all shifts.

During the on-site phase of the audit, the Auditor observed the facility operations throughout the day, to include continuous offender movement throughout the facility, continuous physical

interactions between staff and offenders, and offenders performing job assignments throughout the facility and within the compound grounds. The Auditor also observed opposite gender announcements being conducted throughout the facility tour.

During the on-site phase of the audit, the Auditor requested interviews with a random sampling of offenders. Twenty random sample of offender interviews were completed and all twenty offenders confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, eighteen of the twenty random sample of offenders interviewed, confirmed staff of the opposite gender announce her presence prior to entering the housing unit.

During the on-site phase of the audit, the Auditor conducted a review of several samples of housing logs and observed entries indicating opposite gender entering housing dormitory with notification to offenders being announced prior to opposite gender entry. The sample of housing logs reviewed covered several days throughout the month and were from all shifts. The Auditor also observed the announcement of an opposite gender entering a housing dormitory throughout the on-site tour of the facility, which provided additional documentation and the facility's compliance with this standard.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states a facility shall not search or physically examine a transgender or intersex offender for the sole purpose of determining the offender's genital status. If the genital status is unknown it can be determined through conversation with the offender, by reviewing medical documentation or if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

During the pre-on-site phase of the audit, the Auditor reviewed documentation provided by the facility showed the facility has had zero searches of a transgender or intersex offender for the sole purpose of determining the offender's genital status.

During the on-site phase of the audit, the Auditor requested an offender roster for transgender or intersex offenders to conduct targeted interviews. At the time of the on-site phase of the audit, the facility reported zero transgender or intersex offenders in custody. Therefore, offenders in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor reviewed the training records and training curriculum provided to staff members who may have contact with offenders, how to perform cross-gender pat-down searches and searches of transgender and intersex offenders. Training records indicated staff members receive training on the agency's PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined

the agency's policy on cross-gender pat-down searches and searches of transgender and intersex offenders, policy prohibiting search of offenders for the sole purpose of determining the offender's genital status, defining exigent circumstances, and conducting searches in a professional and respectful manner.

Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during random offender interviews conducted during the on-site phase, Walker State Prison demonstrated facility-wide practices that are consistent with policy and with the requirements of the PREA standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Staff Translator List</p> <p>Georgia Department of Corrections Contract with Language Line Services</p> <p>Georgia Department of Corrections PREA Offender Information Guide (multiple languages)</p> <p>Interviews conducted with:</p> <p>Agency Head or Designee</p> <p>Offenders with Disabilities or LEP</p> <p>Random sample of Staff</p> <p>On-site Review Observations:</p> <p>PREA informational signage posted in multiple languages</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the PREA Compliance Manager shall ensure the appropriate resources are available to offenders with disabilities and those who are LEP so they may understand the facility policies around reporting, preventing, detecting, and responding to sexual abuse and sexual harassment.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility shall not rely on offender interpreters, offender readers, or other types of offender assistants except in exigent circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first response duties under 28 CFR §115.64, or the investigation of the offender's allegations.</p>

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding how the facility takes appropriate steps to ensure that all offenders have an equal opportunity to participate in the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Agency Head also explained the Department has a dedicated ADA Coordinator that provides resources to disabled or LEP offenders.. Offenders with either disabilities or LEP offenders are provided with alternatives to accommodate participation in the PREA program such as videos and brochures tailored to their primary language. All efforts are made by the facility to ensure impaired offenders are provided opportunities and benefits equal to those of unimpaired offenders.

Additionally, every effort is made to provide all training in a format that will be easily understood by offenders who have a physical or developmental impairment or who have limited English proficiency. The Georgia Department of Corrections Walker State Prison maintains a list of translators and this list is utilized for assisting with translation; Walker State Prison also has a contract with a Language Line Services and this can be utilized at any time when needed. PREA training for offenders is provided in a video format that is also closed-captioned to accommodate the hearing impaired. If an inmate is identified with a developmental impairment, training is provided through the video with additional instruction if the inmate indicates he has questions.

The Auditor was also able to confirm compliance with Georgia Department of Corrections Procedure 208.06 during the on-site visit when an Intake Staff member demonstrated the process utilized when communicating with an offender who is LEP, deaf, or disabled. The staff member provided a thorough demonstration of providing all the required PREA information to include the zero tolerance policy, how to report an incident of sexual abuse or sexual harassment, counseling services, and programs available.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff. Each staff member confirmed the Department policy prohibiting the use of an offender to provide translation services; all staff members acknowledged the use of either the language line or contacting another staff member to translate.

During the on-site visit, the Auditor interviewed four targeted offenders with either vision impairment, limited English proficiency, or hearing impaired. Each offender acknowledged receiving PREA educational information during the intake / transfer process. Each offender described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility. Additionally, offender acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations throughout the facility. These PREA bulletins are posted in multiple languages, located near the phones inside each dormitory, as well as several posted in common areas (educational and vocational classrooms) throughout the facility. The bulletins display phone numbers and mailing addresses for the PREA hotline, Statewide PREA Coordinator, Ombudsman, and the Sexual Assault Victims Advocacy Center.

Upon review of the policies, GDC Offender Information Guide, and upon completion of the targeted interviews with offenders, and the random interviews with facility staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.17	Hiring and promotion decisions
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 589 598 622">Interviews conducted with:</p> <p data-bbox="252 663 774 696">Administrative / Human Resources Staff</p> <p data-bbox="252 808 641 842">On-site Review Observations:</p> <p data-bbox="252 882 443 916">Personnel files</p> <p data-bbox="252 1028 1481 1408">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall not hire or promote anyone or enlist the services of a contractor, who may have contact with offenders, who has engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile facility, or other institution. The Department shall not hire or promote anyone or enlist the services of any contractor, 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 has been civilly or administratively adjudicated to have engaged in such activity.</p> <p data-bbox="252 1520 1460 1680">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with offenders.</p> <p data-bbox="252 1792 1468 2128">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states before hiring new employees or enlist the services of a contractor who may have contact with offenders. The Department shall ask all applicants and employees who may have contact with offenders directly about previous misconduct described in SOP 104.09, <i>Filling a Vacancy</i>, in written applications or interviews for hiring and promotions, and any written interview or written self-evaluations conducted as part of reviews of current employees. Every employee has a continuing affirmative duty to disclose any such misconduct.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the Department shall perform a Criminal History Record checks on all employees, volunteers, and contractors prior to start date and again within at least every five years. A tracking system shall be implemented at each local facility to ensure the criminal history checks are conducted within the appropriate time frame, according to policy, for each person with access to that facility.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states unless prohibited by law, the Department shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The Department complies with the Federal Privacy Act and Freedom of Information Act, and all other applicable laws, rules, and regulations. Material omissions regarding misconduct or the provision of materially false information shall be grounds for termination.

During the on-site phase of the audit, the Auditor conducted an interview with the Department's Administrative Human Resources personnel who confirmed the facility conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a contractor or volunteer and at least once every five years. The HR Staff Member also confirmed the GDC requirement imposed upon all employees to disclose any previous misconduct and the Department's requirement to provide information regarding a former employee upon request of another institution or agency. During the interview, the HR Staff Member provided the Auditor with the *GDC Sexual Abuse/Sexual Harassment Acknowledgement Statement*. The HR Staff Member demonstrated to the Auditor how all GDC employees are required to review and sign the document prior to employment; all completed documents are retained permanently on file in accordance to the GDC records retention policies.

Walker State Prison reported, in the 12 months prior to the audit, twenty-seven criminal background checks were performed of persons hired or promoted who may have contact with offenders. During the on-site visit, the Auditor reviewed twenty personnel files of new hires, employees with tenure, employees recently promoted, and those with specialized training. Each file contained the required documentation to include thorough background investigations, which were completed as required and in accordance to Georgia Department of Corrections Procedure 208.06 and the Official Code of Georgia Annotated (O.C.G.A.) §35-8-8.

Upon review of the policies and review of personnel files and upon completion of the interview conducted with the Human Resources Staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.



115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Walker State Prison Facility Layout / Camera Placements</p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Facility Warden</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all new or existing facility designs, modifications, and technology upgrades will include consideration of how they could enhance the Department's ability to protect offenders against sexual abuse. No less than annually, each facility shall assess, determine, and document whether adjustments to or the need for new or additional video monitoring technology and/or equipment to supplement its sexual abuse prevention, detection, and response efforts.</p> <p>During the on-site tour of the facility, the Auditor observed convex mirrors, security cameras, and video monitoring equipment in all housing areas, food service, laundry, in common areas, and outside throughout the grounds of the compound. Walker State Prison has not undergone any modifications or expansions to the facility since the last audit.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility effects the ability to protect offenders from sexual abuse. The Agency Head explained how the PREA Coordinator is consulted with any substantial modifications to ensure consideration of sexual abuse prevention. Additionally, the PREA Coordinator in collaboration with Engineering established a written statement on every project request to ensure that sexual safety is considered.</p> <p>The Agency Head also explained how facility leadership reviews monitoring technology to prevent, detect, and respond to incidents of sexual abuse. Camera footage is examined frequently to monitor actions of staff and offenders to ensure that all facilities are safely</p>

operated.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden. During the interview, the Facility Warden confirmed that prior to designing or acquiring any new facility or when planning any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect offenders from sexual abuse. The Facility Warden also confirmed that prior to the installation of the additional cameras the facility shall considered how the addition of such technology would enhance the Department's ability to protect offenders from sexual abuse.

The Facility Warden also informed the Auditor, both video and audio surveillance is regularly reviewed to ensure compliance with requirements for security checks and proper implementation of all security and safety procedures.

Upon review of the policy and the facility layout and camera placement, and upon completion of the interviews conducted with the Agency Head and the Facility Warden, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="252 170 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1406 483">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1430 595">Georgia Department of Corrections Procedure 103.10, <i>Evidence Handling, & Crime Scene Processing</i></p> <p data-bbox="252 629 1469 707">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, Sexual Harassment of</i></p> <p data-bbox="252 741 384 775"><i>Offenders</i></p> <p data-bbox="252 819 1382 898">Georgia Department of Corrections MOU with Georgia Correctional HealthCare, Satilla Advocacy Services</p> <p data-bbox="252 931 1445 965">Georgia Department of Corrections MOU with Sexual Assault Victims Advocacy Center, Inc.</p> <p data-bbox="252 1010 810 1043">SANEs / SAFEs Uniform Evidence Protocol</p> <p data-bbox="252 1155 596 1189">Interviews conducted with:</p> <p data-bbox="252 1234 568 1267">Random sample of Staff</p> <p data-bbox="252 1301 480 1335">SANE/SAFE Staff</p> <p data-bbox="252 1379 616 1413">PREA Compliance Manager</p> <p data-bbox="252 1458 767 1491">Offenders who reported a sexual abuse</p> <p data-bbox="252 1671 639 1704">On-site Review Observations:</p> <p data-bbox="252 1749 999 1783">Sexual Abuse / Harassment Reporting Procedures poster</p> <p data-bbox="252 1816 810 1850">Offender phones located in each dormitory</p> <p data-bbox="252 1962 1485 2130">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states each facility shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p>

Georgia Department of Corrections Procedure 103.10, *Evidence Handling, & Crime Scene Processing* establishes guidelines and procedures to be employed by the Office of Professional Standards (OPS) sworn personnel when identifying, examining, gathering, and documenting evidence. The designated case agent or investigator shall be responsible for ensuring the preservation, collection, marking/identification, packaging, and security of all evidence.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the Department's response to a sexual assault follows the guidelines in the U.S. Department of Justice's Office on Violence Against Women publication, *A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents*, dated April 2013 or the most current version.

Georgia Department of Corrections Procedure 103.06, *Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders* states the Georgia Department of Corrections, Office of Professional Standards (OPS) Investigators conduct investigations of allegations that appear to be criminal in nature for the Department. OPS Investigators have the have received specialized training and have the legal authority to conduct sexual abuse investigations in confinement settings.

