PREA Facility Audit Report: Final

Name of Facility: Cherokee County Adult Detention Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/07/2020

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		~
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		V
Auditor Full Name as Signed: Cheryl Anderson Date of Signature: 07/0		7/2020

AUDITOR INFORMATION	
Auditor name:	Anderson, Cheryl
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Telephone number:	(803) 240-1209
Start Date of On-Site Audit:	06/08/2020
End Date of On-Site Audit:	06/10/2020

FACILITY INFORMATION		
Facility name:	Cherokee County Adult Detention Center	
Facility physical address:	498 Chattin Dr., Canton, Georgia - 30115	
Facility Phone		
Facility mailing address:		

Primary Contact	
Name:	Irene Ruiz
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Telephone Number:	678-493-4226

Warden/Jail Administrator/Sheriff/Director	
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Facility PREA Compliance Manager	
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Facility Health Service Administrator On-site	
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Facility Characteristics		
Designed facility capacity:	704	
Current population of facility:	532	
Average daily population for the past 12 months:	532	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?		
Age range of population:	17-85	
Facility security levels/inmate custody levels:	minimum, medium, maximum	
Does the facility hold youthful inmates?	Yes	
Number of staff currently employed at the facility who may have contact with inmates:	142	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	40	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	143	

AGENCY INFORMATION		
Name of agency:	Cherokee County Sheriff's Office	
Governing authority or parent agency (if applicable):		
Physical Address:	498 Chattin Drive, Canton, Georgia - 30115	
Mailing Address:		
Telephone number:		

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

Agency-Wide PREA Coordinator Information			
Name:	Irene Ruiz	Email Address:	inruiz@cherokeega.com

AUDIT FINDINGS

Narrative:

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

The Cherokee County Adult Detention Center (CCADC) is located in Canton, Georgia. The onsite audit phase of the Prison Rape Elimination Act (PREA) audit was conducted on June 8-10, 2020 by Cheryl Anderson, a certified U. S. Department of Justice PREA Auditor. The facility's last PREA audit was completed with a written report in August 2017. The current audit was attained and assigned to the Auditor by Diversified Correctional Services, LLC Blackshear, Georgia.

CCADC is a minimum to maximum security facility for 704 adult female and male pre-sentenced and sentenced inmates operated under the Cherokee County Sheriff's Office (CCSO). The primary function of the CCADC is for the receiving, processing, and, housing of individuals charged with a felony and/or misdemeanor criminal violations. Those individuals that are unable to make bond remain in custody until they appear in court. The secondary function is the housing of sentenced inmates. Some inmates are sentenced to serve time for misdemeanor offenses (less than one year) and remain in the county facility for the duration of their sentence. Inmates that receive a court sentence of more than one year are considered inmates of the Georgia Department of Corrections and remain in the county facility until they may be received by a facility of the State of Georgia.

There are no known existing conflicts of interest with the Auditor and the facility and there were no barriers in completing any phase of the audit.

Audit Methodology

Pre-Onsite Audit Phase

The Jail Administrator, PREA Coordinator, PREA Compliance Manager, and PREA Auditor had discussions concerning access to the facility and staff, the audit process, logistics for the onsite phase of the audit, goals and expectations prior to the site visit. The Jail Administrator, PREA Coordinator, and PREA Compliance Manager were very receptive to the audit process and were well informed of the role of the Auditor and the expectations during each stage of the PREA audit. The audit notice was posted at least six weeks prior to the onsite audit. The pictures of the posted notices were taken with the locations identified and emailed to the Auditor. The audit notice was posted using large print and color that was easy to see and read. The notices were strategically placed throughout the facility, accessible to inmates, staff, and visitors. The posted audit notices contained the Auditor's contact information and included information regarding confidentiality. No correspondence was received during any phase of the audit. Further verification of their placement was made through observations during the on-site tour. The original notice was provided to the facility by the PREA Coordinator and had previously been provided by Diversified Correctional Services to the PREA Coordinator. The notices were posted in English and Spanish at eye levels easy for a person to see either standing or sitting. All inmates in the facility during the time of the site visit spoke and read English.

The PREA Pre-Audit Questionnaire (PAQ), completed April 30, 2020, policies and procedures, and

supporting documentation were uploaded to the Online Audit System (OAS). An initial assessment was conducted of the information provided and it was determined the information was provided in detail on the OAS. Any information omitted or needed correction, on the original PAQ, has been updated and provided by way of the OAS. Additional information requested during the site visit was provided or explained by the PREA Coordinator.

The PREA Coordinator had been previously provided a document by the Auditor titled, "Information Requested to Determine Staff and Inmates to be Interviewed during the On-Site PREA Audit." The document was forwarded to the facility's PREA Compliance Manager who completed and returned the document to the Auditor. The document requested the identification of the staff members who served and performed in specific PREA related specialized roles within the facility, including volunteers and contractors who have contact with inmates. The document requested a list of direct care staff and their shift assignments and an inmate population roster. Additionally, the request included information regarding inmates who may be in vulnerable categories such as disabled; limited English proficient; intersex, gay, lesbian, bisexual and/or transgender inmates; and inmates housed in isolation.

The Auditor communicated with the PREA Coordinator to confirm schedules and to clarify specialized PREA roles. A current inmate roster was also provided to the Auditor. As a result of the information received, the Auditor developed an interview schedule of specialized and random staff and inmates, including targeted inmate interviews. The facility provided the lists and information before and during the site visit that assisted with the following determinations and interview selections:

LISTS/INFORMATION	COMMENTS
Complete Inmate Roster	An up-to-date roster was provided prior to the on- site visit
Youthful inmates/detainees	Youthful inmates are not housed in this facility (<18)
Inmates with disabilities	None were identified
Inmates who are Limited English Proficient	Three were interviewed
Inmates who identify as Gay or Bisexual	One was interviewed
Inmates who identify as Transgender or Intersex	None were identified
Inmates in restrictive housing	One was interviewed
Inmates who reported sexual abuse	Three were interviewed
Inmates who reported sexual victimization during risk screening	Two were interviewed
Staff roster for the time of the site visit	The roster was provided during the pre-onsite phase of the audit
Specialized Staff	Specialized staff was identified on interview document
Contractors who have contact with the inmates	One was interviewed
Volunteer who has contact with the inmates	None were available for interview
All grievances/allegations made in the 12 months preceding the audit	29
All allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit	32
Hotline calls made during the 12 months preceding the audit	None

The Auditor reviewed the lists/documents provided and conferred with the PREA Compliance Manager in development of the interview schedule to ensure clarity regarding specialized PREA roles among staff.

Internet research of the facility revealed no indication of litigation, U. S. Department of Justice involvement, or federal consent decrees. General and specific information about the facility and the programs and services provided are detailed on the facility's website. An array of information, pictures of the facility and contact information may be accessed from the informative page. The facility's website also contains PREA information including but not limited to: the zero-tolerance and coordinated response policies; and the third-party reporting form.

Onsite Audit Phase

The PREA Auditor arrived onsite during the early morning hours, to reduce the accrual of overtime hours, to interview direct-care staff members on the overnight shift and observe early morning operations. An entrance meeting was conducted with the PREA Auditor, Jail Administrator, Assistant Jail Administrator, Planning and Programming Director, PREA Coordinator, and PREA Compliance Manager. Formal introductions were made and a review of the audit process, site visit activities and the itinerary were reviewed. The inmate population on the day of the onsite audit was 385.

The PREA standards require the auditor to view certain areas to verify compliance with the standards, such as, but not limited to:

- Facility Physical Design
- Camera Locations
- Observe for Blind Spots
- Notices of the PREA Audits Posted
- Holding Rooms/Cells
- Segregated Rooms/Cells
- Inmates Files in Secured Area
- Staff Personal Files in Secured Area
- PREA Information Posted English & Non-English
- Cameras do not have a line of sight into inmate's rooms, or the toilet and showers
- Staff of the opposite gender announce their present when entering living areas
- Housing of Youthful Offenders
- No New or Renovated areas observed
- Inmates Program Areas
- Facility was orderly in appearance
- · Grounds was manicured
- Reactions between inmates and staff
- Intake
- Administration Area
- Storage Rooms & Closets
- Mail Room
- Commissary
- Laundry
- Dining
- Kitchen
- Visitation
- Library
- Inside Recreation Area
- Outside Recreation Area
- Grievances
- Medical Unit
- Control Room Monitors
- Counselors/Case Mangers Work Areas
- Inmate Housing Units:
- Sally Ports

During the pre-audit phase, the Auditor was provided a diagram of the physical plant which provided familiarity with the layout of the facility. A comprehensive site tour of the facility was conducted and led by the PREA Coordinator and PREA Compliance Manager. During the tour, the printed notifications of the PREA on-site visit were observed posted in the areas previously identified in the pictures sent to the Auditor, such as living units, administrative areas and common areas for inmates and staff. The notices contained large enough print to make them accessible and easy to see and read and in English and Spanish. However, it was noticed that PREA signage was not displayed in all areas frequented by the inmates and the victim advocate information was in small print; therefore, the Auditor recommended additional PREA signage be posted and ensure signage has bold print and can be easily read by all. Corrective actions were taken to rectify this issue. Photos of the additional signage were sent to the Auditor to verify the actions taken. The tour included all areas of the facility. The staff was observed providing direct supervision to the inmates.

Both review of policies and interviews with staff and inmates confirmed that staff of the opposite gender, are not permitted to enter or remain in the bathroom area, while being used by the inmate, except in exigent circumstances or when such viewing is incidental to routine cell checks, and no staff infringe upon the inmate's privacy. Opposite gender staff are required to announce their presence when entering the housing area. Inmates and staff interviews confirm this practice.

The PREA signage posted includes instructions on accessing the 24/7 hotline for reporting allegations and requesting advocacy services for the liveSAFE Resources, Inc. in Marietta, GA. A memorandum of understanding (MOU) is in existence with liveSAFE Resources, Inc. to receive allegations of sexual abuse and sexual harassment and for the provision of advocacy services upon request. The liveSAFE Resources, Inc. was contacted to determine the scope of services provided. A live person responded to the test call and indicated no calls had been received from CCADC inmates over the past 12 months. The conversation with the representative of the liveSAFE Resources, Inc. confirmed the advocacy services to be provided in accordance with the MOU.

Documentation and interviews with the PREA Compliance Manager confirmed forensic medical examinations are performed at Kennestone Hospital located in Marietta, GA. The hospital's Sexual Assault Policy provides that a Sexual Assault Nurse Examiner (SANE) will conduct the examinations. According to the Hospital's written policy, when a SANE is not available, the Emergency Department Physician and Emergency Department Nurse will assume care of the patient and follow the protocols outlined in the policy.

Questions were answered by staff during informal interviews regarding inmate activities and program services as the site tour progressed throughout the facility. The site tour also included the outside grounds. During the comprehensive site tour, the intake process was described, and the daily scheduled activities and staff supervision were discussed by the PREA Coordinator. There were no new admissions during the site visit. Staff and inmates readily explained activities as different facility areas were visited.