During the pre-on-site phase of the audit, the Auditor established that investigators assigned to the Office of Professional Standards follow the United States Department of Justice, *A National Protocol for Sexual Assault Medical Forensic Examinations* a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

During the on-site phase of the audit, the Auditor conducted an interview with an investigator assigned to the Office of Professional Standards who confirmed the responsibilities of an investigator, reviewed the process of an investigation with the Auditor, and confirmed the use of a uniform evidence protocol for the collection of physical evidence.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states when there is a report of an incident of sexual abuse that was alleged to have occurred within the previous 72 hours, or there is a strong suspicion that an assault may have been sexual in nature, a physical examination of the alleged victim shall be conducted to determine if immediate medical attention is necessary. If the SANE protocol should be initiated, the SANE examination shall be provided at no cost to the offender.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the facility shall attempt to enter into agreement of Memorandum of Understanding (MOU) with a rape crisis center to make available a victim advocate to offenders alleging sexual abuse / sexual harassment upon request. If the facility cannot do so, efforts must be documented and local staff shall be identified and specifically trained to provide this service.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, contracts between GDC and the Georgia Correctional HealthCare, Satilla Advocacy Services and between GDC and the Sexual Assault Victims Advocacy Center, Inc. Both contracts use clear and concise language, provides the Department's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, the two contracts describe in detail, the expectations, and responsibilities of each contractor including performance measures and financial consequences if the required service is not met.

The Sexual Assault Nurse Examiners are contracted through Georgia Correctional HealthCare with the GDC. The Satilla Advocacy Services is a non-profit organization that provides services for sexual assault survivors and is the headquarters for the Sexual Assault Nurse Examiners.

During the on-site phase of the audit, the Auditor conducted an interview with the certified SANE Nurse, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department of Justice (DOJ) *National Protocol for Sexual Assault Medical Forensic Examinations Adults*. The SANE Nurse explained when they receive a notification for services request from the facility, either herself or another SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either she or one of the other SANE Nurses are available 24/7. The SANE Nurse confirmed there were no forensic medical examinations completed for Walker State Prison during the past 12 months.

The Sexual Assault Victims Advocacy Center, Inc. is a non-profit rape crisis center located in Fort Oglethorpe Georgia. The Advocacy Center and the satellite offices provide the community with advocacy services for victims of sexual assault.

The Sexual Assault Victims Advocacy Center provides offenders incarcerated at Walker State Prison with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Sexual Assault Victims Advocacy Center provides emotional support services, victim advocacy services upon request and provides offenders with the mailing address and phone number for services and support.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Sexual Assault Victims Advocacy Center and she confirmed the existing

contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the offenders at Walker State Prison to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested the phones inside the dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager to verify reporting methods for sexual abuse or sexual harassment allegations that are available for offenders and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for inmates and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the Sexual Assault Victims Advocacy Center is the designated outside entity for offender reporting.

During the on-site phase of the audit, the Auditor interviewed a random sample of staff regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical Staff. In addition, each staff member acknowledged the importance of the Department's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

Walker State Prison reported no forensic medical exams were conducted during the past 12 months. During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the Facility Warden and both confirmed this information is correct. As previously stated above, the Auditor also confirmed this information during the interview with the certified SAFE Nurse.

During the 12 months prior to the audit, Walker State Prison reported two allegations of sexual abuse and sexual harassment; one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted a targeted interview with an offender who reported an incident of sexual harassment or sexual abuse. The Auditor inquired to the offender, after reporting the incident, did the facility allow him to contact anyone. The offender confirmed to the Auditor that he was provided information on the sexual assault victims advocacy center as well as information on additional emotional support services.

Upon review of the policies, contracts with outside entities, the SANEs/SAFEs Uniform Evidence Protocol, and observations made during the facility tour, and upon completion of interviews conducted prior to and during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.22	Policies to ensure referrals of allegations for investigations
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1468 595">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of</i></p> <p data-bbox="252 636 383 669"><i>Offenders</i></p> <p data-bbox="252 710 1420 788">Georgia Department of Corrections Office of Professional Standards Investigator Training, Credentials</p> <p data-bbox="252 828 1117 862">Investigative Case files (2) – Sexual abuse and sexual harassment</p> <p data-bbox="252 902 925 936">Georgia Department of Corrections Agency Website</p> <p data-bbox="252 1120 598 1153">Interviews conducted with:</p> <p data-bbox="252 1193 422 1227">Agency Head</p> <p data-bbox="252 1267 486 1301">Investigative Staff</p> <p data-bbox="252 1411 1444 1579">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. The local SART is responsible for the administrative investigation of all allegations of sexual abuse or sexual harassment.</p> <p data-bbox="252 1686 1460 1977">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Sexual Abuse/Harassment Response Team (SART) is a team that consists of locally composed multi-disciplinary team, with both security and non-security staff, who work together to fulfill the Department’s zero tolerance policy toward all forms of sexual abuse, sexual harassment, and sexual activity among offenders. The team includes but not limited to SART Investigator, SART Medical, SART Mental Health, Facility Victim Advocate, and Retaliation Monitor.</p> <p data-bbox="252 2089 1412 2123">During the on-site phase of the audit, the Auditor conducted an interview with the Agency</p>

Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or sexual harassment. The Agency Head explained administrative investigations are completed on all allegations of sexual abuse and sexual harassment. These investigations are completed by the facility SART and all incidents are reviewed by facility leadership, as well as the PREA Coordinator. The Agency Head also explained that any investigation that includes a criminal component is referred to the agency's Office of Professional Standards for criminal investigation.

Georgia Department of Corrections Procedure 103.06, *Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders* states the Georgia Department of Corrections, Office of Professional Standards (OPS) has designated investigators assigned to conduct investigations of allegations that appear to be criminal in nature for the Department. OPS Investigators, are supervised by the Office of Professional Standards, and have received specialized training and have the legal authority to conduct sexual abuse investigations in confinement settings.

During the on-site phase of the audit, the Auditor conducted an interview with an Investigator assigned to the Office of Professional Standards who confirmed the responsibilities of an investigator, provided an overview of the investigative process, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Investigator confirmed attending and successfully completing the specialized training curriculum *PREA: Investigating Sexual Abuse in a Confinement Setting* developed by The Moss Group, Inc.,

The Investigator also confirmed agency policy requiring all allegations that appear to be criminal in nature, must be referred to the Office of Professional Standards and that OPS Investigators have the legal authority to conduct administrative and criminal investigations pursuant to O.C.G.A. §35-9-15.

Georgia Department of Corrections publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the department website <http://www.dcor.state.ga.us/Divisions/ExecutiveOperations/PREA/How-to-report>

During the 12 months prior to the audit, Walker State Prison reported two allegations; one allegation of sexual abuse and one allegation of sexual harassment. The Auditor reviewed two administrative investigations. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings.

The Auditor found each case contained all the appropriate documentation, and determined

that each incident was investigated promptly, thoroughly, and objectively by a qualified investigator who has received training and education and has the authority to conduct such investigations. The Auditor noted each file contained documentation to include but not limited to the initial incident reports, SART notification, Medical and Mental Health forms, initial assessment screening, advocacy information, housing logs, confinement forms, witness statements, victim and alleged aggressor statements, investigative report, notification of case disposition to offender, and monitoring for retaliation forms.

Upon review of the policies, documentation, and case files previously discussed, and upon completion of the interviews conducted during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Staff PREA Training Curriculum</p> <p>Georgia Department of Corrections Walker State Prison Training Roster / Staff Signatures</p> <p>Interviews conducted with:</p> <p>Random sample of Staff</p> <p>On-site Review Observations:</p> <p>Personnel Training Records</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states participation in training must be documented through employee signature or electronic verification. Participation documentation will note that employees understood the training they received by signing the <i>Sexual Abuse/Sexual Harassment Prison Rape Elimination Act Education Acknowledgement</i> statement. This form shall be retained in the employee's local personnel file. All Departmental employees shall be required to attend training annually on:</p> <ul style="list-style-type: none"> ● Department's zero tolerance for sexual abuse and sexual harassment ● How employees fulfill their responsibilities under Department's sexual abuse and sexual harassment; prevention, detection, reporting, and response policies and procedures; ● Offenders' rights to be free from sexual abuse and sexual harassment; ● The right of offenders & employees to be free from retaliation for reporting sexual abuse and sexual harassment; ● Dynamics of sexual abuse and sexual harassment in confinement settings; ● Common reactions of sexual abuse and sexual harassment in confinement settings; ● How to detect and respond to signs of threatened & actual sexual abuse and sexual harassment; ● How to avoid inappropriate relationships with offenders; ● Communicating effectively & professionally with offenders, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming offenders; ● How to comply with relevant laws related to mandatory reporting of sexual abuse;

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states training shall include gender specific reference and training to staff as it relates to the specific population supervised. Staff members transferring into a facility of different gender from prior institution shall receive gender-appropriate training.

During the pre-on-site phase of the audit, the Auditor reviewed training curriculum and documentation of staff signatures verifying training comprehension and attendance. The training curriculum outlined the staff member's responsibilities in preventing, detecting, and response to offender sexual abuse and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with offenders, understanding that offenders have the right to be free from sexual abuse and sexual harassment.

The Georgia Department of Corrections PREA training curriculum provided to the Auditor, titled *PREA Lesson Plan: Supervision of Offenders including Sexual Abuse & Assault*, includes an offender's right to be free from sexual abuse and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce *opposite gender* first line staff and supervision staff into an all-male or all-female housing unit and how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner consistent with security correctional environments. The training curriculum was extremely detailed with discussions of the required PREA standards, instructional videos from the Department of Justice and Just Detention International, and group discussion scenarios. During the on-site phase of the audit, the Auditor reviewed additional training records that also verified receipt of the required PREA training and included certificates for specialized training.

During the on-site phase of the audit, the Auditor conducted random staff interviews. Each staff member interviewed articulated the Department's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with offenders, and an offenders right to be free from sexual abuse and sexual harassment. All staff members acknowledged receiving the training every year during his/her In-service training.

Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the files reviewed during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Volunteer & Contractor Training Curriculum</p> <p>Georgia Department of Corrections Volunteer & Contractor Training Roster with Signatures</p> <p>Interviews conducted with:</p> <p>Volunteer or Contractor who have contact with Offenders</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall ensure that all volunteers and contractors who have contact with offenders are provided a copy of the policy and have been trained on their responsibilities under the Department’s PREA policies and procedures.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states 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 offenders. All volunteers and contractors who have contact shall be notified of the Department’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states participation must be documented through volunteer and contractor signature or electronic verification. Participation documentation will note that the volunteer or contractor understood the training they received by signing the <i>Sexual Abuse/Sexual Harassment Prison Rape Elimination Act Education Acknowledgement</i> statement.</p> <p>During the pre-on-site phase, the Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of</p>

policies and training received. The volunteer and contractor training was tailored based on the services they provide and the level of contact they have with offenders and included the Department's zero-tolerance policy regarding sexual abuse and sexual harassment along with how to report such incidents.

During the on-site visit, the Auditor conducted interviews with volunteers and contract staff; each staff member confirmed and acknowledge understanding of the Department's zero tolerance policy and PREA standards and reporting responsibilities.

Upon review of the policy and documentation and after completion of interviews conducted during the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.33	Inmate education
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections <i>Offender Orientation Checklist</i> – PREA Video</p> <p>Georgia Department of Corrections PREA - Offender Information Guide (multiple languages)</p> <p>Interviews conducted with:</p> <p>PREA Compliance Manager</p> <p>Intake Staff</p> <p>Random Sample of Offenders</p> <p>Targeted Inmates (Limited English Proficient, Deaf, or Disabled)</p> <p>On-site Review Observations:</p> <p>Offender Institutional files – Comprehensive PREA Education documentation</p> <p>PREA Informational Signage posted throughout facility</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states notification of the GDC’s zero-tolerance policy for sexual abuse and harassment and information on how to report an allegation at the receiving facility shall be provided to every offender upon arrival to the facility. In addition, to verbal notification, offenders will be provided a GDC PREA pamphlet.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states within 15 days of arrival, formal PREA education will be conducted by assigned staff members to all offenders, which will include a gender appropriate video on sexual abuse. Both the initial notification and the formal education will be documented in writing by signature of offender and placed in the offender’s institutional file.</p>	

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the PREA education will be provided by designated staff members and the presentation must include:

- The Department's zero tolerance of sexual abuse and sexual harassment;
- Definitions of sexually abusive behavior and sexual harassment;
- Prevention strategies the offender can take to minimize his/her risk of sexual victimization while in Department custody;
- Methods of reporting an incident of sexual abuse/sexual harassment against oneself, and for reporting allegations of sexual abuse involving other offenders;
- Treatment options and programs available to offender victims of sexual abuse and sexual harassment;
- How an investigation begins and the general steps to an investigation;
- Monitoring, discipline, and prosecution of sexual perpetrators;
- The prohibition against retaliation for reporting, and;
- Notice that male and female staff routinely work and visit housing areas;

During the on-site phase of the audit, the Auditor reviewed the comprehensive PREA educational video, provided in multiple languages and with closed caption, which is given to all GDC offenders within 15 days of arriving to a facility. During the on-site phase of the audit, the Auditor also reviewed multiple *Offender Orientation Checklist* documentation forms with offender signatures and acknowledgment of understanding. The facility maintains documentation of inmate participation with the form placed in the offender's institutional file.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offenders with disabilities, who are Limited English Proficiency (LEP), or have limited reading skills, shall be advised of the Department's zero tolerance policy on sexual abuse and sexual harassment. The local PREA Compliance Manager shall ensure the appropriate resources are available to offenders with disabilities and those who are LEP so they may understand the facility policies around reporting, preventing, detecting, and responding to sexual abuse and sexual harassment. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to offender by staff (blind/limited mental capacity). Additional resources include the GDC translator list, language line services.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and discussed the offender comprehensive PREA orientation and documentation process. The PREA Compliance Manager provided specific details on the process of educating offenders including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process by using PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

During the on-site visit, the Auditor interviewed four targeted inmates with either vision impairment, limited English proficiency, or hearing impaired. Each offender acknowledged receiving PREA educational information during the intake / transfer process. Each offender described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility. Additionally, offenders acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins. These PREA bulletins are posted in multiple languages, located near the phones banks inside every dormitory, as well as several informational bulletins were posted in common areas (educational and vocational classrooms) throughout the facility. The bulletins display phone numbers and addresses for the victim advocate services and the PREA hotline and are displayed in multiple languages.

During the on-site phase of the audit, the Auditor conducted a tour of the Intake and Transfer section of the facility. During the tour, the Auditor inquired to Intake Staff how do they ensure current offenders, as well as those transferred from other facilities have been educated on the Department's zero-tolerance policy on sexual abuse or sexual harassment. The Intake Staff member informed the Auditor that even if an offender has already received the orientation in a previous incarnation, all offenders entering the facility receive the PREA comprehensive orientation upon arrival to the facility.

During the on-site phase of the audit, the Auditor conducted twenty interviews with a random sample of offenders. All offender interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date offender facility roster (in alphabetical order) from every housing dormitory and selected every tenth offender from the rosters provided.

Offenders from every housing unit and of various diversities were interviewed. All twenty offenders interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All twenty offenders acknowledged being aware of the facility's zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Offenders also referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. Fourteen of the twenty offenders interviewed referred to utilizing the hotline as the most direct method to report or inquire about PREA information. The remaining six offenders referred to telling family or a staff member as the preferred method of reporting. All offenders interviewed also referred

to calling the PREA hotline or a family member as their source outside the facility. Eighteen of the twenty offenders interviewed were aware of the availability of submitting an anonymous PREA report and all twenty offenders were aware of third party reporting.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site tour, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.34	Specialized training: Investigations
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1468 595">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of</i></p> <p data-bbox="252 636 384 669"><i>Offenders</i></p> <p data-bbox="252 710 1412 788">Georgia Department of Corrections Investigator Specialized Training Curriculum/Training Certificates</p> <p data-bbox="252 896 596 929">Interviews conducted with:</p> <p data-bbox="252 969 485 1003">Investigative Staff</p> <p data-bbox="252 1115 639 1149">On-site Review Observations:</p> <p data-bbox="252 1189 421 1223">Training files</p> <p data-bbox="252 1335 1433 1503">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states in addition to the general PREA training, all staff investigating sexual abuse or sexual harassment allegations must be specifically trained in conducting sexual abuse and sexual harassment investigations in confinement settings.</p> <p data-bbox="252 1615 1468 1861">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders</i> states the Georgia Department of Corrections, Office of Professional Standards (OPS) Investigators conduct investigations of allegations that appear to be criminal in nature for the Department. OPS Investigators have the have received specialized training and have the legal authority to conduct sexual abuse investigations in confinement settings.</p> <p data-bbox="252 1973 1465 2141">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to</p>

substantiate a case for administrative action or prosecution referral. The Department shall maintain documentation that agents and investigators, whether internal or external, have completed the required specialized training in conducting sexual abuse investigations.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National PREA Resource Center, *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also conducted an interview with an Investigator assigned to the Office of Professional Standards who confirmed the responsibilities of an investigator, reviewed the process of an investigation with the Auditor, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Investigator confirmed attending and successfully completing the specialized training curriculum *PREA: Investigating Sexual Abuse in a Confinement Settings* developed by The Moss Group, Inc.,

The Investigator also confirmed agency policy requiring all allegations that appear to be criminal in nature, must be referred to the Office of Professional Standards and that OPS Investigators have the legal authority to conduct administrative and criminal investigations pursuant to O.C.G.A. §35-9-15.

The Investigator clearly articulated the comprehensive training he had received which included investigating sexual harassment and sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site visit, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Medical & Mental Health Training Curriculum</p> <p>Georgia Department of Corrections Training Certificates (Medical / Mental Health Staff)</p> <p>Interviews conducted with:</p> <p>Medical / Mental Health Staff</p> <p>On-site Review Observations:</p> <p>Medical Staff Training Records</p> <p>Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all contracted staff shall be trained on their responsibilities under the Department's PREA policies and procedures. All contracts who have contact with offenders shall be notified of the Department's zero-tolerance policy.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states GDC medical and mental health staff members and Georgia Correctional HealthCare (GCHC) staff members who have contact with offenders will be trained using the National Institute of Corrections (NIC) Specialized Training PREA Medical and MH Standards curriculum. Certification of completion will be printed and maintained in the employee-training file. In addition to the specialized training, these same employees are required to attend GDC's annual PREA in-service training.</p> <p>During the on-site phase of the audit, the Auditor reviewed training records of medical staff; training records included the NIC training curriculum and NIC certificates of completion (with signatures). The training curriculum included the required elements of the Department policy and of the PREA standard. During the on-site phase, the Auditor conducted interviews with three Medical & Mental Health staff members and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report</p>

allegations of sexual abuse and sexual harassment. Medical and Mental Health staff members also confirmed receiving the Department's general PREA training, which included the zero tolerance to sexual abuse and sexual harassment.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted, in addition to the observations made during the on-site visit file review, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.41	Screening for risk of victimization and abusiveness
	<p data-bbox="252 168 925 201">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1444 595">Georgia Department of Corrections PREA Sexual Victim/Aggressor Classification Screening Instrument</p> <p data-bbox="252 779 598 813">Interviews conducted with:</p> <p data-bbox="252 853 726 887">Staff Responsible for Risk Screening</p> <p data-bbox="252 927 638 960">Random sample of Offenders</p> <p data-bbox="252 1001 491 1034">PREA Coordinator</p> <p data-bbox="252 1218 638 1252">On-site Review Observations:</p> <p data-bbox="252 1292 941 1326">Inmate records of initial assessment & reassessment</p> <p data-bbox="252 1442 1460 1599">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all offenders shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders.</p> <p data-bbox="252 1715 1484 2089">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states counseling staff members will conduct a screening for risk of victimization and abusiveness, in SCRIBE, through use of the <i>PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument</i>. SCRIBE is the statewide correctional repository and information system used by the Georgia Department of Corrections. This screening will be conducted within 24 hours of arrival at the facility. Information from this assessment will be used to determine classification decisions with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offenders should be encouraged to disclose as much information as possible for the Department to provide the most protection possible under this policy. If an offender chooses not to respond to the questions relating to his or her level of risk, he or she may not be disciplined.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offenders who risk screening indicates a risk for victimization or abusiveness shall be reassessed whenever warranted due to an incident, disclosure or allegation of sexual abuse or harassment and also for all offenders, within 30 days of arrival at the institution. A case note shall be entered in SCRIBE to indicate this review has been conducted. This case note is for the sole purpose of documenting the screening occurred and shall not include any confidential or clinical information.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states any information related to sexual victimization or abusiveness, including information entered into the comment section of the *Intake Screening Form*, is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions.

During the on-site phase of the audit, the Auditor reviewed twenty-nine *PREA Sexual Victim/Aggressor Classification Screening Instrument* forms completed during this audit period. All forms were filled out completely and in accordance to the Department policy.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification staff member regarding her responsibility to conduct screenings for risk of victimization and abusiveness. The Classification staff member provided the Auditor with a complete overview of the offender classification process and the offender risk screening process to include how all offenders are screened within 24 hours of their arrival to the facility.

The Classification Supervisor explained how the interview process utilizes *PREA Sexual Victim/Aggressor Classification Screening Instrument* to determine the offender's risk and needs assessment. The risk assessment along with each offender's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) are utilized to determine an offender's risk level as well as to make housing and program placements and work assignments. *PREA Sexual Victim/Aggressor Classification Screening Instrument* is a series of questions, which include:

- Sexual orientation and/or gender identity;
- Age of the offender (25 years old or younger/60 years or older);
- If the offender is small in physical stature;
- Developmental disability / mental illness / physical disability;
- If the offender is familiar with the prison environment (first incarceration);
- Inmate's own perception of vulnerability.
- History of prior sexual victimization (sexual abuse);
- Criminal history (convictions) of offender exclusively non-violent;

The Auditor inquired to the classification staff member what actions are taken against offenders who refuse to cooperate or answer the questions in the risk screening process; she quickly responded that offenders are not required to provide answers, if this occurs, herself or another classification staff member will conduct a follow-up interview. The classification staff member confirmed that offenders are not disciplined for refusing to cooperate or answer the questions in the risk screening process.

The classification staff member confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Offenders meet regularly with a classification staff member to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

The Auditor inquired to the classification staff member how Walker State Prison protects such sensitive information. The classification staff member stated the access to such information is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions.

During the on-site phase of the audit, the Auditor reviewed thirty-one offender institutional files. These files were selected based upon the sexual abuse investigations, offenders who reported sexual victimization during intake, length at facility, and offenders that disclosed sexual orientation as gay or bisexual. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the Department's policy. In the 12 months prior to the audit, the facility reported there were seven offenders who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the classification staff member.

During the on-site visit, the facility provided the Auditor with an updated offender roster showing only one of the seven offenders who disclosed prior sexual victimization in custody. The Auditor conducted an interview with the offender who reported sexual victimization during the intake process. The offender confirmed being offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process; however, the

offender informed the Auditor he declined the opportunity to meet with medical or mental health care practitioner.

During the on-site visit, the Auditor conducted twenty interviews with a random sample of offenders. All offender interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date offender roster (in alphabetical order) from every housing unit and selected every tenth offender from the rosters provided.

Offenders from every housing unit and of various diversities were interviewed. Fourteen of the twenty offenders interviewed entered the facility fifteen months or longer, therefore this particular interview question was not posed to them. Of the remaining six offenders interviewed, all six offenders recalled the initial risk assessment interview as well as the second risk assessment interview occurring with a member of the classification staff and within a month or so from the initial assessment.

During the on-site phase of the audit, the Auditor inquired to the PREA Coordinator how the facility protects sensitive information, in particular an inmate's risk assessment. The PREA Coordinator explained that access to such information is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions.