Inmates were observed under either constant staff supervision or video monitoring. In addition to direct care and staff members providing direct supervision to inmates, other staff members were observed monitoring the surveillance system in the staff workstation. Telephones were observed in the living unit for reporting allegations of sexual abuse and sexual harassment, and the telephones were in working order. The reporting process was discussed during the site tour. Directions for accessing the crisis hotline are posted and include the limitations of confidentiality. However, observations were made by the PREA Auditor that the postings were not in all areas the inmates frequented. It was recommended by the PREA Auditor that additional information should be posted throughout the facility and include precise calling directions, bright colors and large print. Corrective actions were taken to rectify this issue. Photos of the

additional posters were sent to the Auditor to verify the actions taken.

All inmates have access to writing utensils and KIOSK for reporting. Signage was posted which indicated where inmates were not allowed access or only allowed with staff supervision. The doors to closets and storage rooms are kept locked.

Interviews

One hundred forty-two staff members are currently employed at the facility that may have contact with inmates. During the on-site visit, twelve random staff members were interviewed that covered all shifts and seventeen individual specialized staff members were interviewed based on their job duties and PREA roles. The interviews revealed staff are knowledgeable of PREA standards and were able to articulate their responsibilities based on their job duties and PREA roles; however, most staff were not aware of the services provided by the victims' advocacy services. Staff took corrective action and conducted an education session to review the services provided by the victims' advocacy service. A staff signature roster verifying the actions taken was sent to the Auditor. Although seventeen individuals were identified for specialized interviews, the specialized interviews conducted totaled fifteen due to staff members in this category serving in more than one PREA related specialized role. A total of three hundred eighty-five inmates were in the facility during the site visit. Twenty-six inmates were interviewed as listed on the facility population report. The interviews revealed the inmates were informed of their right to be free from sexual abuse and sexual harassment and how to report sexual abuse and sexual harassment. A previous inquiry was made regarding vulnerable categories within the inmate population related to the selection of targeted interviews. There were ten targeted inmates interviewed at this facility during this auditing cycle. The interviews revealed the agency take appropriate steps to ensure that vulnerable inmates have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The training records of staff interviewed, and the files of inmates interviewed were reviewed along with policies and other secondary documentation. The Auditor reviewed staff, contractor and volunteer training records to ensure that all required training had been completed. The Auditor also reviewed staff personnel files related to completed investigations and disciplinary actions taken regarding PREA related allegations. There were 32 allegations of sexual abuse and/or sexual harassment within the facility in the past 12 months. A file review revealed 16 were unsubstantiated and one is ongoing.

The interviews with inmates and staff indicated their receipt of PREA training which was also verified by a review of documentation, including training materials. Staff and inmate interviews were conducted by the Auditor and the interviews conducted onsite were done in the privacy of office space.

The Auditor conducted twenty-six inmate interviews in the following categories during the onsite phase of the audit:

Category of Inmates	Number of Interviews
Random Inmates	16
Targeted Inmates	10

The Auditor conducted the following number of specialized staff interviews during the onsite phase of the audit:

Category of Staff	Number of Interviews
Jail Administrator (Major)	1
PREA Coordinator (Lieutenant)	1
PREA Compliance Manager (Accreditation Assistant)	1
Agency Contract Administrator	1
Higher Level Staff: Unannounced Rounds	1
Medical	1
Mental Health	1
Human Resources	1
Volunteer/Contractor	1
Investigative Staff	1
Perform Risk of Victimization Screening	1
Supervise inmates in segregated housing	1
Incident Review Team	1
Retaliation Monitor	1
First Responder	1
Intake	1
xxxxxxxxxxxxxxxx	xxxxxxxxxxxxxxxx
Number of Specialized Staff Interviews	16
Number of Random Staff Interviews	12
Total Random and Specialized Staff Interviews	28

Onsite Documentation Review

The Auditor received several examples of documentation from inmate and staff files as part of the Pre-Onsite Audit Phase. During the Pre-Onsite Audit Phase and the Onsite Audit Phase, the Auditor reviewed a sample of personnel files of the staff selected to be interviewed, including documentation of criminal background checks occurring. The PREA Pre-Audit Questionnaire and facility policies, procedures and supporting documentation were reviewed prior to the site visit and while onsite for interviewees and persons not interviewed. The secondary documentation reviewed included but was not limited to Vulnerability Assessments; PREA Form; Medical Request Form; PREA education and training

acknowledgement forms; training records; checklists; sexual abuse coordinated response plan; annual staffing plan assessment; staff schedules; unannounced rounds reports; retaliation monitoring form; organization chart; and other documentation.

After the completion of the site visit process, an exit briefing was held in the roll-call room. The attendees were the PREA Auditor, Jail Administrator (Major), three Captains, Lieutenant (PREA Coordinator), Accreditation Assistant (PREA Compliance Manager), Health Services Administrator, Health Director, and Mental Health Practitioner. The exit briefing served to review the onsite process and review program strengths. The facility and CCADC staff members were given the opportunity to ask additional questions about the activities of the day and the shared information. The timelines for the submission of PREA reports were reviewed.

Post Onsite Audit Phase

The Auditor contacted the PREA Compliance Manager regarding clarity of information. The final report was concluded on the posted date. The Auditor determined the information and documentation received and reviewed and the results of the site visit confirmed all the standards were met. The report was submitted to the PREA Coordinator to be reviewed and subsequently forwarded to the facility.

After corrective actions were addressed, the facility was found to be in compliance with all applicable standards as indicated below and detailed throughout this report.

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.

CCADC is a minimum to maximum security facility for 704 adult female and male pre-sentenced and sentenced inmates operated under the Cherokee County Sheriff's Office (CCSO). CCADC follows the style of direct supervision management. It is a two-story structure with 14 housing units. The intake area is along the main corridor and the health services area is adjacent to intake. Across from the medical areas are the laundry room, kitchen, and program services. At the end of the corridor, on the right side, is the N Pod and the Q Pod housing units. Both of these are dormitory style male housing units. Directly above these pods are R Pod (housing males) and P Pod (housing females). These pods house the minimum to low medium security inmates. On the left of the corridor is J Pod and L Pod. J Pod is a female housing unit, and houses high medium to maximum security female offenders. L Pod is a male housing unit and houses high medium to maximum security male offenders. Directly above these pods are K pod and M pod, both are male housing units consisting of maximum security male offenders. Located in the original part of the facility is C and D Pods which house inmate workers, all male. A Pod houses administrative segregation male inmates and B Pod is the facility's disciplinary pod and houses males. F Pod houses male youthful offenders and is also located in the original structure of the jail. The medical housing unit is located off the main corridor on the right and houses both male and female inmates and is staffed with two correctional deputies. A nurse is also posted in this unit 24 hours per day, 7 days per week. A medical clinic is also located off of the main corridor where inmates are brought down for medical visits.

Unit capacities are as follows: A-Pod, Special Needs Housing Unit has 12 cells with a rated capacity of 24; B-Pod, Disciplinary Segregation has 12 cells with a rated capacity of 24; C-Pod, housing workforce inmates has 12 cells and a rated capacity of 24; F-Pod housing general population male inmates has 10 beds and a rated capacity of 10; H-Pod, houses inmates requiring observation and medical care; J-Pod, houses general population females and has 32 cells with a rated capacity of 64; K-Pod, houses general population males with 32 cells and a rated capacity of 64; L-Pod, general population males with 32 cells and a rated capacity of 64; M-Pod, general population males has 32 cells and a rated capacity of 64; N Pod houses general population males and has 16 cells with 4 bunks per cell and a rated capacity of 64 (open bay); P-Pod houses general population females and has 16 cells with a rated capacity of 64 (open bay); Q-Pod houses general population males in an open bay style with 16 cells, four bunks to a cell and a rated capacity of 64.

Each living unit has a KIOSK enabling inmates to access PREA related information and to report allegations of sexual abuse with one-click to the PREA Coordinator. Phones were observed in all of the units and each phone contained phone numbers to reporting agencies and outside confidential sources for emotional support. Commodes/lavatories were located in cells and showers were equipped with shower curtains. In the open bay style dorms restrooms had stalls and showers were recessed with curtains. There are approximately 142 staff to accommodate the daily operations. Approximately 150 cameras are strategically placed throughout the facility to assist in supervision of inmates. Cameras are

monitored in the main control room. Mirrors were placed in areas to mitigate blind spots where there were no cameras. Also, the facility staff can access keys using their fingerprint recognition. Staff are equipped with body cameras. Doors that were supposed to be locked were locked. Large windows are in the coolers enabling staff walking by to easily see inside.

The facility was clean and staff were observed on posts directly providing supervision to inmates in the dorms and on escorts. This facility is accredited through the National Commission on Correctional Health Care, the Commission on Accreditation for Law Enforcement Agencies, and the American Correctional Association.

Inmates can change clothes, shower and use the toilet with a reasonable amount of privacy. There is a host of management, supervisory, support staff members who provide oversight of or participation in processes and activities that contribute to the facility operations. Allegations that are criminal in nature are investigated by the facility investigators and the Cherokee County Sheriff's Office as confirmed through interviews.

The inmate interviews, documentation and observations confirmed the provision of the programs and services described. The inmates indicated they could communicate with their family through telephone calls and visits. Observations during the comprehensive site tour revealed adequate space for conducting the programs and services described. There is enough space to accommodate visitation and meetings in private, as needed.

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:	0
Number of standards met:	45
Number of standards not met:	0

An on-site PREA Audit of the Cherokee County Adult Detention Center was conducted June 8-10, 2020. The auditor's methodology consisted of the following: Review of information received through the use of the online audit system provided by the facility; reviewing additional documentation on site; observations made during the tour of the facility and interviewing 12 random staff and 16 specialized staff. A total of 26 inmates were interviewed. These included 10 targeted inmates. There were no transgender or intersex inmates, nor were there any youthful inmates (under age 18).

Documentation, including policies, procedures and secondary documentation was reviewed to determine if the policies addressed the sub-standards of the standard. Secondary documentation was reviewed to determine "practice". Interviews with specialized and randomly selected staff confirmed their knowledge of the agency's policies and procedures as they related to PREA standards as well as "practice". Inmates were interviewed to determine the training and information they received about PREA and to determine if they were given required information upon admission, during intake, orientation and during the "education" component of the PREA Training for inmates and to determine "practice".

Following the onsite audit, the auditor requested additional clarification and it was promptly provided.

Number of Standards exceeded: 0

Number of Standards met: 45

Number of standards not met: 0

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The Cherokee County Sheriff's Office (CSO) Policies and Procedures, Chapter: Institutional Operations; Policy #08-05-09 2019; Section: Inmate Rights (PREA) mandates zero-tolerance of sexual abuse and sexual harassment and outlines how the facility carries out its approach to preventing, detecting and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors and sanctions for those found to have participated in prohibited behaviors. The procedure also provides strategies and responses for reducing and preventing sexual abuse and sexual harassment.

CCADC is an adult minimum-to-maximum security jail governed and operated by the Cherokee County Sherriff's Office (CSO) which employs an agency-wide PREA Coordinator who is in an upper-level management position (Lieutenant) within the agency. She reports to the Facility Administrator (Major) and an interview revealed that she has sufficient time to attend to PREA duties. She is very knowledgeable regarding PREA standards and agency policies and practices.

The Facility Administrative Assistant also serves as the PREA Compliance Manager. The PREA Compliance Manager's interview revealed the PREA Compliance Manager has sufficient time to oversee the facility's PREA compliance efforts and to perform her other duties.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CSO Policy; CCADC Policy 08-05-09 PREA 2019; Facility Standard Operating Procedure (SOP) PREA; Organizational Chart

Interviews: Facility Administrator; PREA Coordinator, PREA Compliance Manager; Random Staff; Random Inmates

Provision (a): The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.

The Agency Policy mandates a zero-tolerance policy toward all forms of sexual abuse and sexual harassment. The policy outlines the facility's approach to preventing, detecting, and responding to such conduct. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment and includes sanctions for those found to have participated in prohibited behaviors.

The Policy addresses detection of sexual abuse and sexual harassment through inmate education, staff training, and intake screening for risk of sexual victimization and abusiveness. The Policy includes but is not limited to responding to sexual abuse and sexual harassment through reporting, investigations, assessments, crisis intervention, and disciplinary sanctions for inmates and staff.

Provision (b): The agency shall employ or designate an upper-level, agency-wide PREA

coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

The evidence shows the agency has designated an upper-level position of Agency PREA Coordinator as verified through the organization chart; Policy; Job Description; review of the PREA Pre-Audit Questionnaire; and the interviews with the Facility Administrator, Facility PREA Compliance Manager and random staff. The Agency PREA Coordinator has demonstrated she has sufficient time and authority to accomplish her PREA related responsibilities.

Provision (c): Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

The organization chart shows the PREA Compliance Manager reports directly to the PREA Coordinator as confirmed by staff interviews. The interview with the PREA Compliance Manager and observations revealed she has the time and authority to perform her PREA duties.

Conclusion:

Based upon the review and analysis of the available documentation, the Auditor has determined the facility is compliant with this standard requiring a zero-tolerance policy toward sexual abuse and sexual harassment and the designation of an Agency PREA Coordinator.

115.12	Contracting with other entities for the confinement of inmates	
	Auditor Overall Determination: Meets Standard	
	Auditor Discussion	
	CCADC meets the requirements of this standard based upon the following evidence:	
	Documentation reviewed indicated that the CCADC does not contract for the confinement of its inmates with private agencies or other entities including other government agencies.	
	Documentation Reviewed: PREA Pre-Audit Questionnaire; MEMO regarding contracts for the confinement of inmates	
	Interviews: Facility Administrator; PREA Compliance Manager	
	Provision (a): A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. N/A	
	Provision (b): Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. N/A	
	Conclusion: Based upon the review and analysis of the available documentation, the CCADC does not contract for the confinement of its inmates with private agencies or other entities including other government agencies.	

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 PREA 2019 provide for the implementation of a staffing plan with adequate staffing levels to protect inmates against sexual abuse and sexual harassment.

The staffing plan is based upon the facility's capacity of 704 inmates. The facility's Policy requires the facility to document deviations from the staffing plan on the Daily Shift Report. There were no deviations from the plan to review.

The agency policy requires an annual assessment of the staffing plan, including a review of all required components of the standard. Documentation of the annual assessment of the staffing plan was reviewed and found to be in compliance with all elements contained in (c) of this standard.

The facility utilizes direct staff supervision to protect inmates from sexual abuse and sexual harassment. The facility's Policy requires intermediate or higher-level staff to conduct unannounced rounds to deter and identify staff sexual abuse and sexual harassment. An interview with a higher-level staff member and a review of unannounced rounds documentation revealed over time unannounced rounds are conducted on all shifts in all areas of the facility.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 PREA 2019; Facility Standard Operating Procedure (SOP) PREA

Interviews: Facility Administrator; PREA Coordinator, PREA Compliance Manager; Random Staff; Random Inmates

Provision (a) The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

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

CCADC Policy 08-05-09 PREA 2019 provides the camera system is monitored constantly, and the provisions of the standard are taken into consideration regarding adequate staffing levels as confirmed through the interview with the Jail Administrator, review of staffing plan and

observations. The work schedules are based on the staffing plan and facility policy.

Provision (b): In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan.

The CCADC Policy 08-05-09 PREA 2019 states in the event the staffing plan is unable to be maintained during exigent circumstances, the deviation must be documented. The facility documents there have been no deviations to the staffing plan in the past 12 months. The facility is prepared to document any deviations from the staffing plan.

Provision (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

Provision (d): Each agency operating a facility shall implement 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. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit 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.

Agency/Facility SOP Sign In/Out Log Shift Narrative provided for the occurrence of unannounced rounds randomly performed by administrative and supervisory staff. A review of a sample of documented unannounced rounds support unannounced rounds are conducted by intermediate level and higher-level staff and by Supervisors for each shift at the various times as determined by a review of documentation and interviews. The unannounced rounds conducted by administrative staff are documented.

The areas assessed during the unannounced rounds by the administrative staff includes all areas of the facility such as all living units; common area; staff break room; and loading dock. The Supervisors' unannounced rounds include all living units and provides for comments regarding mood, demeanor and interactions. The interview with the PREA Coordinator indicated how she ensures that staff does not alert other staff when she is conducting unannounced rounds. The Policy also indicates staff does not alert other staff regarding the occurrence of unannounced visits. Staff members are not informed of the unannounced rounds and there is not a routine schedule regarding the rounds.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is in compliance with this standard regarding supervision and monitoring.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 PREA 2019; Facility Standard Operating Procedure (SOP) PREA
	Interviews: Facility Administrator; PREA Coordinator
	Provision (a): A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. N/A
	Provision (b): In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact. N/A
	Provision (c): Agencies shall make its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. N/A
	Conclusion: This standard is Not Applicable as this facility does not house youthful inmates (inmates <18 years old).

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

Policies require documentation of any cross-gender searches. There was no reported cross-gender searches conducted. Training documents reviewed indicated that staff have completed appropriate training. Agency policy and facility SOP require the announcement of cross-gender staff entering the housing units. Inmate and staff interviews confirmed that opposite gender staff announce themselves in the units, as well as a general announcement at the beginning of each shift.

The Agency Policy states the facility shall implement policies and procedures that enable persons in confinements 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. Staff and inmate interviews confirm there is no cross-gender viewing. Observation of the bathrooms revealed all shower stalls have shower curtains to allow privacy while taking showers and using the toilets.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 PREA 2019; Facility Standard Operating Procedure (SOP) PREA

Interviews: Director; PREA Coordinator; Random Staff; Random Inmates

Provision (a): The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

Staff interviews and documentation indicated that the facility does not conduct cross-gender strip or visual body cavity searches of inmates.

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

Provision (b,c): As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. **(c):** The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.

The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches.

Provision (d): The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

The agency has implemented policies and procedures that enable an inmate to shower, perform bodily functions, change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstance or when viewing is incidental to routine cell checks. Observations of restrooms and showers during the tour confirmed inmates have privacy when using the restroom, showering and changing clothing. Inmates reported they are never naked in full view of staff.

Policy and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

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

Policy was reviewed prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the facility housed transgender and intersex inmates, the agency directs staff not to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, the facility determines 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.

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

Documentation review revealed that staff receives training on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive way possible, consistent with security needs. The facility provided samples of documentation to confirm staff has received and receive search training consistent with policy. The PREA Coordinator confirmed there had been no cross-gender strips or visual body cavity searches conducted within the audited cycle.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is in compliance with this standard regarding limits to cross-gender viewing and searches.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

Agency Policy requires steps to be taken to ensure inmates with disabilities or who are limited English proficient are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and sexual harassment. This policy also states the facility will not rely on inmate interpreter, inmate readers or any kind of inmate assistants except when a delay in obtaining interpreters services could jeopardize a inmates' safety.

CCADC has identified Georgia Interpreting Services for the provision of interpreter services by telephone and there is a TTY, Teletypewriter, phone available for inmates who are deaf or hearing impaired. There is PREA material in both English and Spanish available at the facility. Staff and inmates were clear on how to access interpreter services if needed. The facility provided the auditor documentation to confirm they have a contract with Language Line Services, Inc. to provide translation and interpretive services. Random staff interviews verified the facility does not use inmate assistants and there were no instances of inmate interpreter or readers being used in the past 12 months.

The Agency has a narrative that is required to be read to all inmates at intake and it appears that this is being conducted as required by Agency directive.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: PREA Coordinator; Random Staff; Inmates (with disabilities or who are limited English proficient)

Provision (a): The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

Policies address the provision of support services for disabled inmates by providing these inmates the equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Policies

prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, performance of first responder duties, or the investigation of the allegations.

Provision (b): The agency shall 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

The facility, as a unit of the Cherokee County Sheriff's Office, has access to court interpreters and a list of certified interpreters is made available to the staff at the adult detention center.

Provision (c): The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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.

One hundred percent (100%) of the interviewed staff stated they would not rely upon an inmate interpreter in assisting an inmate in reporting an allegation of sexual abuse. They also indicated the facility would use professional interpreters or bilingual staff for interpretive services.

Conclusion: Based upon the review and analysis of the evidence, the Auditor has determined the facility is compliant with this standard regarding inmates with disabilities and inmates who are limited English Proficient. Inmates with disabilities and who are limited English Proficient are provided 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.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CSO Policy 01-01-02 Personnel Management 2018 and CCADC Policy 08-05-09 PREA 2019, address hiring and promotion processes and decisions, including the requirement for background checks for new hires. The collective Policies and interview with the Human Resource staff member revealed information regarding the hiring process, completion of background checks, and the grounds for termination. The Policies are aligned with the requirements of the standard and provide that background checks are conducted every five years. A review of a sample of personnel files confirmed compliance.

A pre-hire form requires applicants to provide information regarding previously related sexual misconduct allegations and convictions. The policy prohibits hiring or promoting anyone who may have contact with inmates and prohibit enlisting the services of any contractor who may have contact with inmates who engaged in previous sexual misconduct.

According to the Human Resource staff, the facility considers any incidents of sexual abuse or sexual harassment in determining whether to hire a person, contract for services, or whether to promote an employee. The policy and an interview with the Human Resource staff indicates staff has a continuing duty to report misconduct and provide omissions of misconduct or providing false information will be grounds for termination.

A review of personnel files for a sample of staff hired in the past 12 months revealed all had criminal records checks and a sample review of personnel files of current staff employed for more than 5 years revealed all have had criminal background checks conducted every five years.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CSO Policy 01-01-02 Personnel Management 2018; CCADC Policy 08-05-09 PREA 2019; Facility Standard Operating Procedure (SOP) PREA; Personnel Files; Records of background checks of contractors who might have contact with inmates

Interviews: Administrative (Human Resources) Staff; PREA Coordinator

Provision (a): The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) 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); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Facility Policy addresses hiring and promotion processes and decisions and background checks. The Policy is aligned with the requirements of the provisions of the standard and provides background checks occur prior to employment and every five years thereafter. Initial

background checks and five-year checks were reviewed while on site. Additional personnel information reviewed during the pre-audit and the onsite audit phases included: Pre-Hire Interview Questions; New Hire Application Packet. The interview with the HR staff and a review of Policy provide details about the hiring process, completion of background checks, and the grounds for termination in accordance with the PREA standard. According to the interview, staff has a continuing duty to report related misconduct and omission of sexual misconduct or providing false information will be grounds for termination. The forms completed and included in the personnel files are in response to the above provisions of this standard.