Upon review of the policies, on-site file review, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Procedure 220.09, <i>Classification & Management of Transgender and Intersex Offenders</i></p> <p>Georgia Department of Corrections PREA Sexual Victim/Aggressor Classification Screening Instrument</p> <p>Interviews conducted with:</p> <p>PREA Compliance Manager</p> <p>Staff Responsible for Risk Screening</p> <p>PREA Coordinator</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states counseling staff members will conduct a screening for risk of victimization and abusiveness, in SCRIBE, through use of the PREA Sexual Victim/Sexual Aggressor Classification Screening Instrument. SCRIBE is the statewide correctional repository and information system used by the Georgia Department of Corrections. This screening will be conducted within 24 hours of arrival at the facility. Information from this assessment will be used to determine classification decisions with the goal of keeping separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all offenders shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states in deciding whether to assign a transgender or intersex offender to a male or female facility and in making other housing and programming assignments. The Department shall consider on a case-by-case basis whether a placement would ensure the offender’s health and safety, and whether the placement would present</p>

management or security problems.

Georgia Department of Corrections Procedure 220.09, *Classification & Management of Transgender and Intersex Offenders* states the Classification Committee will determine, on a case-by-case basis, the most appropriate classification assignments for each transgender offender. The offender's own views with respect to their safety should be given serious consideration.

Georgia Department of Corrections Procedure 220.09, *Classification & Management of Transgender and Intersex Offenders* states if the offender indicates he or she is transgender or intersex, staff must ensure he or she is allowed to shower separately.

Georgia Department of Corrections Procedure 220.09, *Classification & Management of Transgender and Intersex Offenders* states transgender offenders must never be placed in dedicated units or housed only with other transgender offenders.

During the on-site phase of the audit, the Auditor reviewed twenty-nine *PREA Sexual Victim/Aggressor Classification Screening Instrument* forms completed during this audit period. All forms were filled out completely and in accordance to the Department policy.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification staff member regarding her responsibility to conduct screenings for risk of victimization and abusiveness. The Classification staff member provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 24 hours of their arrival to the facility.

The Classification Supervisor explained how the interview process utilizes *PREA Sexual Victim/Aggressor Classification Screening Instrument* to determine the inmate's risk and needs assessment. The risk assessment along with each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) are utilized to determine an offender's risk level as well as to make housing and program placements and work assignments. *PREA Sexual Victim/Aggressor Classification Screening Instrument* is a series of questions, which include:

- Sexual orientation and/or gender identity;
- Age of the offender (25 years old or younger/60 years or older);
- If the offender is small in physical stature;
- Developmental disability / mental illness / physical disability;

- If the offender is familiar with the prison environment (first incarceration);
- Inmate's own perception of vulnerability.
- History of prior sexual victimization (sexual abuse);
- Criminal history (convictions) of offender exclusively non-violent;

The Auditor inquired to the classification staff member what actions are taken against offenders who refuse to cooperate or answer the questions in the risk screening process; she quickly responded that offenders are not required to provide answers, if this occurs, herself or another classification staff member will conduct a follow-up interview. The classification staff member confirmed that offenders are not disciplined for refusing to cooperate or answer the questions in the risk screening process.

The classification staff member confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Offenders meet regularly with a classification staff member to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

The classification staff member explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each offender, which is done strictly on a case-by-case basis. She further explained a transgender or intersex offender's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the inmate or solely based on the offender's classification level.

During the on-site visit phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager on how the facility uses information obtained from the risk screening assessment interview to keep offenders from being sexually victimized or being sexually abusive. The PREA Compliance Manager described the risk screening process and explained how depending upon the responses given by the offender; the information is used to assist in the initial classification and with determining the risk level of vulnerability. Offenders perceived to be vulnerable or predatory will be housed and given work / program assignments consistent with custody level. Offenders at a risk of high victimization are involuntarily segregated, only if an assessment of all other available alternatives has been made and it is determined that no other alternative means of separation from likely abusers exist.

The Auditor also inquired to the PREA Compliance Manager how the facility determine housing and program assignments for transgender or intersex offenders. The PREA Compliance Manager explained that housing for a transgender or intersex offender is determined on a case-by-case basis. The offender's safety as well as the safety and the security of the institutional compound will be taken into consideration when making the

housing determination.

During the on-site visit, the Auditor requested an up-to-date inmate roster for gay, bisexual, transgender, and intersex inmates to conduct targeted inmate interviews. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted three interviews with offenders who identify as either gay or bisexual. Each offender was questioned whether they were placed in a housing area only for gay or bisexual offenders. Each offender acknowledged being housed in a general population housing area for all offenders of the same level of classification. Each offender explained the classification levels are based on criminal history.

At the time of the on-site phase of the audit, the facility reported there were no transgender or intersex offenders in custody, therefore offenders in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator and inquired how the agency ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities or wings. The PREA Coordinator informed the Auditor that Department policy prohibits such placement.

Upon review of the policies and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.43	Protective Custody
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 660 598 694">Interviews conducted with:</p> <p data-bbox="252 734 454 768">Facility Warden</p> <p data-bbox="252 808 954 842">Staff who supervise Offenders in Segregated Housing</p> <p data-bbox="252 954 1484 1200">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offenders at high risk of sexual victimization shall not be placed in involuntarily segregation unless a determination has been made that there is no available alternative means of separation from likely abusers. This placement, including the concern for the offender’s safety must be noted in the SCRIBE case notes with documentation of why no alternative means of separation can be arranged.</p> <p data-bbox="252 1317 1484 1473">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility shall assign such offenders to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.</p> <p data-bbox="252 1590 1484 1792">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states if offenders placed in segregated housing for this purpose have restricted access to programs, privileges, education, or work opportunities, then the facility shall document the opportunities that have been limited, duration of the limitation, and the reasons for the limitations.</p> <p data-bbox="252 1908 1436 2065">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> 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.</p>

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding offenders at high risk of victimization. The Facility Warden explained the *PREA Sexual Victim/Aggressor Classification Screening Instrument* assists staff in determining an offender's risk factor, also helps in choosing appropriate and safe housing assignments for offenders identified as being at risk. Offenders who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The Facility Warden explained that the incident is reviewed as soon as possible and the offender will be released from segregation as soon as it can be determined that the offender is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises offenders in segregated housing. The Auditor inquired to the Facility Staff Member if an offender who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the offender. The Facility Staff Member articulated that offenders placed in segregated housing for protection are restricted only from work assignments and retain the same privileges as offenders in general population housing, to include participating in programs and education opportunities. The Facility Staff Member explained the restrictions would be limited to work opportunities and that staff document these restrictions to include that the work opportunities that have been limited, duration of the limitation, and the reasons for the limitations.

During the 12 months prior to the audit, the facility reported in the PAQ there were no offenders at risk of sexual victimization being assigned to involuntary segregated housing. During the on-site phase of the audit, the Auditor interviewed a Classification Staff Member and the PREA Compliance Manager and each confirmed the information previously provided by the facility in the PAQ. Therefore, offenders in this targeted category were not interviewed.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Procedure 222.06, <i>Consular Notification</i></p> <p>Georgia Department of Corrections MOU with Georgia Correctional HealthCare, Satilla Advocacy Services</p> <p>Georgia Department of Corrections MOU with Sexual Assault Victims Advocacy Center, Inc.</p> <p>Georgia Department of Corrections PREA - Offender Information Guide (multiple languages)</p> <p>Georgia Department of Corrections <i>Staff Guide on the Prevention & Reporting of Sexual Misconduct with Offenders</i></p> <p>Interviews conducted with:</p> <p>PREA Compliance Manager</p> <p>Random sample of Staff</p> <p>Random sample of Offenders</p> <p>On-site Review Observations:</p> <p>PREA informational signage</p> <p>PREA Hotline</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states notification of the GDC's zero-tolerance policy for sexual abuse and harassment and information on how to report an allegation at the receiving facility shall be provided to every offender upon arrival to the facility.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offenders may make a report of sexual abuse, sexual harassment, or retaliation by any of the following methods in writing, verbally, through internal or external methods. Offenders shall be encouraged to report allegations immediately and directly to a staff member. All reports shall be promptly documented and investigated. Offenders may choose to report these allegations anonymously.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the Department may choose to maintain a sexual abuse hotline, currently known as the PREA hotline. Hotline calls will not require the use of the offender's PIN number. Should a sexual abuse hotline be maintained, monitoring of this line will be the responsibility of the Office of Professional Standards (OPS), with immediate oversight by the Department's PREA Coordinator or designee.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states third party reports may be made to:

- Ombudsman's Office at P.O. Box 1329 Forsyth, GA 21029; 478.992.5358
- By email to the PREA Coordinator at PREA.report@gdc.ga.gov
- State Board of Pardons & Paroles, Office of Victim Services, 2 Martin Luther King Jr Drive S.E. Balcony Level, East Tower, Atlanta, GA 30334

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states staff member shall accept reports made verbally, in writing, and from third parties and shall promptly document any verbal reports. Staff members shall forward all reports or suspicions of sexual abuse or sexual harassment to their immediate supervisor or the designated SART member promptly.

Georgia Department of Corrections Procedure 222.06, *Consular Notification* states offenders identified as foreign nationals shall be informed of their right to contact the Consulate General representing his/her native country.

Georgia Department of Corrections *Staff Guide on Prevention and Reporting of Sexual Misconduct with Offenders* states staff must report inappropriate staff/offender behavior immediately. The presence of illegal and unethical behavior by staff compromises the security and safety of the agency. Staff that fail to report such behavior will be held accountable and sanctioned through dismissal. All efforts will be made to ensure the confidentiality of the reporting staff member. Resources for staff:

- Statewide PREA Coordinator

- Ombudsman
- Director of Victim's Services
- Confidential Reporting Hotline (888.992.7849)

During the pre-on-site phase of the audit, the Auditor reviewed the contract between GDC and the Sexual Assault Victims Advocacy Center, Inc. The contract uses clear and concise language, provides the Department's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, the contract describes in detail, the expectations, and responsibilities of each contractor including performance measures and financial consequences if the required service is not met.

The Sexual Assault Victims Advocacy Center, Inc. is a non-profit rape crisis center located in Fort Oglethorpe Georgia. The Advocacy Center and the satellite offices provide the community with advocacy services for victims of sexual assault.

The Sexual Assault Victims Advocacy Center provides offenders incarcerated at Walker State Prison with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Sexual Assault Victims Advocacy Center provides emotional support services, victim advocacy services upon request and provides offenders with the mailing address and phone number for services and support.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Sexual Assault Victims Advocacy Center and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the offenders at Walker State Prison to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested the phones inside the dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted twenty interviews with a random sample of offenders. All offender interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date offender facility roster (in alphabetical order) from every housing dormitory and selected every tenth offender from the rosters provided.

Offenders from every housing dormitory and of various diversities were interviewed. Offenders were asked how they would report an incident of sexual abuse or sexual harassment if it happened to them or another offender. Fourteen of the twenty offenders interviewed indicated using either the PREA hotline as their preferred method of reporting, while the remaining six offenders indicated telling family or a staff member. All of the offenders listed more than two

methods of reporting when the Auditor posed the initial question, confirming offenders are educated in the multiple reporting avenues available. Eighteen of the twenty offenders interviewed were aware of the availability of submitting an anonymous PREA report and all twenty offenders were aware of third party reporting.

During the on-site phase of the audit, the Auditor-conducted interviews with a random sample of staff and asked each staff member how an offender can privately report sexual abuse and sexual harassment or retaliation by other offenders or staff for previously reporting sexual abuse and sexual harassment.