According to facility Policy, all applicants are asked about any prior misconduct involving any sexual activity. In addition, the facility shall not hire or promote anyone who has been civilly or administratively adjudicated to have been convicted of engaging in or attempted to engage in sexual activity by any means. Also, the facility does not hire anyone who has engaged in sexual abuse in a prison, jail, community confinement facility, or anyone who has used or attempted to use force in the community to engage in sexual abuse.

Provision (b): The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

The facility Policy states any incidents of sexual harassment by a staff member will be taken into consideration if the staff member is eligible for promotion. The interview with the HR staff was in alignment with the standard. The interview questions for employment also address previous misconduct. The evidence shows the facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. Based on the review of the personnel files, records provided during the pre-audit phase, and the interview with the PREA Coordinator, the facility follows this provision of the standard.

Provision (c) & (d): (c) Before hiring new employees or (d) contractors who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) 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.

The policy requires background checks to occur prior to inmates receiving services from contractors and volunteers and confirmed by the HR staff's interview. Additionally, best efforts should be made 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. Based on the review of documentation and interview with the HR staff, the facility follows this provision of the standard.

Provision (e): The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

The Policy is aligned with the requirements of the provisions of the standard and provides background checks occur prior to employment and every five years thereafter. Initial background checks and five-year checks were reviewed while onsite and during the pre-audit phase. This was also confirmed during the HR staff's interview. Based on the review of

documentation and the interview, the evidence shows the facility practices are aligned with the provisions of this standard.

Provision (f): The agency shall 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

According to facility Policy, all applicants are asked about any prior misconduct involving any sexual activity. In addition, the facility shall not hire or promote anyone who has been civilly or administratively adjudicated to have been convicted of engaging in or attempted to engage in sexual activity by any means. Also, the facility does not hire anyone who has engaged in sexual abuse in a prison, jail, community confinement facility, or anyone who has used or attempted to use force in the community to engage in sexual abuse.

Provision (g): Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

Facility Policy states material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Based on the review of the documentation and the interview with the HR staff, the evidence shows the facility follows this provision of the standard

Provision (h): Unless prohibited by law, the agency 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 interview with the HR staff confirmed the facility would provide this information if requested to do so. Facility Policy states the information would be provided when requested unless it is prohibited by law to provide the information.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with the provisions of the standard regarding hiring and promotion decisions.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	Documentation Reviewed: PREA Pre-Audit Questionnaire
	Interviews: Jail Administrator; PREA Coordinator
	An interview with the Jail Administrator and PREA Coordinator revealed that CCADC has not acquired any new facilities or updated surveillance technology since August 20, 2012.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CSO Policy and CCADC Policy 08-05-09 2019 PREA provides the agency conducts criminal and administrative investigations for allegations of sexual abuse and sexual harassment, inmate-on-inmate sexual abuse or staff misconduct. All allegations that involve potential criminal behavior will be referred to the Criminal Investigations Division (CID). All referrals of allegations of sexual abuse or sexual harassment for criminal investigations will be documented. Policies require a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. Investigators are required to adhere to SOPs 04-03-01, 04-01- 05, and ADC form #119 Sexual Assault Checklist, while conducting an investigation into a sexual abuse allegation at the ADC.

An inmate who experience sexual assault are taken to the Kennestone Hospital's Emergency Department. Forensic examinations are conducted by a SAFE or SANE medical examiner as documented in the Memorandum of Agreement. There is no cost incurred by an inmate for these services. The facility has contact with LiveSafe Resources who has agreed to provide services for inmates and staff.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training; LiveSafe Resources reporting information

Interviews: PREA Coordinator; SAFEs/SANEs staff; Random Staff, Inmate who reported a sexual abuse

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

Policy requires the agency/facility to initiate and/or conduct administrative and criminal sexual abuse investigations to include inmate-on-inmate sexual abuse or staff sexual misconduct. The facility has designated a facility Investigator. The CID and or the Georgia Bureau of Investigations (GBI) can investigate administrative and criminal sexual abuse based on the nature of the case. Interview with the Facility investigator indicated that policy requires and give them guidelines to follow a uniform evidence protocol.

Provision (b): The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

The facility utilizes the internal and external offices to conduct investigations regarding all felony related crimes to include alleged sexual violence that occurred at the facility. Both the facility and the external office follow a uniform evidence protocol that maximizes the potential

for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Staff interviews confirmed an understanding of the facility's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse and knowledge of the entities responsible for conducting investigations.

Facility Policy provides for protocols developed by professionals that addresses but is not limited to interviewing; evidence collection; victim services; notifications; and prosecution of sexual assault cases. Staff interviews confirmed an understanding of the facility's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse and knowledge of the entities responsible for conducting investigations

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

The facility offers all victims of sexual abuse access to forensic medical examinations at an outside facility, the local hospital without financial cost. The Kennestone Hospital's Emergency Department provides a Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If one is not available, the examination is performed by a qualified medical staff. The facility provides emails for efforts to provide SANE or SAFE staff.

Documentation and interviews with the PREA Coordinator confirmed forensic medical examinations are performed at the Kennestone Hospital located in Marietta, GA. The hospital's Sexual Assault Policy provides that a Sexual Assault Nurse Examiner (SANE) will conduct the examinations. According to the Hospital's written Policy, when a SANE is not available, the Emergency Department Physician and Emergency Department Nurse will assume care of the patient at no cost to the victim and follow the protocols outlined in the Policy.

Provision (d): The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

The facility has a MOU with liveSAFE Resources, posted information includes instructions on accessing the 24/7 hotline for reporting allegations and requesting advocacy services for the liveSAFE Resources in Marietta, GA. A Memorandum of Understanding (MOU) exists with liveSAFE Resources to receive allegations of sexual abuse and sexual harassment and for the provision of advocacy services upon request. The victim's advocacy service, liveSAFE

Resources, was contacted during the PREA audit by the Auditor to determine the scope of services provided. A live person responded to the call and indicated no calls had been received from CCADC inmates over the past 12 months. The conversation with the representative of liveSAFE Resources confirmed the advocacy services to be provided in accordance with the MOU.

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

The facility makes available to the victim a victim advocate. If not available to provide victim advocate services, the facility makes available (to provide services) a qualified staff member from a community-based organization or a qualified facility staff member. The victim advocate is a qualified facility staff member, or qualified community-based organization staff that accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed.

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

When a PREA allegation is investigated by an outside agency, the facility request that the investigator follow the PREA requirements. The preponderance of Evidence is defined as proof by evidence that, compared with evidence opposing it, leads to the conclusions that the fact at issue is more probably true than not. Policy also states that as a result of the preponderance of the evidence, the investigator may determine whether the allegation is substantiated, unsubstantiated, or unfounded.

Allegations of sexual abuse that are criminal in nature are referred to the CID and/or GBI for criminal investigation.

Provision (g): The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

Auditor is not required to audit this provision.

Provision (h): For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

The facility provided, for review, the "Cherokee County Protocol for Responding to Victims of Sexual Assault" 27 multiagency plan for responding to sexual assault. The protocol was developed by the Georgia Sexual Assault Task Force in 1996. It is intended to facilitate the provision of consistent, comprehensive, sensitive and non-judgmental treatment to victims of sexual assault as they progress through the health and criminal justice systems. It is also intended to standardize the collection of evidence in order to aid in the prosecution of cases.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is in compliance with the provisions of this standard.

115.22 | Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment. All staff are required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. All staff are required to refer all alleged incidents of sexual abuse and sexual harassment for investigation to the agency's Criminal Investigation Department (CID) for the determination of criminal charges, if the allegations are criminal in nature. Cherokee County Sheriff's Office (CSO) provides services on a 24-hour basis that will include the responsibility of investigating allegations of sexual abuse by qualified staff who have received training concerning sexual abuse and forensic examination issues.

Staff refer all allegations of sexual abuse and sexual harassment to the Office of Internal Affairs (OIA) for completion of an administrative investigation. The Agency's PREA policy can be found at the Cherokee County Sheriff's Office website and information can be found in their PREA pamphlet (Sexual Abuse Awareness for the Inmate) that is available in English and Spanish. CCADC has received three allegations of sexual abuse and sexual harassment resulting in a criminal investigation. All staff interviews reflected and confirmed their knowledge on the reporting, referral process and policy's requirements.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of reports of sexual abuse and harassment and documentation of investigations, including full investigative reports with findings.

Interviews: Jail Administrator, PREA Coordinator; Investigative Staff, Random staff

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

According to interviews with the Jail Administrator, PREA Coordinator, and the Facility Investigator, the facility ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment reported on inmate-on-inmate or staff-on-inmate misconduct.

The initial investigation begins immediately by the facility. The facility uses a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

Investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attach copies of all documentary evidence.

An additional interview with Facility Investigator confirmed the process for receiving an

allegation and for conducting the investigation if an alleged sexual abuse was reported. Interviewed staff stated they had been trained to report everything incident for investigations, including verbal reporting, knowledge, allegations, and suspicion of sexual abuse or sexual harassment. Staff affirmed they are trained to accept reports from all sources, including third parties and anonymous reports.

Provision (b): The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals.

Policy requires the Cherokee County Sheriff's Office to thoroughly investigate all complaints of alleged employees misconduct to properly determine whether the allegations are valid or invalid and to take appropriate follow-up action. The policy provides for a concurrent investigation along with an investigation of any criminal violation conducted by the Criminal Investigation Division (CID) of the Cherokee County Sheriff's Office. The facility's website provides the information and related policies for reporting allegations of sexual abuse. A third-party reporting form is also on the website. Reporting information is also posted in various areas of the facility including but not limited to living units. The posted information is accessible to inmates, staff, contractors and visitors. The Policy and interviews confirmed allegations of sexual abuse and sexual harassment are investigated. Sexual abuse allegations that are criminal in nature are investigated by the CID and/or GBI.

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

The CCADC Policy, 08-05-09, Sexual Assault and Misconduct of Inmates, Sexual Misconduct between Inmates and Employees, requires that all allegations of sexual assault and sexual contact to be investigated. The Policy requires that all cases involving sexual assault and sexual contact will be referred to the CID and the Office of Professional Standards, (Internal Affairs Office), and if appropriate, the case will be referred to the District Attorney for prosecution.

Criminal Investigations are addressed in Cherokee County Sheriff's Office policy 04-03-01, Criminal Investigations. The responsibility for conducting criminal investigations lies with the Criminal Investigations Division (CID). This 29 page policy addresses all phases of the investigation process. All allegations of sexual abuse or sexual harassment that appear to be criminal in nature will be referred immediately to CID.

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

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

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding policies to ensure referrals of allegations for investigations.

115.31 | Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires an in-depth PREA Training upon initially becoming an employee (entry level training) as well as refresher training annually. All the PREA training provided to employees statewide contains all ten (10) topics consistent with this standard's requirements and is tailored to all facilities with the gender of their inmate populations. The staff training documentation including a PowerPoint presentation and staff interviews confirmed staff receives PREA training during initial training and during refresher training. All employees are trained as new hires regardless of their previous experience. All new employees receive the CCADC Employee brochure on prevention strategies to maintain a professional atmosphere and sign the PREA Acknowledgement Form indicating they received the training and understand their responsibilities for all the different training modules and tested upon completion of the initial PREA training. A review of all staff and training education forms as well as staff interviews confirmed that staff are receiving their required PREA training. Employee training records are maintained electronically and certain training documents (PREA Acknowledgement Form) are maintained in their personnel file. Additionally, the new employees are provided a palm card identifying specific PREA information i.e. first responder protocol.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training

Interviews: PREA Coordinator; Random Staff

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

The facility Policy addresses PREA related training for staff. All interviewed staff members were familiar with the PREA information regarding primary components of preventing, detecting and responding to sexual abuse or sexual harassment. PREA training is provided to staff, as indicated by a review of Policy and training documents. The documents and staff interviews support that refresher training is also conducted and is documented. The direct

care staff interviewed and the PREA Compliance Manager reported the training is provided as required. All direct care staff members interviewed, and document review verified the 10 general topics were included in the training. The Policy, training materials, staff interviews, review of the trainings log and acknowledgement statements verify the staff training occurs. Training is conducted annually, and refresher training is provided as needed. Staff interviews confirmed they have received training on the 10 required topics. The evidence shows staff members are provided all of the required training topics. Based on the review of the Pre-audit questionnaire, training curriculum, associated training materials and records, and staff interviews, the facility complies with the provisions of the standard.

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

The facility houses female and male inmates and the training take into account the needs of the population as determined by a review of training curricula and interviews with random staff. The Policy states the training shall be tailored to the needs and attributes to the population served.

Provision (c): All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

The Policy, training materials, staff interviews, review of the trainings log and acknowledgement statements verify the staff training occurs. Training is conducted annually, and refresher training is provided as needed. Staff interviews confirmed they have received training on the 10 required topics. The evidence shows staff members are provided all of the required training topics. Based on the review of the Pre-audit questionnaire, training curriculum, associated training materials and records, and staff interviews, the facility complies with the provisions of the standard.

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

The Policy provides all training be documented. Staff members sign training rosters and training acknowledgement statements. A checklist is utilized for orientation training for all new employees and contains the elements of PREA training. The facility provided the Auditor with several examples for verification of the training occurring and the training was verified through staff interviews. The facility follows this provision of the standard. The staff interviews revealed staff are knowledgeable of PREA standards and were able to articulate their responsibilities based on their job duties and PREA roles; however, most staff were not aware of the services provided by the victims' advocacy services. The PREA Coordinator took corrective action and conducted an education session to review the services provided by the victims' advocacy service. A staff signature roster verifying the actions taken was sent to the Auditor.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is in compliance with the provisions of this standard.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires volunteers and contractors who have contact with inmates to receive in-depth PREA training. All volunteers and contractors receive the PREA training, PREA Volunteer brochure and sign the PREA Acknowledgement Form upon completion of the PREA training they received. The training consists of a power point presentation that includes: policies, PREA definitions, reporting requirements and other required procedures. Additionally, the brochure provided to all volunteers and contractors is a guide to prevention and undue familiarity and sexual abuse with offenders/inmates. A review of the documentation confirmed they are aware of the facility's requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training

Interviews: Contractor; PREA Coordinator; Random Staff

Provision (a): The agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The Policies require volunteers and contractors who have contact with inmates, be trained on PREA and their responsibilities regarding sexual assault prevention, detection, and response to allegations of sexual abuse and sexual harassment. This training will include at a minimum, a one hour block during new hire orientation, and a two hour block of annual training in a classroom setting. All volunteers and contract employees are required to attest, with their signature, they have received and understand the training provided.

Provision (b): 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, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

The type and level of training is based on the services they provide and level of contact they have with inmates, but all volunteers and contract employees will be trained on the agency's Zero-Tolerance policy regarding sexual abuse and sexual harassment, and how to report such incidents.

Provision (c): The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.

Volunteers are given a Handbook for Volunteers. It addresses setting boundaries, respect,

being supportive, encouraging and friendly but firm, and prohibitions again any form of personal physical contact. It also advises the volunteer about the Zero-Tolerance standard for sexual assault and an affirmation that the agency will not tolerate sexual abuse of any kind within its environment. It also requires the volunteer to report any allegation to any deputy or supervisor to ensure that incidents of sexual abuse are responded to appropriately. The Volunteer acknowledges his/her PREA Training by signature. The acknowledgement statement affirms the volunteer has received training on his/her responsibilities to strive to prevent, and detect incidents of sexual abuse, harassment or rape of any offender; responsibility to promptly report suspected or known incidents of sexual abuse, harassment or rape of any offender; inmates right to be free from abuses and harassment while incarcerated; that retaliation for reporting in any form is strictly prohibited; the dynamics of abuse relative to confined persons; common reactions of sexual abuse victims and how to maintain professional bearing and distance at all times. It acknowledges the zero tolerance policy; and the agency's prohibitions against any sexual activity or relations or attempted sexual activity or relations between a volunteer/contact employee and an inmate.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with the provisions of this standard regarding volunteer and contractor training.

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires inmates to receive appropriate education information regarding safety, their rights to be free from sexual abuse, sexual harassment, retaliation, reporting and the agency's response to allegations within 15 days upon arrival. However, the intake staff provides the inmates with this information immediately upon arrival during their initial intake and orientation process. This information is reviewed verbally with the inmate and a pamphlet is provided to them for future reference. After the review with the inmate, he is asked to sign various forms which include, Offender PREA Education Acknowledgment Form, to verify receipt for all information regarding orientation to the facility. All inmates are provided a CCADC Sexual Abuse Awareness for the Inmate pamphlet which includes information on prevention/intervention, self-protection, reporting and treatment/counseling and is available in English and Spanish. Documentation of inmate's signatures were reviewed and confirmed during inmate interviews. Some inmates interviewed stated they received this information the same day they arrived at the facility and verified the receipt of the pamphlet. PREA signage was not displayed in all areas frequented by the inmates; therefore, the Auditor recommended additional PREA signage be posted and ensure signage has bold print. Corrective actions were taken to rectify this issue. Additional signage was posted in the needed areas. Photos have been sent to the Auditor to verify the actions taken.

There were ten targeted inmates interviewed at this facility during this auditing cycle. The interviews revealed the agency take appropriate steps to ensure that vulnerable inmates have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility provides information about sexual abuse and sexual harassment that the inmate is able to understand and also provide an interpreter to assist the inmate read, write, speak, and explain things if needed. The Agency has a narrative that is required to be read to all inmates at intake and it appears that this is being conducted as required by Agency directive.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training, Inmate Questionnaire, Intake log

Interviews: PREA Coordinator; Intake Staff; Inmates

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

Facility Policy provides all inmates admitted receive information about the facility, including PREA education. A continuous running PREA video can be seen in the intake area. Inmates receive directions on how to report allegations of sexual abuse and sexual harassment; and the right to be free from retaliation for reporting. According to the Intake staff who provides

PREA education to inmates and the inmates interviewed, an orientation is provided to inmates during the intake process.

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

Policy provides that inmates receive a comprehensive PREA education session within 30 days of admission to the facility. The results of the staff and inmate interviews indicated the information provided to the inmates is comprehensive. The intake staff's interview revealed she ensures inmates are educated regarding their rights to be free from sexual abuse and sexual harassment, and to be free from retaliation for reporting such incidents. The PREA education sessions include a review of the Safety Brochure. The inmates sign acknowledgement statements confirming their receipt of the PREA information. A review of documentation showing dates and indicating inmates' participation in PREA education sessions confirmed the PREA education sessions occur. The PREA related information is provided to staff in policies and procedures, training and staff meetings. Directions for accessing the liveSAFE Resources crisis hotline are posted and include the limitations of confidentiality. However, observations were made by the auditor that the postings were not in all areas that the inmates frequented. It was recommended by PREA auditor that additional posters should be posted throughout the facility to include precise directions to access hotline, bright colors, and large print. Corrective actions were taken to rectify this issue. Photos of the additional posters were sent to the Auditor to verify the actions taken.

Provision (c): Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.

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

The facility has the capability to provide the PREA education in formats accessible to all inmates including those who may be hearing impaired; Deaf; have intellectual, psychiatric and speech disabilities; low vision; blind; limited reading, limited English proficient, and based on the individual need of the inmate. Posted PREA information is in English and Spanish accessible to inmates, staff, contractors, volunteers, and visitors. Staff interviews confirmed inmates are not used as translators or readers for other inmates.

Provision (e): The agency shall maintain documentation of inmate participation in these education sessions.

A sample of signed acknowledgement statements were reviewed which supported the inmates' involvement in PREA education sessions. The inmates were aware of PREA information, including their rights regarding PREA, how to report allegations and that they would not be punished for reporting allegations of sexual abuse or sexual harassment. The Intake staff was interviewed regarding PREA education for inmates. She ensures inmates' receipt of the information, including the inmate signing the acknowledgement form. However,

inmate interviews revealed limited knowledge of outside victim's advocacy services. Prior to the writing of this report, documentation was provided that additional education sessions were conducted for inmates specifically regarding victim's advocacy services.

Provision (f): In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

The PREA education materials provide inmates information on how to report allegations of sexual harassment and sexual abuse. A brochure is provided to each inmate to eliminate incidents of sexual abuse and sexual harassment. The brochure provides educational information regarding sexual abuse and victims. The inmates revealed they can report allegations of sexual abuse or sexual harassment by telling a staff member; telling a family member who may report the allegation for them; access to the liveSAFE hotline to report allegations of sexual abuse or sexual harassment; or complete a grievance form. Each inmate is provided a Handbook and Safety Brochure. Posters were observed placed throughout the facility and were easy to see and read.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined that the facility is compliant with the provision of this standard.

115.34 | Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires an investigation for all allegations of sexual abuse or sexual harassment to the Cherokee County Sheriff's Office (CSO) for criminal and administrative investigations. All investigators undergo an extensive training developed by the CSO Criminal Investigaton Department (CID) prior to conducting investigations which includes the CCADC PREA Specialized Investigations: Sexual Abuse and Sexual Harassment. There are twenty-five staff at the facility who have completed the CCADC PREA Specialized Investigations: Sexual Abuse and Sexual Harassment and other required investigative training. Documentation was reviewed and in compliance with the PREA requirements for specialized training for investigators who investigate allegations of sexual abuse and sexual harassment in confinement.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training

Interviews: PREA Compliance Manager; Investigative Staff; Random Staff

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

In addition to the general PREA training provided to all employees, the agency ensures that its Facility investigators have received training in conducting investigations in confinement settings. Interviews and documentation reveal that specialized training was completed.

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

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

Provision (c): The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

The facility maintains a list of investigators having completed the required specialized training in conducting sexual abuse investigations. The facility indicated that they provided the PREA requirements for serving as a PREA investigator.

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

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined that the facility is compliant with the provision of this standard.

115.35 | Specialized training: Medical and mental health care

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires PREA training and specialized training for medical and mental health staff. It was evident through the medical staff interview they had received the basic PREA training provided to all staff and the specialized training offered by CCADC [Sexual Abuse and Sexual Harassment Medical and Mental Health Response (Prisons-Health Services)]. All medical and mental health staff sign the "Medical & Mental Health Care PREA Training Acknowledgement" form to acknowledge they received the training and understand their responsibilities in the event of an incident.