Each staff member interviewed was able to articulate the various methods an offender may privately report an allegation of sexual abuse or sexual harassment (Ombudsman, email PREA Coordinator, or State Board of Pardons & Paroles). Staff members also explained that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

The Auditor inquired to each staff member how he/she would report an allegation of sexual abuse or sexual harassment of offenders privately. Staff responses were evenly divided to either calling the confidential reporting hotline (Ombudsman, Director of Victim's Services, or Confidential Reporting Hotline) or tell his/her immediate supervisor. Staff members expressed confidence in reporting either via the hotline or privately to his/her supervisor and no one reported fear of retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager to verify reporting methods for sexual abuse or sexual harassment allegations that are available for offenders and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for offenders and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the Sexual Assault Victims Advocacy Center or the State Board of Pardons and Paroles as the designated outside entities for offender reporting.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with offenders in the housing dormitories, various work assignments, and while touring the programs and educational classrooms and vocational building. The Auditor conducted informal interviews with offenders regarding the use of the PREA hotline and all confirmed it is accessible 24 hours a day, 7 days a week and is considered confidential. Throughout the facility tour, the Auditor conducted multiple test calls of the hotlines. The hotlines are secured, confidential lines. All phones tested during the on-site phase of the audit were found to be in working order.

Also throughout the facility tour, the Auditor observed PREA informational signage posted in all housing dormitories, educational and program classrooms, in the religious programs / recreation building, and throughout offender work areas (laundry, kitchen, etc.). The PREA informational signage was posted in multiple languages.

Upon review of the policies, contracts, and PREA informational brochures and signs and upon completion of interviews conducted, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.52	Exhaustion of administrative remedies
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 515 1388 548">Georgia Department of Corrections Procedure 227.02, <i>Statewide Grievance Procedure</i></p> <p data-bbox="252 734 598 768">Interviews conducted with:</p> <p data-bbox="252 806 774 840">Offenders who reported a Sexual Abuse</p> <p data-bbox="252 1025 1476 1193">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states allegations of sexual abuse and sexual harassment are not grievable issues. They should be reported in accordance with the methods outlined in Department policy.</p> <p data-bbox="252 1299 1476 1467">Georgia Department of Corrections Procedure 227.02, <i>Statewide Grievance Procedure</i> states sexual abuse and sexual harassment shall be forwarded to the Institutional Sexual Assault Response Team (SART) and processed according to GDC procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i>.</p> <p data-bbox="252 1579 1476 1915">During the 12 months prior to the audit, Walker State Prison reported two allegations of sexual abuse and sexual harassment; one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.</p> <p data-bbox="252 2027 1452 2150">During the on-site phase of the audit, the Auditor conducted a targeted interview with the offender who reported either an incident of sexual harassment or sexual abuse. The Auditor inquired to the offender if the facility notified each him of the final decisions made regarding</p>

their allegation and the offender confirmed receiving notification in writing. The Auditor verified the case status while reviewing the investigative files and confirmed the notification of the case disposition was provided to the offender.

Upon review of policies and, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections MOU with Sexual Assault Victims Advocacy Center, Inc.</p> <p>Georgia Department of Corrections PREA Informational Poster (English / Spanish)</p> <p>Georgia Department of Corrections PREA - Offender Information Guide (multiple languages)</p> <p>Interviews conducted with:</p> <p>Random sample of Offenders</p> <p>Offenders who reported a Sexual Abuse</p> <p>On-site Review Observations:</p> <p>PREA informational signage</p> <p>Sexual Abuse Awareness Brochure</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Institution PREA Compliance Manager, under the direction of the Facility Warden, shall attempt to enter into agreement or Memorandum of Understanding (MOU) with a rape crisis center to make available a victim advocate to offenders alleging sexual abuse / sexual harassment. If the facility cannot do so, efforts must be documented and local staff shall be identified and specifically trained to provide this service.</p> <p>During the pre-on-site phase of the audit, the Auditor reviewed the contract between GDC and the Sexual Assault Victims Advocacy Center, Inc. The contract uses clear and concise language, provides the Department's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, the contract describes in detail, the expectations, and responsibilities of each contractor including performance</p>

measures and financial consequences if the required service is not met.

The Sexual Assault Victims Advocacy Center, Inc. is a non-profit rape crisis center located in Fort Oglethorpe Georgia. The Advocacy Center and the satellite offices provide the community with advocacy services for victims of sexual assault.

The Sexual Assault Victims Advocacy Center provides offenders incarcerated at Walker State Prison with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Sexual Assault Victims Advocacy Center provides emotional support services, victim advocacy services upon request and provides offenders with the mailing address and phone number for services and support.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Sexual Assault Victims Advocacy Center and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the offenders at Walker State Prison to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested the phones inside the dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted twenty interviews with a random sample of offenders. All offender interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth offender from the rosters provided.

Offenders from every housing dormitory and of various diversities were interviewed. Offenders were asked if needed, there are services available outside of the facility for dealing with sexual abuse. Sixteen of the twenty offenders interviewed stated there are services available as they were explained to them during the comprehensive PREA orientation. Four of the twenty offenders could not provide specific details about the services, but acknowledged that if such services were needed, the informational bulletins posted in the dormitory provided specific details. All twenty offenders acknowledged being provided mailing address and telephone numbers to victim advocacy services and that such call is toll-free. All twenty offenders interviewed referred to the informational bulletins being posted in the dormitories above the phones, which provide offenders with the opportunity to read over the information frequently as well as easy access to the information.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with offenders in the housing dormitories,

various work assignments, and while touring the programs and educational classrooms, and workshop buildings. Throughout the tour, the Auditor noted PREA informational posters and Sexual Abuse Awareness Brochures displayed in all of the above areas / buildings.

During the 12 months prior to the audit, Walker State Prison reported two allegations of sexual abuse and sexual harassment; one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining inmate either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted a targeted interview with the offender who reported either an incident of sexual harassment or sexual abuse. The Auditor inquired to each, did the facility require them to submit to a polygraph test as a condition for proceeding with the investigation. The offender informed the Auditor that no one required them to complete a polygraph test as a condition of proceeding with the investigation. The Auditor inquired to the offender if he received notification of the final decision made regarding the allegation and were the notified in writing. The offender confirmed to the Auditor that he received written notification of the case disposition. The Auditor verified the case status while reviewing the investigative files and confirmed the case disposition as well as the notification to the offender.

Upon review of the policies and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.54	Third-party reporting
	<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="252 327 411 360">Documents:</p> <p data-bbox="252 405 1406 483">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1270 595">Georgia Department of Corrections Website http://dcor.state.ga.us/Divisions/ExecutiveOperations/PREA/How-to-report</p> <p data-bbox="252 629 1457 663">Georgia Department of Corrections PREA - Offender Information Guide (multiple languages)</p> <p data-bbox="252 707 852 741">PREA Informational Poster (English / Spanish)</p> <p data-bbox="252 853 596 887">Interviews conducted with:</p> <p data-bbox="252 931 639 965">Random sample of Offenders</p> <p data-bbox="252 1077 639 1111">On-site Review Observations:</p> <p data-bbox="252 1155 619 1189">PREA informational signage</p> <p data-bbox="252 1301 1474 1547">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offenders may make a report of sexual abuse, sexual harassment, or retaliation by any of the following methods in writing, verbally, through internal or external methods. Offenders shall be encouraged to report allegations immediately and directly to a staff member. All reports shall be promptly documented and investigated. Offenders may choose to report these allegations anonymously.</p> <p data-bbox="252 1659 1406 1738">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states third party reports may be made to:</p> <ul data-bbox="300 1805 1422 1962" style="list-style-type: none"> • Ombudsman’s Office at P.O. Box 1329 Forsyth, GA 21029; 478.992.5358 • By email to the PREA Coordinator at PREA.report@gdc.ga.gov • State Board of Pardons & Paroles, Office of Victim Services, 2 Martin Luther King Jr Drive S.E. Balcony Level, East Tower, Atlanta, GA 30334 <p data-bbox="252 2007 1474 2163">During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted. These PREA bulletins are posted in multiple languages, located near the phones banks inside every dormitory, as well as several posted in common areas (educational and vocational classrooms) throughout the compound. The bulletins</p>

display reporting instructions to include telling a family member or friend can file a third-party grievance via the Department's online complaint form on the Department website.

During the on-site phase of the audit, the Auditor conducted twenty interviews with a random sample of offenders. All offender interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date offender facility roster (in alphabetical order) from every housing dormitory and selected every tenth offender from the rosters provided.

Offenders from every housing dormitory and of various diversities were interviewed. All twenty offenders interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All twenty offenders acknowledged awareness of the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

When questioned about third party reporting, all twenty offenders interviewed acknowledged how to submit a third party report (ask a family member or friend to submit a report or call the PREA hotline). In addition, several of the offenders referred to the PREA bulletins posted throughout the facility as it contains the directions on how to submit a third party report.

During the pre-on-site phase of the audit, the Auditor visited the Department's website and confirmed the availability for the public to submit a report of sexual abuse or sexual harassment on behalf of an offender. The report may also be submitted anonymously.

Upon review of the policies and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Random sample of Staff</p> <p>Medical / Mental Health Staff</p> <p>Facility Warden</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states staff members shall forward all reports or suspicions of sexual abuse or sexual harassment to their immediate supervisor or the designated SART member promptly.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states staff, First Responder, and Department response protocols shall follow the guidelines outlined in the facility’s coordinated response plan. The PREA Unit will be notified of all allegations via the PREA Initial Notification Form.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states staff shall not reveal any information related to sexual victimization or abusiveness is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all reports of sexual abuse or sexual harassment will be considered allegations and will be investigated. All allegations that appear to be criminal in nature, must be referred to the Office of Professional Standards and that OPS Investigators have the legal authority to conduct administrative and criminal investigations pursuant to O.C.G.A. §35-9-15.</p>

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the on-site phase of the audit, the Auditor conducted interviews with three Medical and Mental Health Staff regarding responsibilities to disclose to inmates the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Each Medical and Mental Health Staff member articulated in detail step-by-step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Staff member acknowledged disclosing the confidentiality limitation prior to the initiation of services with any inmate. The Auditor inquired if any inmates had reported an incident of sexual abuse or harassment during the past 12 months to them and only one of the three Medical Staff members interviewed indicated receiving such a report and immediately reported the incident to security staff.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired how Walker State Prison responds when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone who is considered vulnerable adult under state law. The Facility Warden explained that Walker State Prison does not house offenders under the age of 18 nor offenders who are considered vulnerable adults.

The Auditor inquired to the Facility Warden are allegations of sexual abuse and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Warden indicated all allegations of sexual abuse and sexual harassment, no matter the origin of reporting, are reported directly to the Office of the Professional Standards.

Upon review of the policies and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Facility Warden</p> <p>Random sample of Staff</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that prevents sexual abuse and sexual harassment. This includes, but not limited to:</p> <ul style="list-style-type: none"> • Taking all reports concerning sexual abuse and sexual harassment seriously; • Initiating immediate reporting of alleged sexual abuse and sexual harassment ; • Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse or sexual harassment; • Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an incident of sexual abuse, sexual harassment, or retaliation. <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Warden shall designate a safe dorm(s) or safe beds for those offenders identified as highly vulnerable to sexual abuse.</p> <p>During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff and inquired about his/her actions if they received information that an inmate was in imminent risk of sexual abuse. Each staff member articulated the agency's response protocol to receiving such information and all staff members interviewed confirmed the first priority is ensuring the safety of the offender. Staff indicated that once the offender who was at risk is secured, they would immediately notify their Supervisor.</p>

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to what action is taken upon learning an offender is subject to a substantial risk of imminent sexual abuse. The Facility Warden informed the Auditor that once a staff member receives information that an offender may be at risk for sexual abuse or sexual harassment, that offender is immediately removed from the area. The offender victim's housing preference is considered, however the decision on an offender's ultimate placement is driven by the need for protection from possible abuse and/or retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding what action is taken upon learning an offender is subject to a substantial risk of imminent sexual abuse. The Agency Head stated if an offender is at risk of imminent sexual abuse the first thing staff will be responsible for separating the victim from the potential abuser. The potential victim will be given the opportunity to speak with a staff member regarding the situation as well as Medical and Mental Health. If necessary, a housing change or facility transfer may be required for that offender.

Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Facility Warden</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states in cases where there is an allegation that sexual abuse occurred at another Department facility, the Facility Warden (or designee) of the victim’s current facility will provide notification to the Facility Warden of the institution where the allegation allegedly occurred and the Department’s PREA Coordinator.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states in cases alleging sexual abuse by staff at another institution, the Facility Warden of the offender’s current facility refers the matter directly to the Regional SAC and the Department’s PREA Coordinator.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states such notifications shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The facility shall document that is has provided such notification. The Facility Warden that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p>In the twelve months prior to the audit, Walker State Prison reported receiving no allegations of sexual abuse from another facility and no allegations were received from a Walker State Prison offender alleging sexual abuse while confined at another facility.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the</p>

facility. The Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notifies the Office of Professional Standards. If the time of the alleged occurrence were recent, Walker State Prison would secure the crime scene until the OPS Investigator could collect evidence.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired if another agency or facility refers allegations of sexual abuse or sexual harassment that occurred within one of your facilities, is there a designated point of contact. The Agency Head explained that the point of contact for each facility is the PREA Compliance Manager and the Statewide PREA Coordinator. All allegations received are forwarded for an administrative investigation and those containing criminal allegations are forwarded immediately for criminal investigation.

Upon review of the policy, documentation, and investigative files, and upon completion of the interviews conducted, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.64	Staff first responder duties
	<p data-bbox="252 170 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1406 483">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 663 596 696">Interviews conducted with:</p> <p data-bbox="252 741 919 775">Security Staff / Non-Security Staff First Responders</p> <p data-bbox="252 819 568 853">Random sample of Staff</p> <p data-bbox="252 898 767 931">Offenders who reported a sexual abuse</p> <p data-bbox="252 1032 1469 1200">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse and sexual harassment. All Departmental employees shall be required to attend training annually.</p> <p data-bbox="252 1312 1469 1469">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states upon learning of an offender sexual abuse allegation or incident, the first security staff member to respond to the report shall be required to:</p> <ul data-bbox="300 1536 1485 2130" style="list-style-type: none"> • Separate the alleged victim and abuser; • Notify the Shift OIC; • Preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence; • Instruct that the alleged victim not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; • Instruct that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; • Ensure the victim receives immediate medical attention; • Implement local PREA Notification Procedures to ensure all required personnel are notified (Warden, Field Operations Manager, Deputy Warden, SART Leader, Compliance Manager, Internal Investigations, etc.);

- Ensure all reports are completed prior to leaving the institution for the day;
- Ensure the victim receives a mental health evaluation within 24 hours;
- Ensure the alleged victim is housed separately from the alleged perpetrator;

During the on-site phase of the audit, the Auditor conducted random Staff interviews and three targeted interviews (Security Staff who act as First Responders) regarding his/her role as a First Responder to an allegation of sexual abuse. The Staff Members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify the Shift OIC, and ensure the alleged victim receives the appropriate treatment from Medical and Mental Health.

In addition, each Staff Member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder. Every Staff Member interviewed articulated in detail the responsibilities of a First Responder and the importance of his/her responsibility when responding to an incident of sexual abuse or sexual harassment.

During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted a targeted interview with an offender who reported an incident of sexual abuse or sexual harassment. The Auditor inquired to the offender, after reporting the allegation, how did the facility respond and what did staff do when they first arrived to the scene. The offender informed the Auditor that staff responded quickly, immediately removed him from the housing area, inquired to the offender if he was injured, and escorted him to medical and mental health for appropriate evaluation and follow-up treatment.

Upon review of the policy, documentation, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.65	Coordinated response
	<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="252 324 411 358">Documents:</p> <p data-bbox="252 398 1404 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1449 551">Georgia Department of Corrections, <i>Walker State Prison PREA Coordinated Response Plan</i></p> <p data-bbox="252 663 596 696">Interviews conducted with:</p> <p data-bbox="252 736 453 770">Facility Warden</p> <p data-bbox="252 882 1477 1043">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states each facility shall develop a written institutional plan to coordinate actions taken in response in an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="252 1155 1471 1317">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states upon learning of an offender sexual abuse allegation or incident, the first security staff member to respond to the report shall be required to:</p> <ul data-bbox="300 1384 1484 2107" style="list-style-type: none"> • Separate the alleged victim and abuser; • Notify the Shift OIC; • Preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence; • Instruct that the alleged victim not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; • Instruct that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; • Ensure the victim receives immediate medical attention; • Implement local PREA Notification Procedures to ensure all required personnel are notified (Warden, Field Operations Manager, Deputy Warden, SART Leader, Compliance Manager, Internal Investigations, etc.); • Ensure all reports are completed prior to leaving the institution for the day; • Ensure the victim receives a mental health evaluation within 24 hours; • Ensure the alleged victim is housed separately from the alleged perpetrator;

Medical Staff shall ensure that the inmate victim(s) and/or inmate perpetrator(s) are referred for mental health services if appropriate. Mental Health Staff shall ensure that inmate victim(s) and/or perpetrator(s) receive the appropriate services.

During the pre-on-site phase of the audit, the Auditor reviewed the above *Walker State Prison PREA Coordinated Response Plan*. The plan is very detailed, provides systematic instructions, and outlines the roles and responsibilities for all staff responding to an incident of sexual abuse.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to the implementation of the PREA Coordinated Response to Sexual Abuse. The Facility Warden provided a detailed description of the response plan and each staff member's responsibility when responding to an allegation of sexual abuse or sexual harassment.

Upon review of the policies and upon completion of the on-site interview with the Facility Warden, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Facility Warden</p> <p>PREA Compliance Manager</p> <p>The Georgia Department of Corrections does not engage in collective bargaining with Correctional Officers or any facility or institutional staff member.</p> <p>During the on-site phase of the audit, the Auditor verified that the GDC and Walker State Prison does not engage in collective bargaining during interviews with the Warden, PREA Compliance Manager, and the Agency Head.</p> <p>Upon review of the policies and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.67	Agency protection against retaliation
	<p data-bbox="252 168 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 284">Auditor Discussion</p> <p data-bbox="252 329 411 365">Documents:</p> <p data-bbox="252 405 1406 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 665 596 701">Interviews conducted with:</p> <p data-bbox="252 741 991 777">Designated Member Charged with Monitoring Retaliation</p> <p data-bbox="252 817 775 853">Offenders who reported a Sexual Abuse</p> <p data-bbox="252 893 453 929">Facility Warden</p> <p data-bbox="252 969 427 1005">Agency Head</p> <p data-bbox="252 1113 639 1149">On-site Review Observations:</p> <p data-bbox="252 1189 552 1225">Investigative Case files</p> <p data-bbox="252 1332 1481 1529">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse and sexual harassment. This includes promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse or sexual harassment.</p> <p data-bbox="252 1646 1481 1807">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states anyone who retaliates against a staff member or an offender who has reported an allegation of sexual abuse or sexual harassment or who has participated in a subsequent investigation shall be subject to disciplinary action.</p> <p data-bbox="252 1924 1481 2121">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall protect offenders and staff members who report sexual abuse or sexual harassment from retaliation. 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</p>

staff members who fear retaliation for reporting or for cooperating with investigations.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the designated retaliation monitor shall, for at least 90 days following a report of abuse, monitor the conduct and treatment of offenders or staff members who reported the sexual abuse or who participated in an investigation, to see if there are any changes that may suggest possible retaliation, and will act promptly to remedy any such retaliation.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states monitoring will include review of any offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff members. Periodic in-person status checks shall be made by the monitor as well. Such monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. The obligation for monitoring will terminate if the allegation is unfounded.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member designated with monitoring retaliation. The Staff Member articulated that in an effort to prevent retaliation against offenders and staff who report sexual abuse or harassment or those who cooperate with an investigation, to include monitoring those individuals for at least 90 days. The Staff Member reviews disciplinary reports, offender housing or transfers, and negative performance reviews of staff members. If the Staff Member had a concern that potential retaliation might occur beyond the 90 days, the Staff Member would continue to monitor conduct and treatment until the issue or threat is resolved.

During the on-site phase of the audit, the Auditor reviewed the two investigative files. Each file contained forms showing the retaliation monitoring interviews that were conducted with offenders who previously alleged sexual abuse or sexual harassment. Each form provided a detailed explanation of the interview, statements from the offender, and comments from the Staff Member. The monitoring interviews were conducted at the 30, 60, and 90 day review dates.

During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted a targeted interview with an offender who reported an incident of sexual abuse or sexual harassment. The Auditor inquired to the offender if he felt protected against possible revenge from staff or offenders for reporting an incident of sexual abuse. The offender acknowledged feeling safe as well as described the monthly meetings with staff (retaliation monitoring). Additionally, the offender explained to the Auditor he could go directly to a staff member if he ever felt threatened or if an issue arises. The offender spoke highly of the professionalism displayed by all staff at Walker State Prison.

Additionally, during the twelve months prior to the audit, the facility reported no allegations of retaliation were reported. Therefore, offenders in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired on the different measures taken to protect offenders and staff from retaliation for reporting allegations of sexual abuse or sexual harassment. The Facility Warden confirmed the facility would take all necessary steps to protect any person who reports a sexual abuse / harassment incident from retaliation. The Facility Warden explained that housing changes or transfers of offenders, disciplinary action against staff members – including possible dismissal – or other means of removal of those who retaliate against someone who reports an allegation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency protects offenders or staff from retaliation for sexual abuse or sexual harassment allegations. The Agency Head explained that facilities deploy numerous measures including housing, program, and work assignments changes. If warranted, an offender may be transferred to another Department facility in order to protect him from retaliation. All offenders who report sexual abuse are monitored for retaliation for at least 90 days. Staff members are required to monitor the offender with periodic status checks every 30 days to ensure they are not experiencing any additional problems. Offenders are also provided information for the local rape crisis center for emotional support services.

The Auditor inquired to the Agency Head if an individual cooperates with an investigation expresses a fear of retaliation, what measures does the agency take to protect that individual against retaliation. The Agency Head explained the same process previously described is utilized. If the individual is an offender, he may be afforded a housing change or transfer to another Department facility. That offender will also be subject to the 90-day monitoring.

Upon review of the policy, investigative files, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>Staff who supervise offenders in Segregated Housing</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility shall assign such offenders to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states if offenders placed in segregated housing for this purpose have restricted access to programs, privileges, education, or work opportunities, then the facility shall document the opportunities that have been limited, duration of the limitation, and the reasons for the limitations.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises offenders in segregated housing. The Auditor inquired to the Facility Staff Member if an offender who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the offender. The Facility Staff Member articulated that offenders placed in segregated housing for protection are restricted only from work assignments and retain the same privileges as offenders in general population housing, to include participating in programs and education opportunities. The Facility Staff Member explained the restrictions would be limited to work opportunities and that staff document these restrictions to include that the work opportunities that have been limited, duration of the limitation, and the reasons for the limitations.</p> <p>During the 12 months prior to the audit, the facility reported there were no offenders who reported sexual abuse, being assigned to involuntary segregating housing. During the on-site</p>

phase of the audit, the Auditor reviewed two administrative investigations and confirmed the two offenders who reported sexual abuse or sexual harassment were not placed into involuntary segregated housing. Therefore, offenders in this targeted category were not interviewed.