The medical staff do not conduct forensic examinations. An interview with the medical staff confirmed their understanding of the requirement to complete the specialized training and verified completing the course. Forensic examinations are conducted at the Kennestone Hospital Emergency Department by SANE or SAFE certified examiners.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Training Logs; Training Curricula

Interviews: PREA Compliance Manager; Medical and Mental Health Staff

Provision (a): The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The facility does not conduct forensic medical exams. As fulltime staff, they also receive the same PREA training as other staff.

Provision (b): If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.

Forensic examinations are not conducted at the facility they will be conducted at a local Hospital, Kennestone Hospital Emergency Department, Marietta, GA.

Provision (c): The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.

The training documents, including training certificates and the interviews with medical and mental health staff confirmed receipt of the required training.

Provision (d): Medical and mental health care practitioners shall also receive the training

mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.

Medical and mental health staff completed the general training that is provided for all staff members as documented by training documentation.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding specialized training for medical and mental health care.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires prior to placement as part of the screening process each inmate is screened upon admission with an objective screening instrument for risk of victimization and sexual abusiveness with the Sexual predator Victimization form and within seventy-two hours a mental health practitioner will conduct an initial Mental Health Assessment. Most inmates are screened within seventy-two hours upon arrival at the facility to determine placement and their special needs. Those inmates who score vulnerable to victim or sexually aggressive are included into the alert system, as well as receiving further assessments, as identified. This intake screening is used in combination with information about personal history, medical and mental health screenings, conversations, classification assessments as well as reviewed court records and case files. Inmates are reassessed at a minimum of every thirty (30) days and throughout their stay at the facility. The facility's policies limits staff access to this information on a "need to know basis". Most inmate interviews and the documentation revealed that risk screenings are being conducted on the same day as the admission. Staff interviews confirmed a screening is completed on each inmate upon admission to the program. Inmates reporting prior victimization, according to staff, are referred immediately for a follow-up with medical or mental health staff. Although there have been no transgender or intersex inmates admitted to the facility within the past year, staff were aware of giving consideration for the inmates on views of their safety in placement and programming assignment.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training; Sexual predator Victimization form

Interviews: PREA Coordinator; PREA Compliance Manager; Staff responsible for Risk Screening

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

The facility assesses all inmates during intake screening to include inmates that transfer from other prisons for risk of being sexually abused.

Provision (b): Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

Interviews and documentation revealed that intake screenings are taking place within 72 hours at the facility. Also, during intake screening, procedures require staff review available documentation for any indication that an inmate has a history of sexually aggressive behavior. Housing assignments are made accordingly.

Provision (c): Such assessments shall be conducted using an objective screening instrument.

The Agency requires CCADC to use the agency Sexual Predator Victimization Screening form and the Screening for Risk of Victimization and Abusiveness as the objective screening instruments. Staff interviews for conducting Screening for Risk of Victimization and Abusiveness indicated that the facility uses the agency form and the PREA Intake Objective Screening Instrument to document this process. The PREA Intake Objective Screening Instrument has all the required criteria.

Provision (d): The intake screening shall 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

The Auditor reviewed the Vulnerability Assessment: Sexual Predator Victimization screening instrument and determined all factors required by this provision of the standard are included. The interview with the Intake Staff confirmed she is aware of the elements of the risk screening instrument. The inmate interviews also confirmed the administration of the screening instrument.

Provision (e) & (f): The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Agency policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmates' arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening

Provision (g) & (h): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.

Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to any questions as stated in section (d).

Provision (i): The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

The Policy provides for appropriate controls be taken to ensure that sensitive information is protected and not exploited. The interview with the PREA Compliance Manager revealed the

information is only available to the Intake Staff and the mental health staff. The documents are kept in the inmate's file in a locked file cabinet in the locked office when unoccupied by the Intake Staff. The Auditor observed the files to be maintained in a secure manner. The evidence shows the facility follows this provision of the standard.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is fully compliant with this standard regarding screening for risk of victimization and abusiveness.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA precludes gay, bi-sexual, transgender and intersex inmates being placed in a particular housing unit, beds or other assignments based solely on their identification or status. In addition, the policy describes the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine an inmate's appropriate placement, housing and bed assignments, as well as work, education, and program assignments with the goal of keeping all inmates safe and free from sexual abuse. The intake staff utilize various forms and any other pertinent information during the inmate's admission process. Staff interviews described how information is derived from the forms as indicated above and the initial health assessment and mental health/substance abuse screening forms to determine placement and risk level.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training

Interviews: PREA Coordinator; PREA Compliance Manager; Staff Responsible for Risk Screening

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

The Agency requires facilities to use information from the risk screening required to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk for being sexually victimized from those at high risk of being sexually abusive.

Provision (b): The agency shall make individualized determinations about how to ensure the safety of each inmate.

Individualized determinations about how to ensure the safety of each inmate will be made according to staff interviewed.

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

Ten targeted inmates were interviewed during the on-site visit. The interviews revealed that

the facility does consider on a case-by-case basis whether a placement would ensure the inmate's health and safety and whether the placement would present management or security problems.

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

Staff interviews indicated that when making placement and programming assignments for each transgender or intersex inmate, the facility will reassess them at least twice each year to review any threats to safety experienced by the inmate.

Provision (e): A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

Staff interviews also indicated if they were to have a transgender or intersex inmate, the inmate's views concerning his safety would be given serious consideration.

Provision (f): Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

Policy states transgender and intersex inmates will be given the opportunity to shower separately from other inmates.

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

Interview with the Facility PREA Compliance Manager indicated that the facility would not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on identification status for protecting such inmates.

PREA Coordinator interview indicated that the facility is not subject to a consent decree, legal settlement, or legal judgment. Staff indicated that the facility ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely by their sexual orientation, genital status, or gender identity. They are housed in the general population unless requested by the inmate for special housing for safety issues.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is fully compliant with this standard regarding use of screening information. The facility uses information from the risk screening required by §115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping all inmates safe and free from sexual abuse. The facility prohibits placing LGBTQI inmates in particular housing, bed, or other assignments solely based on such identification or status and does not consider such identification or status as an indicator of likelihood of being sexually abusive. The facility is prepared to provide a safe and secure environment and follow all provisions of this standard.

115.43 | Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that Inmates at high risk for sexual victimization will not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If an assessment cannot be conducted immediately, the inmate may be held in involuntary segregation for less than 24 hours while completing the assessment.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of housing assignments; Case files

Interviews: Jail Administrator; PREA Coordinator; PREA Compliance Manager; Staff who Supervise Inmates in Segregated Housing; Inmate in Segregated Housing

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

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

Provision (b): Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.

Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the restrictions are placed on access to programs, privileges, education, or work opportunities, the following reason(s) will be documented in a jail incident report: a)The opportunities that have been limited; b) The duration of the limitation; and c)The reasons for such limitations.

Provision (c): The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

If an involuntary segregated housing assignment is made, a jail incident report will be completed clearly documenting the following information: the basis for concern for the inmate's safety and the reason(s) why no alternative means of separation can be arranged. A review will be conducted every 30 days to determine the continuing need for separation from general population.

Provision (d): If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged.

The agency's Protective Custody Cover Sheet, documents that the inmate is to receive all of the same privileges as inmates in general population with some exceptions identified. It also affirms the status of an inmate in PC is to be reviewed every seven days for the first two months of segregation and at least 30 days thereafter. The review is documented on the inmate's record. Privileges must be offered each day unless special circumstances prohibit it. These are documented as missed privileges.

Interviews with the Jail Administrator, PREA Coordinator and other staff indicated that placing an inmate victim on PC involuntarily would be a last resort. They indicated inmates needing protection may be placed in medical or in another living unit, including the special needs unit. Staff supervising segregation indicated inmates get recreation, GED staff bring materials to work on, Food is brought in, the Chaplain visits, and Medical is there daily and at pill call. Inmates have access to a KIOSK, phones and a television.

Several examples of Protective Custody inmates were provided. None of them were in PC as a result of PREA issues. Inmates were asked if they felt safe in their living units and if they wanted to return to general population. All of these examples were voluntarily housed in Protective Custody.

Provision (e): Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

Policy provides that a review will be conducted every 30 days to determine the continuing need for separation from general population.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding protective custody.

115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA provides multiple internal ways for inmates to report sexual abuse and sexual harassment, retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates are informed verbally and in writing on how to report sexual abuse and sexual harassment. These various ways of reporting include advising an administrator, a staff member, external reporting, and third party. While touring the entire facility, it was observed in the living areas postings of the PREA information (posters). The victim advocate information postings were limited. Reporting procedures are provided to inmates through the Inmate/PREA Orientation, brochure, and Inmate Rule Booklet. Most staff and inmate interviews along with the orientation and supporting documentation verified compliance with this standard. After the on-site visit, the victim advocate information was clearly posted in various areas throughout the facility. The PREA Compliance Manager sent photos verifying this corrective action to this auditor prior to the submission of this report.

Most staff interviews along with the postings, and supporting documentation confirmed multiple internal ways for inmates to report sexual abuse and sexual harassment, their understanding of the policies and their obligation of being mandated abuse reporters.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Inmate Handbook; MOU

Interviews: PREA Compliance Manager; Random Staff; Random Inmates

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

Interviews with staff and documentation review indicated that the facility had established procedures allowing for multiple internal ways for inmates to report sexual abuse and sexual harassment privately. The following are internal reporting ways:

- Report through inmate kiosk
- Report to any staff member either verbally or in writing
- Third party reporting
- Report to liveSAFE hotline
- Writing an anonymous note

Provision (b): The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained

solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Interviews with staff and documentation indicated that the facility has established at least one way for inmates to report abuse or harassment to a public or private entity that is not part of the agency, and that can receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The following are external reporting ways:

- liveSAFE Hotline
- Third party reporting

Policy requires inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

Provision (c): Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency policy mandates that staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff is required to document verbal reports immediately, but always before leaving the shift. Staff can report sexual abuse and sexual harassments privately and the agency informs staff through shift briefing, management meetings and PREA training.

Provision (d): The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

Staff can privately report sexual abuse and sexual harassment by use of the liveSafe hotline.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding inmate reporting. The inmates have multiple internal ways for inmates to privately report. Reports can be made verbally, in writing, anonymously, and from third parties. Verbal reports would be documented immediately. Inmates have access to pens and pencils to write a grievance or complete a Medical Request Form. Staff can privately report sexual abuse and sexual harassment of inmates.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA describes the orientation inmates receive explaining how to use the grievance process to report allegations of sexual abuse and sexual harassment and has administrative procedures/appeal process for dealing with inmate's grievances regarding sexual abuse and/or sexual harassment. Inmates may file a grievance or complaint by using a KIOSK located in all housing units of the facility.