Additionally, during the twelve months prior to the audit, the facility reported no allegations of retaliation were reported. Therefore, offenders in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding offenders who alleged sexual abuse. Offenders who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible and the offender will be released from segregation as soon as it can be determined that the offender is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.71	Criminal and administrative agency investigations
	<p data-bbox="252 170 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1406 483">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 517 1469 595">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of</i></p> <p data-bbox="252 629 384 663"><i>Offenders</i></p> <p data-bbox="252 707 1118 741">Investigative Case files (2) – Sexual abuse and sexual harassment</p> <p data-bbox="252 931 600 965">Interviews conducted with:</p> <p data-bbox="252 999 488 1032">Investigative Staff</p> <p data-bbox="252 1223 639 1256">On-site Review Observations:</p> <p data-bbox="252 1290 424 1323">Training files</p> <p data-bbox="252 1447 1453 1648">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states any knowledge suspicion or information regarding sexual abuse or sexual harassment shall be reported immediately. All allegations of sexual abuse or sexual harassment will be investigated promptly, thoroughly, and objectively including third party and anonymous reports.</p> <p data-bbox="252 1760 1469 2051">Georgia Department of Corrections Procedure 103.06, <i>Investigations of Allegations of Sexual Contact, Sexual Abuse, and Sexual Harassment of Offenders</i> states the Georgia Department of Corrections, Office of Professional Standards (OPS) has designated investigators assigned to conduct investigations of allegations that appear to be criminal in nature for the Department. OPS Investigators, are supervised by the Office of Professional Standards, and have received specialized training and have the legal authority to conduct sexual abuse investigations in confinement settings.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the local SART is responsible for the administrative investigation of all allegations of sexual abuse or sexual harassment. In cases where allegations are made against staff members, 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, an interview shall not be conducted, nor will a statement be collected from the accused perpetrator without first consulting the Regional SAC.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states appointing authorities or their designees shall report all allegations of sexual assault with penetration and those with immediate and clear evidence of physical contact, to their Regional Director, Regional SAC and the Department's PREA Coordinator immediately upon receipt of the allegation. Where sexual abuse is alleged and cannot be cleared at the local level, the Regional SAC shall determine the appropriate response upon notification. If this appropriate response is to open a criminal investigation, the Regional SAC will assign an agent or investigator who has received special training in sexual abuse investigations.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the credibility of the victim, suspect, or witness shall be assessed on an individual basis and will not be determined by the person's status as an offender or staff member. An offender who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states administrative and criminal investigations shall include an effort to determine whether staff member actions or failures to act contributed to the abuse. This shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind the credibility assessments, and investigative facts and findings. Substantiated allegations of conduct that is deemed criminal shall be referred for prosecution.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the Office of Professional Standards (OPS) shall maintain all such written reports for as long as the abuser is incarcerated or employed by the Department, plus five years.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states the departure of the alleged abuser or victim from the employment or control of the Department shall not provide a basis for terminating the

investigation.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National PREA Resource Center, Specialized Training: Investigating Sexual Abuse in Confinement Settings and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also conducted an interview with an Investigator assigned to the Office of Professional Standards who confirmed the responsibilities of an investigator, reviewed the process of an investigation with the Auditor, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Investigator confirmed attending and successfully completing the specialized training curriculum PREA: Investigating Sexual Abuse in a Confinement Setting developed by The Moss Group, Inc. The Investigator also confirmed agency policy requiring all allegations that appear to be criminal in nature, must be referred to the Office of Professional Standards and that OPS Investigators have the legal authority to conduct administrative and criminal investigations pursuant to O.C.G.A. §35-9-15.

The Investigator clearly articulated the comprehensive training he had received which included investigating sexual harassment and sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted a targeted interview with an offender who reported either an incident of sexual harassment or sexual abuse. The Auditor inquired to the offender, did the facility require them to submit to a polygraph test as a condition for proceeding with the investigation. Both offender informed the Auditor that no one required them to complete a polygraph test as a condition of proceeding with the investigation.

The two allegations included one sexual harassment allegation and one sexual abuse allegation. The sexual harassment allegation was an offender-on-offender allegation and was closed as substantiated. The sexual abuse allegation was an offender-on-offender allegation, which was closed as unfounded.

The Auditor reviewed two administrative investigations. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings.

The Auditor found each case contained all the appropriate documentation, and determined that each incident was investigated promptly, thoroughly, and objectively by a qualified investigator who has received training and education and has the authority to conduct such investigations. The Auditor noted each file contained documentation to include but not limited to the initial incident reports, SART notification, Medical and Mental Health forms, initial assessment screening, advocacy information, housing logs, confinement forms, witness statements, victim and alleged aggressor statements, investigative report, notification of case disposition to offender, and monitoring for retaliation forms.

Both investigative cases reviewed by the Auditor, contained all documented reports for that specific incident, an offender body chart, offender notifications, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings. Additionally, each completed report included an assessment as to whether staff actions or a failure to act on the part of staff contributed to the abuse. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the case findings.

Upon review of the policies, investigative case files, and documentation listed above, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Investigative Staff</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states there shall be no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview an Investigator assigned to the Office of Professional Standards. The Investigator provided the Auditor with a complete overview of the investigative process to include verifying specialized training credentials. The Investigator articulated the investigative process beginning with initial notification, investigation of the allegation, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of <i>Miranda</i> and <i>Garrity</i>, and criteria required for administrative action and prosecution referrals. The Auditor inquired to the Investigator what standard of evidence is required to substantiate allegations of sexual abuse or sexual harassment. The Investigator explained that the Department imposes no standard higher than a preponderance of the evidence.</p> <p>Upon review of the policy and upon completion of the interview with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.73	Reporting to inmates
	<p data-bbox="248 168 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1406 479">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="248 519 1283 555">Georgia Department of Corrections PREA Investigative Case Final Notifications</p> <p data-bbox="248 595 1121 631">Investigative Case files (2) – Sexual abuse and sexual harassment</p> <p data-bbox="248 813 596 848">Interviews conducted with:</p> <p data-bbox="248 889 485 925">Investigative Staff</p> <p data-bbox="248 965 454 1001">Facility Warden</p> <p data-bbox="248 1182 1458 1554">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states following the close of an investigation into an offender’s allegation that he or she suffered sexual abuse in a Department facility, the facility shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, unfounded, unsubstantiated-forwarded to Office of Professional Standards, or substantiated-forwarded to Office of Professional Standards. The notification will be completed by a member of the local SART unless appointing authority delegates to another designee. Such notifications or attempted notifications shall be documented on the <i>PREA Disposition Offender Notification Form</i>.</p> <p data-bbox="248 1671 1481 1998">During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.</p> <p data-bbox="248 2114 1406 2150">During the on-site phase of the audit, the Auditor conducted a targeted interview with the</p>

offender who reported either an incident of sexual harassment or sexual abuse. The Auditor inquired to the offender if the facility notified him of the final decisions made regarding his allegation. The offender confirmed to the Auditor that he received notification by staff of the case disposition. The Auditor verified the notification while reviewing the investigative files and the offender notification contained the date, case disposition, and offender signature.

During the on-site phase of the audit, the Auditor reviewed two administrative investigative case files from the 12 months prior to the audit. Both investigative case files were closed with a final disposition which contained an offender notification form documenting the outcome of the case (substantiated, unsubstantiated, or unfounded) with the signature of the offender documented on the notification.

During the on-site phase of the audit, the Auditor conducted an interview with the Investigator and inquired about the Department's notification procedures, to an alleged victim of sexual abuse, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or unfounded. The Investigator confirmed such notifications are completed by the facility SART member.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an offender who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that the facility SART member notifies the offender of an outcome in all investigations completed by the OPS.

Upon review of the policies, investigative case files, and upon completion of the interviews with staff, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that comply with and exceeds the PREA standard.

115.76	Disciplinary sanctions for staff
	<p data-bbox="252 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 400 1406 479">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 591 596 624">Interviews conducted with:</p> <p data-bbox="252 665 775 698">Administrative (Human Resources) Staff</p> <p data-bbox="252 810 1477 1014">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states staff members who engage in sexual abuse with an offender shall be banned from correctional institutions and subject to disciplinary action, with termination being the presumptive discipline, and may also be referred for criminal prosecution when appropriate.</p> <p data-bbox="252 1126 1461 1330">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states disciplinary sanctions for violations of Department policy related to sexual harassment will be commensurate with the nature and circumstances of acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff members with similar histories.</p> <p data-bbox="252 1442 1477 1691">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all terminations for violations of the Department sexual abuse or sexual harassment policies, or resignations by staff members that would have been terminated if not for their resignation shall be reported to law enforcement agencies, unless the activity was clearly not criminal. These shall also be reported, as required, to the Georgia Peace Officers Standards and Training Council.</p> <p data-bbox="252 1803 1430 1881">The facility reported no staff violations or terminations of the Department’s sexual abuse or sexual harassment policies during the 12 months prior to the audit.</p> <p data-bbox="252 1993 1445 2157">During the on-site phase of the audit, the Auditor conducted an interview with Administrative HR Staff Member who confirmed that Walker State Prison had no staff member violate or terminated for violating the Department’s policy against sexual abuse or sexual harassment during the past 12 months.</p>

Upon review of the policy, personnel files, and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.77	Corrective action for contractors and volunteers
	<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="252 327 411 360">Documents:</p> <p data-bbox="252 400 1406 479">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 591 596 624">Interviews conducted with:</p> <p data-bbox="252 665 453 698">Facility Warden</p> <p data-bbox="252 810 1469 1099">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> 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.</p> <p data-bbox="252 1211 1449 1335">The facility reported there have been no contractor or volunteer violations or terminations of the Department's sexual abuse or sexual harassment policies during the 12 months prior to the audit.</p> <p data-bbox="252 1447 1481 1783">During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding any violation of the facility's sexual abuse or sexual harassment by a contractor or volunteer. The Facility Warden explained that the incident would be reported to the Office of Professional Standards, which would conduct an investigation. If the investigation shows the activity was criminal, then the incident will be reported to law enforcement agencies. The Facility Warden also explained the incident would be reported to any relevant licensing entities and the contractor or volunteer would be prohibited from any further contact at Walker State Prison or any facility within the GDC.</p> <p data-bbox="252 1895 1481 2007">Upon review of the policy and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>Medical / Mental Health Staff</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department prohibits all consensual sexual activity between offenders, and offenders may be subject to disciplinary action for such activity. Consensual (non-coerced) sexual activity between offenders does not constitute sexual abuse, but is considered a disciplinary issue. All instances of sexual contact between offenders will be treated as non-consensual unless proven otherwise during the course of an investigation.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offenders shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the offender engaged in offender-on-offender sexual abuse or sexual harassment. These sanctions shall be imposed in accordance with SOP 209.01, Offender Discipline.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the disciplinary process shall consider whether the offender's mental disabilities or mental illness contributed to behavior when determining what type of sanction, if any, will be imposed.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states if the facility offers therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer or require the perpetrator to participate in such interactions as a condition of access to programming or other benefits.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states an offender may be disciplined for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states for the purposes of a disciplinary action, a report of sexual abuse made in good faith upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish sufficient evidence to substantiate the allegation. Following an administrative finding of malicious intent on behalf of the offender making a false report, regardless of method used, the offender shall be subject to disciplinary sanctions pursuant to a formal disciplinary process in accordance with SOP 209.01, Offender Discipline.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the facility's policy on disciplinary sanctions for an offender after an administrative or criminal finding that the offender engaged in offender-on-offender sexual abuse. The Facility Warden referred to the existing policy that an offender would be subject to disciplinary sanctions, which would be conducted in accordance to the formal disciplinary process.

During the on-site phase of the audit, the Auditor conducted an interview with three Medical and Mental Health Staff members and discussed the victim advocacy services available to offenders and counseling services available for abusers. Each Medical and Mental Health Staff member explained the services provided at the facility and through the victim advocacy crisis center, include counseling and emotional support services. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

Upon review of the policy and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Offenders who disclose Sexual Victimization at Risk Screening</p> <p>Staff responsible for Risk Screening</p> <p>On-site Review Observations:</p> <p>Offender records of initial assessment & reassessment</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states all offenders shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders. This screening will be conducted within 24 hours of arrival at the facility.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offenders who disclose prior sexual victimization, or has previously perpetrated sexual abuse, either in an institutional setting or in the community, will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states any information related to sexual victimization or abusiveness, including information entered into the comment section of the Intake Screening Form, is limited to a need-to-know basis for staff, only for the purpose of treatment, security, management, and classification decisions.</p>

During the on-site phase of the audit, the Auditor conducted an interview with a Classification staff member regarding her responsibility to conduct screenings for risk of victimization and abusiveness. The Classification staff member provided the Auditor with a complete overview of the offender classification process and the offender risk screening process to include how all offenders are screened within 24 hours of their arrival to the facility. The classification staff member confirmed to the Auditor that any offender disclosing prior sexual victimization or abusiveness would be referred to medical and mental health staff for a follow-up evaluation.