The facility has a multi-layered grievance process enabling timely response and layers of review. The policies and procedures describe an unimpeded process. Inmates are not required to utilize an informal process for reporting allegations of sexual abuse or sexual harassment nor are they required to submit it to the staff member involved in the allegation. Also, the facility has an emergency grievance procedure requiring an initial response within 48 hours and a final decision within five (5) calendar days. The staff interviews confirmed there is a grievance process relating to sexual abuse or sexual harassment complaints at the facility. Some inmate interviews and documentation confirmed there is a grievance process relating to sexual abuse or sexual harassment and file a written complaint utilizing a KIOSK. Inmate interviews indicated they would contact a trusted staff and/or family in relation to sexual abuse or sexual harassment complaints. CCADC had 29 grievances in the past twelve (12) months related to sexual abuse or sexual harassment complaints.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of disciplinary actions; Inmate Handbook

Interviews: PREA Coordinator; PREA Compliance Manager; Inmates who Reported a Sexual Abuse

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

Agency Policy requires that inmates will be allowed a full and fair opportunity to file grievances regarding sexual abuse so as to preserve their ability to seek judicial redress after exhausting administrative remedies. The agency provides a KIOSK enabling inmates to file grievances electronically, using the KIOSK located in the housing unit. These are sent directly to ADC supervisors. If a supervisor receives such a grievance, it will be reported immediately to the ADC Commander and the ADC Commander or Shift Supervisor will perform an investigation of the incident. [ADC policy #08-03-08].

Provision (b): (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in

this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired.

Time limits are not to be imposed when an inmate is reporting an alleged incident of sexual abuse. A time limit may be applied to any portion of a grievance that does not allege an incident of sexual abuse. Policy also prohibits filing an informal grievance process when an inmate files a grievance regarding sexual abuse or otherwise resolve an alleged incident with staff.

Provision (c): The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint.

Policy ensures that Inmates or staff do not have to submit or refer a grievance alleging sexual abuse to the staff member who is the subject of the complaint.

Provision (d): (1) The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

When a staff receives a grievance that is PREA related it is immediately reported to the PREA investigator. Thus, ends the grievance process and begin the investigation process. However, if the grievance process moves forward, the facility issues a final decision on the merits of alleging within 90 days of the initial filing. If the facility will claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The inmate will be notified in writing of any such extension and provide a date by which a decision will be made.

Provision (e): (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) 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. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

According to interviews, third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and permitted to file requests on behalf of an inmate. If a third-party file a request on behalf of an inmate, the facility will require, as a condition of processing, the request that the alleged victim agree to

have the request filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. If the inmate declines to have the request processed on his/her behalf, the facility documents the inmate's decision.

Provision (f): (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

If an emergency grievance is filed alleging an inmate is subject to a substantial risk of imminent sexual abuse, it will be forwarded to the ADC Commander for review. Immediate corrective action will be taken, the inmate will be provided with a response within 48 hours and, a final decision within five calendar days. According to interviews, when the facility receives an emergency grievance alleging an inmate is at substantial risk of imminent sexual abuse, the staff immediately forwards the grievance for investigations.

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

Inmates may be disciplined for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith. A copy of the grievance and all responses shall be forwarded to the PREA Coordinator after an agency decision is made. Inmate's documentation indicated that the facility may discipline an inmate for filing a grievance related to alleged sexual abuse when the inmate filed the grievance in bad faith.

Conclusion: Inmates interviewed acknowledged they could report allegations of sexual abuse or sexual harassment using the KIOSK. Several mentioned the grievance process as one way they could report allegations of sexual abuse. Staff, acknowledged that inmates can file a grievance to report any allegations of sexual abuse, sexual harassment or retaliation. They indicated the grievance alleging these would be treated as an emergency grievance, which would be attended to immediately, rather than having to go through the regular grievance policy.

Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding exhaustion of administrative remedies.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA ensures that inmates are provided access to outside confidential support services and legal counsel. There is evidence of CCADC Jail Administrator obtaining a Memorandum of Understanding with liveSAFE Resources, Inc. to provide confidential emotional support to inmates who are victims of sexual abuse and sexual harassment. liveSAFE Resources, Inc. also conducts forensic exams. There have been no calls from inmates to outside services in the past 12 months. Inmate interviews confirmed they have reasonable and confidential access to their attorneys through visitation, correspondence or by telephone. The Inmate/PREA Orientation contained information of outside services. Inmates' interviews revealed inmate knowledge of how to access outside services. Since the initial review and onsite visit, the facility's bulletin boards located in their housing units were updated to clearly post the victim advocate services and the telephone number. The PREA Compliance Manager sent photos to verify the actions taken to this auditor prior to the submission of this report.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; liveSAFE Resources, Inc. MOU

Interviews: PREA Coordinator; PREA Compliance Manager; Random Staff

Provision (a): The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

The CCADC provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address to the liveSAFE Resources, Inc.

Provision (b): The facility shall 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.

The CCADC informs inmates prior to them communicating with outside organizations that phone calls may be monitored and that reports of sexual abuse or sexual violence will be forwarded to authorities by mandatory reporting laws. Inmates receive this information in their Admission and Orientation Booklet.

Provision (c): The agency shall 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. The agency shall

maintain copies of agreements or documentation showing attempts to enter into such agreements.

The facility maintains memoranda of understanding (MOU) or other agreements with liveSAFE Resources, Inc. that can provide inmates with emotional support services related to sexual abuse. Interviews with the PREA Coordinator and a reviewed Memorandum of Agreement, between the Cherokee Sheriff's Office with liveSAFE Resources Inc. confirmed the availability of this service for inmates of the Cherokee County Adult Detention Center. The agreement is documented as required and a copy of the agreement is maintained in the PREA Coordinator's office. The reviewed MOU, acknowledges the availability and involvement of a certified rape crisis advocate(s) who will meet an inmate victim at the Kennestone Hospital Emergency Department. Inmates at the facility have 24/7 access to the liveSAFE Resources, Inc. through the liveSafe hotline. Numbers to additional outside advocates are posted throughout the facility, located in the Inmate Handbook and also in the Sexual Assault Manual.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding inmate access to outside confidential support services and legal representation.

115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA identifies the Agency's third-party reporting process and instruct staff to accept third party reports. CCADC website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of an inmate. In addition, the Agency has established a confidential webpage for employees to report allegations fraud, waste, abuse, misconduct or mismanagement in the facility and these concerns may be reported anonymously. There are two separate reporting processes for the receipt of third-party reports of sexual abuse or sexual harassment. They may write to the Agency PREA Coordinator or send an email through the link provided. This information is reported directly to the Agency PREA Coordinator who will inform the Criminal Investigation Division. These reports will be investigated. All inmate interviews confirmed their awareness of reporting sexual abuse or sexual harassment to others outside of the facility including access to their attorney. All staff interviews were able to describe how reports may be made by third parties.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Inmate Crisis Manual; Inmate Handbook

Interviews: PREA Coordinator; PREA Compliance Manager; Random Staff; Random Inmates

Provision (a): The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.

The Policy addresses third-party reporting and interviews revealed random staff members are aware third-party reporting of sexual abuse and sexual harassment can be done and stated they will be accepted and reported. Staff members also stated they are to immediately document all verbal reports received. The interviews revealed they may report allegations privately through the use of the liveSAFE abuse reporting hotline or a third-party reporting form.

All inmates interviewed stated they knew someone who did not work at the facility they could report to regarding allegations of sexual abuse and that person could make a report for them. The interviews with the inmates revealed their knowledge of third-party reporting. The inmates identified the methods within the facility in which they may make third party reports such as file an emergency grievance, report to staff or a family member, or utilize the liveSAFE abuse reporting hotline telephone.

Information regarding reporting is provided through observed postings located in various areas of the facility accessible to visitors, inmates, staff, contractors and volunteers. The facility's website contains information regarding third-party reporting of allegations of sexual abuse. The Third-Party Reporting Form is observed to be located on the website. There were no third- party reports received during this audit period.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor determined the facility is in compliance regarding third-party reporting. The facility provides various methods for third-party reports of sexual abuse or sexual harassment.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA identified the reporting process for all facility staff to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against inmates or staff who report any incidents, or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All facility staff are mandated reporters and most random staff interviews confirmed the facility's compliance with this standard. Additionally, the facility staff receive information on clear steps on how to report sexual abuse and to maintain confidentiality through the facility's protocol and/or training. The staff would complete an incident report with the details of any incidents that would occur in the facility in compliance with this standard.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Sample of reports to investigators

Interviews: Jail Administrator; PREA Coordinator; Random Staff; Medical and Mental Health Staff

Provision (a): The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

The Policies collectively address provisions of the standard including providing all staff immediately report any knowledge, suspicion, information, or receipt of information regarding an incident or allegation of sexual abuse, sexual harassment or incidents of retaliation and according to mandatory reporting laws of the State of Georgia. The facility's trained investigators conduct administrative and criminal investigations.

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

Reporting according to the State's mandatory reporting laws and the facility Policies was evident through document review regarding disclosures by inmates of allegations that did not occur in the facility or an institutional setting. The documented case notes show the reporting by staff in accordance with facility Policies and the requirements of the standard. The staff interviews were aligned with the requirements of the Policies and standard. A review of documentation demonstrates information reported to staff is reported to the appropriate authorities. Staff members are instructed to immediately report all allegations of sexual abuse or sexual harassment to a Supervisor or the PREA Coordinator.

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

Facility Policy supports that after allegations have been appropriately reported, staff will not be permitted to give out any other information relating to what was reported except when necessary to obtain treatment for the inmate, aid in the investigation, or help retain the security of the facility. Staff is expected to continue to abide by the confidentiality requirements of the facility. Interviews with staff indicated their knowledge of the prohibition of revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Based on the review of documentation and interviews with staff, it is evident the facility follows this provision of the standard.

Provision (d): If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

The medical and mental health staff interviewed stated inmates are informed at the initiation of services of the limitations of confidentiality and the duty of the staff members to report. The clinical staff interviewed revealed they are mandated reporters. They also indicated informed consent would be documented for an inmate 18 years old and over regarding reporting allegations of sexual abuse that did not occur in an institutional setting.

Provision (e): The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

The Policies collectively provide for all allegations to be reported to the PREA Coordinator, including third-party and anonymous reports as also verified by staff interviews.

Conclusion: The interviews with random staff, mental health and medical staff and Jail Administrator revealed their awareness of the requirements regarding the reporting duties. All staff interviewed acknowledged they are mandated reporters and a written report must immediately follow reported allegations or incidents. The random staff interviewed provided the reporting requirements and that staff is expected to document receipt of verbal reports immediately. The facility staff members are also required by the Policy to report allegations that were made anonymously or by a third-party. During this audit period, there were 32 allegations of sexual abuse and sexual harassment.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that immediate action to be taken upon learning that an inmate is subject to a substantial risk of imminent sexual abuse. There were no inmates determined to be subject to substantial risk of imminent sexual abuse in the past 12 months. Documentation and interviews with the PREA Coordinator and other random selected staff were able to articulate, without hesitation, the expectations and requirements of CCADC Policies and PREA Standards, upon becoming aware that an inmate may be subject to a substantial risk of imminent sexual abuse. Staff interviews indicated if an inmate was in danger of sexual abuse or at substantial risk of imminent sexual abuse, they would act immediately to ensure the safety of the inmate, separate from the alleged perpetrator and contact their immediate supervisor. Additionally, the inmate would be referred for mental health services.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: PREA Coordinator; Random Staff

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

Facility Policy requires staff to protect the inmates through implementing protective measures. Administration of the Vulnerability Assessment provides information that assists and guide staff in keeping inmates safe through housing and program assignments. The interviews of the random staff and the PREA Coordinator revealed protective measures include but are not limited to alerting supervisors and management staff and separating the inmates including moving to a different housing unit. The PREA Coordinator and the random staff indicated the expectation is that any action to protect an inmate would be taken immediately.

The interviews with the inmates revealed during the intake process, how they feel about their safety is part of the inquiries by staff in completing paperwork. A review of a sample of Vulnerability Assessments supports the information provided by inmates. The PREA Coordinator report during the past 12 months, no inmates were identified as being subject to substantial risk of imminent sexual abuse.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard and the provisions regarding agency protection duties.

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires the Facility Jail Administrator, upon receiving an allegation that an inmate was sexually abused while confined at another facility, to notify the Facility Jail Administrator where the alleged abuse occurred and to report it in accordance with CCADC policy and procedures. Also, according to policy and procedure the Facility Jail Administrator is to immediately report the incident for investigation and complete an incident report. The Facility Jail Administrator had received no allegations that an inmate was abused while confined at another facility during the past 12 months.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: Jail Administrator; PREA Coordinator; Random Staff

Provisions (a), (b), (c), and (d): (a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. (c) The agency shall document that it has provided such notification. (d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

CCADC Policy provides that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Jail Administrator/designee shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred and the appropriate investigative agency. Notification should be made as soon as possible but no longer than 72 hours after receiving the information. The Jail Administrator/designee must document the notification as required by Policy. It is the responsibility of the receiving agency to ensure an investigation is completed. According to the Jail Administrator, there has been no allegation of sexual abuse made by an inmate regarding confinement at another facility. The Jail Administrator is familiar with the Policy and his responsibilities regarding such situation.

Conclusion: Based upon the information received and interviews, the Auditor has determined the facility is compliant with this standard regarding reporting to other confinement facilities.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period that still allows for the collection of physical evidence; request that the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. There had been 14 allegations of sexual abuse during the past 12 months. Random staff and first responder interviews validated their technical knowledge of actions to be taken upon learning that an inmate was sexually abused. Also, every interviewed staff, without hesitation, described actions they would take immediately, and these steps were all consistent with CCADC policies and procedures. It was evident that staff have been trained in their responsibilities as first responders. The staff had palm cards containing the policy on the first responder's specific steps to respond to a report of sexual abuse.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: Random Staff, Staff First Responder

Provision (a): Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

Facility Policy provides that upon learning of an allegation that an inmate was sexually abused, the first security-level staff member to respond to the report shall be required to:

- 1. Separate the alleged victim and abuser;
- 2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- 3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence;
- 4. If the abuse occurred within a time period that still allows for the collection of physical

evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence.

The interviews with staff confirmed awareness of first responder duties and the training they had been provided. There were 14 allegations that an inmate was sexually abused in the last 12 months.

Provision (b): If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

The staff member interviewed who may act as a first responder was familiar with his duties in that role. He indicated he would alert the supervisor, separate the victim and perpetrator, and request the victim and perpetrator do not take any actions that could destroy physical evidence. He further stated he would go with the victim to the hospital.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding staff first responder duties.

115.65 | Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA provides a written coordinated response system to coordinate actions taken in response to an incident of sexual abuse among staff first responders, administration, executive staff and contacting medical and mental health outside sources. CCADC staff have a system in place providing the staff with clear actions to be taken by each discipline for accessing, contacting administrative staff, medical and mental health staff, contacting law enforcement, victim advocate services, and a number of other individuals. Interviews with the Jail Administrator and other staff validated their technical knowledge of their duties in response to a sexual abuse.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: Jail Administrator; PREA Coordinator; Random Staff

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

The facility has developed a Coordinated Response plan which is aligned with the detailed information in the policy regarding the response to an allegation or incident of sexual abuse. The Plan outlines the actions of the identified staff members such as the first responder; supervisors; medical; mental health; and management. The plan maps out the steps to take and staff responsibilities. The random staff interviewed were familiar with the roles regarding the response to an allegation of sexual abuse. The Jail Administrator discussed the coordinated actions in response to an incident of sexual abuse which was parallel to Policy and the Plan. Staff members are directed to follow the steps outlined. Forensic medical examinations will be provided free of charge to the victim at Kennestone Hospital by a Sexual Assault Nurse Examiner (SANE). The Hospital has 24/7 access to a SANE provider. A qualified medical professional shall perform a forensic medical examination if there is no SANE available as stated in the Hospital's Sexual Assault Policy. The victim will be provided unimpeded access to crisis intervention and medical services.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility complies with the provisions of the standard regarding a coordinated response to an incident of sexual abuse.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	CCADC has not entered into or renewed any collective bargaining agreement on the agency's behalf.
	Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA
	Interviews: Jail Administrator
	Provision (a): Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.
	Provision (b): Auditor is not required to audit this provision.
	Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility complies with the provisions of the standard regarding preservation of ability to protect inmates from contact with abusers.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

Provisions (a),(b),(c),(d),(e): (a) The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation. (b)The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. (c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. (d)In the case of inmates, such monitoring shall also include periodic status checks. (e)If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation. (f)An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires the protection and monitoring of inmates and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation. CCADC policy prohibits retaliation against any staff or inmate for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. This monitoring would include inmate disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff. The Facility Classification Manager is responsible with the monitoring of the conduct or treatment of inmates who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to determine if changes that may suggest possible retaliation exist. The PREA Coordinator is responsible with the monitoring of the conduct or treatment of staff who reported the sexual abuse and for cooperating with investigation to determine if changes that may suggest possible retaliation exist. The Classification Manager will serve as an advocate to link services (community-based advocates or mental health professionals) and support to inmates who report sexual abuse and sexual harassment by another inmate, staff member, contractor or volunteer. If a retaliation should occur, the PREA Coordinator or Classification Manager would complete several forms depending on whether it is a staff or inmate retaliation monitoring. Upon completion of the investigation, the PREA Coordinator will complete a "PREA Retaliation Monitoring" sheet. There were no incidents of retaliation in the past 12 months.

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

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of monitoring efforts

Interviews: Jail Administrator; PREA Coordinator; Retaliation Monitor

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding agency protection against retaliation.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA addresses the use of protective custody only if no other alternative means of protection is available, or if inmates request this level of protection. Inmates requesting this level of protection may complete the Request for Protective Custody and must document the reasons for the request.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Records and documentation of housing assignments of inmates who alleged to have suffered sexual abuse

Interviews: Director; PREA Compliance Manager; Staff who Supervise Inmates in Segregated Housing, Inmates in Segregated Housing

Provision (a): Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.

When staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action will be taken to protect the inmate. Appropriate protective measures will be taken without unreasonable delay. Policy requires the agency to provide for the protection of inmates from personal abuse, corporal punishment, personal injury, property damage and harassment. Policy also provides for the custody, housing and supervision of inmates assigned to and placed in Protective Custody (PC); to provide for the safety and security of the inmates, staff and visitors of this facility and to provide for the orderly operations of the facility.

Policy provides for the Classification Manager, Watch Commander or higher authority to place an inmate in Protective Custody based on any of the following: 1) Involvement in criminal investigation and/or court proceedings; 2) Physical stature and/or emotional stability indicates a high potential for abuse and/or victimization if assigned to General Population. Inmates may request PC and in so doing, must provide sufficient verifiable information to the Classification Manager, Watch Commander or higher authority in order to affirm the request. Policy requires inmates in PC to be afforded the same basic privileges as inmates in General Population. However, the safety, security or orderly operations of the facility must be maintained. When any privilege is suspended, the reasons must be documented and a copy forwarded to the Assistant Jail Division Commander. Inmates in PC are assigned to single occupancy cells. They are provided personal hygiene on a daily basis, but not less than three times per week. Inmates are provided an hour of exercise daily, five days a week. Medical staff conducts daily rounds to the PC area. Inmates have access to the same bedding and meals other inmates get. Inmates have access to the facility's library and may have books, magazines, etc. They may participate in programs such as counseling, educational, etc. provided the safety and order of the facility can be maintained. Scheduling will be maintained to keep the PC inmates separate from the other inmates. Personal visitation is provided and inmates may send out and receive mail in the same manner as General Population inmates.

Inmates remain in PC only as long as the reason for their initial placement there remains valid. Each inmate's case shall be reviewed weekly for the first two months and at least thirty days thereafter by the Classification Manager. Inmates should be returned to the General Population when the need for PC no longer exists.

Interviews indicated the use of PC may be used, but placement is not necessarily in segragation. Placement may be in medical or in the special needs unit or other safe housing until the investigation is completed and the threat removed. There were no inmates placed in PC, involuntarily, during the on-site audit. Interviews indicated if an inmate had to be placed in some protective housing, the inmate would not be locked in a cell but would have essentially the same privileges as general population inmates. Staff reported the alleged aggressor would be locked down. The facility documents PC on the PC Cover Sheet. The sheet documents the privileges the inmate is to have; reasons for not having any one of them; justification for placement; and review every seven days for the first two month.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility complies with the provisions of the standard regarding Post-allegation protective custody.

115.71 | Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Sample of criminal and administrative investigation reports

Interviews: Jail Administrator; PREA Coordinator; PREA Compliance Manager; Investigative Staff

Provision (a): When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Policy requires that investigations into all allegations of sexual abuse and sexual harassment will be done so promply, thoroughly, and objectively, for all allegations, including those reported third-party and an anonymously and a preponderance of evidence will be imposed or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated

Provision (b): Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.

Policy provides for the CCADC to utilize investigators who have received special training in sexual abuse investigations in a confinement setting.

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

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

Provision (d): When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Policy requires that when the quality of evidence appears to support criminal prosecution, compelled interviews will be conducted only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Provision (e): The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph

examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Policy requires that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. An inmate who alleges sexual abuse will not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation.

Provision (f): Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Policy requires that administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Provision (g): Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Policy requires that criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Provision (h): Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Policy requires that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Provision (i): The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Policy requires that all written reports pertaining to administrative or criminal investigations of alleged sexual assault or sexual harassment will be kept for as long as the alleged abuser in incarcerated or employed by the agency, plus five years.

Provision (j): The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

Policy provides that the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

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

Provision (I): When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Policy provides that when outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding criminal and administrative agency investigations.

115.72 **Evidentiary standard for administrative investigations Auditor Overall Determination:** Meets Standard **Auditor Discussion** CCADC meets the requirements of this standard based upon the following evidence: The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA imposes no standard greater than a preponderance of the evidence in determining the outcome of an investigation. An interview with investigative staff confirmed the findings. Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of administrative findings for proper standard of proof. Interviews: Investigative Staff Provision (a): The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The investigators impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews with the Facility Investigator confirmed the standard to determine whether an allegation is substantiated, unsubstantiated, or unfounded is the preponderance of the evidence.

Conclusion: Based upon the review and analysis of the available evidence and the

evidentiary standard for administrative investigations.

interviews, the Auditor has determined the facility is compliant with this standard regarding

115.73 | Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that any inmate who alleges that he or she suffered sexual abuse is informed in writing whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. This policy further requires that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the facility informs the inmate, unless the allegations are "unfounded", whenever the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; if CCADC learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility. With regard to investigations involving inmate-on-inmate allegations of sexual abuse, the facility will inform the inmate whenever the facility learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. There has been 29 criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. Of the alleged sexual abuse investigations that were completed in the past 12 months, 29 inmates were notified, verbally or in writing, of the results of the investigation. The Jail Administrator validated his technical knowledge of the reporting process during his interview.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: Jail Administrator; Investigative