During the on-site phase of the audit, the Auditor reviewed thirty-one offender records. These records were selected based upon the offender sexual abuse investigations, length at facility, and offenders that disclosed sexual orientation as gay, bisexual, transgender, or intersex. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy.

In the 12 months prior to the audit, the facility reported eleven offenders who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer.

During the on-site visit, the facility provided the Auditor with an updated offender roster showing only one of the seven offenders who disclosed prior sexual victimization in custody. The Auditor conducted an interview with the offender who reported sexual victimization during the intake process. The offender confirmed being offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process; however, the offender informed the Auditor he declined the opportunity to meet with medical or mental health care practitioner.

Upon review of the policy, documentation, and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Medical / Mental Health Staff</p> <p>Offenders who reported a Sexual Abuse</p> <p>Security Staff / Non-Security Staff First Responders</p> <p>On-site Review Observations:</p> <p>Secondary Medical Records</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offender victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of services will be determined by medical and mental health practitioners according to their professional judgement.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states emergency medical treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states emergency medical treatment services provided to offender victims of sexual abuse will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate and follow-up services when necessary.</p>

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states offender victims of sexual abuse while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate.

Georgia Department of Corrections Procedure 208.06, *PREA Sexually Abusive Behavior Prevention, & Intervention Program* states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.

During the on-site phase of the audit, the Auditor reviewed secondary medical records of offenders who reported an allegation of sexual abuse. Medical staff is charged with conducting an initial assessment of the offender to determine if evidence of injuries or trauma is present which requires immediate medical intervention. All protocols are completed by LPNs and must be reviewed and cosigned by an RN or Clinician.

During the on-site phase of the audit, the Auditor conducted an interview with three Medical and Mental Health Staff members at the facility. Each Medical and Mental Health Staff member confirmed that offender victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Staff member explained the services provided at the facility and through the local county crisis center, include one-on-one counseling, and support groups. These services are offered for victims of sexual abuse as well as offenders of sexual abuse.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the Department's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with offenders, and an offenders right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an

interview.

The Auditor conducted a targeted interview with an offender in custody that reported an incident of sexual abuse. The Auditor inquired to the offender, after reporting the sexual abuse, did you see a medical or mental health staff member in a timely manner, and did anyone provide treatment or follow-up plans. The offender confirmed to the Auditor that he declined the medical and mental health services offered to him.

Upon review of the policy, contract agreement, and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Interviews conducted with:</p> <p>Medical / Mental Health Staff</p> <p>Offenders who reported a Sexual Abuse</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offenders who disclose prior sexual victimization during risk screening, or has previously perpetrated sexual abuse, either in an institutional setting or in the community, will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states medical and mental health evaluation and treatment shall be offered to all offenders who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states offender victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.</p>

During the on-site phase of the audit, the Auditor conducted an interview with three Medical and Mental Health Staff members at the facility. Each Medical & Mental Health Staff member confirmed that offender victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. All three Medical and Mental Health Staff members explained the services provided at the facility and through the victim advocacy crisis center and include counseling and emotion support services. These services are offered for victims of sexual abuse as well as offenders of sexual abuse.

During the 12 months prior to the audit, Walker State Prison reported one allegation of sexual abuse and one allegation of sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated offender roster, which provided documentation that one of the two offenders, who reported an allegation of sexual abuse or sexual harassment, was in custody at Walker State Prison. The facility provided the Auditor with documentation showing the remaining offender either was released from the custody of the Georgia Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted a targeted interview with an offender in custody that reported an incident of sexual abuse. The Auditor inquired to the offender, after reporting the sexual abuse, did you see a medical or mental health staff member in a timely manner, and did anyone provide treatment or follow-up plans. The offender confirmed to the Auditor that he declined the medical and mental health services offered to him.

Upon review of the policy and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.86	Sexual abuse incident reviews
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1406 479">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="248 519 1214 555">Georgia Department of Corrections Sexual Abuse Incident Review Report</p> <p data-bbox="248 736 596 772">Interviews conducted with:</p> <p data-bbox="248 813 453 848">Facility Warden</p> <p data-bbox="248 889 544 925">Incident Review Team</p> <p data-bbox="248 1032 1469 1238">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility SAIRT shall conduct a sexual abuse incident review within 30 days of the conclusion of every substantiated and unsubstantiated sexual abuse investigation to review and assess the facility’s PREA prevention, detection, and response efforts.</p> <p data-bbox="248 1350 1437 1556">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the facility SAIRT shall meet to assess the adequacy of staffing levels in the area where the incident happened, consider whether the incident/allegation was motivated by race, ethnicity, LGBTI identification, gang affiliation, or other group dynamics at the facility.</p> <p data-bbox="248 1668 1469 1874">SAIRT shall also examine the area the incident allegedly occurred to assess whether physical barriers or obstructions in the area may have enabled abuse, assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and on a monthly basis, prepare a report with recommendations for improvements and submit to the PREA Coordinator.</p> <p data-bbox="248 1986 1469 2103">During the pre-on-site phase of the audit, the Auditor reviewed <i>PREA Investigation Summary</i> provided by the facility. The reports contained the required elements of the PREA standard to include:</p>

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- Consider whether the incident or allegation was motivated by race, ethnicity, gender identity; LGBTI identification, status, or perceived status or gang affiliation; or was motivated or otherwise caused by other group dynamics;
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Assess the adequacy of the staffing levels in that area during different shifts;
- Assess whether monitoring technology would be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its finding including, but not necessarily limited to, determinations made pursuant to the above considerations and any recommendations for improvement.

The reviews were completed in its entirety, within the required time limits, and signed by the Facility Warden, PREA Compliance Manager, Supervisory level staff, Classification staff, and Medical and Mental Health staff.

During the past 12 months, Walker State Prison reported one criminal and/or administrative investigations of alleged sexual abuse was completed at the facility, however the case was closed as unfounded, and a sexual abuse incident review was not required.

During the on-site phase of the audit, the Auditor conducted an interview with an Incident Review Team member and inquired if the Sexual Abuse Incident Review Team (SAIRT) considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the SAIRT examines the area in the facility where the incident allegedly occurred. The Incident Review Team member confirmed SAIRT does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. SAIRT also tours the area where the alleged incident occurred as well as consider if additional monitoring technology should be deployed or augmented to supplement supervision by staff. The Incident Review Team member explained how touring the area in conjunction with reviewing monitoring technology provides the team with the best possible representation of an incident and assists SAIRT in determining if changes or additions to monitoring technology is warranted.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the Sexual Abuse Incident Review (SAIRT) process. The Facility Warden explained SAIRT includes the PREA Compliance Manager, Supervisory Level Staff, Classification Staff, and the Facility Warden. The SAIRT always seeks input from Inspectors, Line Staff, and Medical and Mental Health personnel. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained how SAIRT uses the information obtain from the review to determine if changes need to be made to the physical plant, surveillance systems, policy and procedure or any other change that would improve the safety of the offender population and

prevent sexual abuse.

Upon review of the policy and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p>Georgia Department of Corrections Annual PREA Reports (8)</p> <p>Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall review data collected and aggregated of all sexual abuse allegations in order to improve staff performance, identify problem areas, and improve facility operations and offender sexual safety. The Department shall publish the data in an annual report, comparing each years' data, and provide an assessment of progress in addressing offender sexual abuse. It shall make this publicly available on its website.</p> <p>During the pre-on-site phase of the audit, the Auditor reviewed eight years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Georgia Department of Corrections publishes the reports on the Department website http://dcor.state.ga.us/Divisions/ExecutiveOperations/PREA</p> <p>Upon review of the policy and Annual Reports, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.88	Data review for corrective action
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1406 479">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="248 519 1050 555">Georgia Department of Corrections Annual PREA Reports (8)</p> <p data-bbox="248 665 596 701">Interviews conducted with:</p> <p data-bbox="248 741 619 777">PREA Compliance Manager</p> <p data-bbox="248 817 491 853">PREA Coordinator</p> <p data-bbox="248 893 427 929">Agency Head</p> <p data-bbox="248 1037 1445 1323">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states the Department shall review data collected and aggregated of all sexual abuse allegations in order to improve staff performance, identify problem areas, and improve facility operations and offender sexual safety. The Department shall publish the data in an annual report, comparing each years' data, and provide an assessment of progress in addressing offender sexual abuse. It shall make this publicly available on its website.</p> <p data-bbox="248 1435 1473 1686">During the pre-on-site phase of the audit, the Auditor reviewed eight years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Georgia Department of Corrections publishes the reports on the agency website http://dcor.state.ga.us/Divisions/ExecutiveOperations/PREA</p> <p data-bbox="248 1798 1477 2004">During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the agency collects data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies.</p> <p data-bbox="248 2116 1393 2152">During the on-site phase of the audit, the Auditor conducted an interview with the PREA</p>

Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department offenders; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training. The data is collected from all facilities that house Department offenders; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head confirmed he is responsible for reviewing and approving the annual PREA report.

Upon review of the policy, Annual Reports, and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.89	Data storage, publication, and destruction
	<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="252 327 411 360">Documents:</p> <p data-bbox="252 405 1406 477">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i></p> <p data-bbox="252 521 1050 555">Georgia Department of Corrections Annual PREA Reports (8)</p> <p data-bbox="252 667 596 701">Interviews conducted with:</p> <p data-bbox="252 745 491 779">PREA Coordinator</p> <p data-bbox="252 891 1469 1008">Georgia Department of Corrections Procedure 208.06, <i>PREA Sexually Abusive Behavior Prevention, & Intervention Program</i> states retention of PREA related documents and investigations shall be securely retained and made in accordance with the following schedule:</p> <ul data-bbox="300 1070 1481 1406" style="list-style-type: none"> • Sexual abuse data, files, and related documentation – at least 10 years from the date of the initial report; • Criminal investigation data, files, and related documentation – for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or 10 years from the date of the initial report, whichever is greater. • Administrative investigation data, files, and related documentation – for as long as the alleged abuser is incarcerated or employed by the agency, plus five years; or 10 years from the date of the initial report, whichever is greater. <p data-bbox="252 1451 1469 1731">During the pre-on-site phase of the audit, the Auditor reviewed eight years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the Department website http://dcor.state.ga.us/Divisions/ExecutiveOperations/PREA</p> <p data-bbox="252 1854 1469 2134">During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the Department takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department offenders; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action.</p>

The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

Upon review of the policy and upon completion of staff interviews, Walker State Prison demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Georgia Department of Corrections, Walker State Prison had its first PREA Audit conducted on August 24, 2015; the third year of the first three-year auditing cycle. The facility had its second PREA Audit conducted on April 10 -11, 2017; the first year of the second three-year auditing cycle. This audit was the facility’s third audit and was conducted on January 4 - 6, 2021; the second year of the third three-year auditing cycle.</p> <p>The Auditor was provided access to and observed all areas of the facility and outside compound. The Auditor was permitted to request and receive copies of any relevant documents.</p> <p>The Auditor was permitted to conduct private interviews with offenders and staff. The Auditor verified the posting of the audit notifications including posting of the audit in all housing dormitory’s and common areas accessible and visible for inmates and staff. The Auditor verified through inmate and staff interviews that offenders and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Georgia Department of Corrections publishes all PREA Audit Reports for all facilities within the GDC on the Department website. The reports are grouped according to the audit cycle year. Walker State Prison has published the prior year PREA Audit Reports on the Department website. The Auditor reviewed the facility's first PREA Audit Report (August 24, 2015) and second PREA Audit Report (April 10 -11, 2017) for Walker State Prison.</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.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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	yes

	adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
	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.)	na
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
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

	abuse and sexual harassment, including: inmates who are blind or have low vision?	
	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
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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.)	na
	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).)	na
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.)	na

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.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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.)	yes
	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?	no

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).)	na

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.)	na
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? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior 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.)	yes
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.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (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. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes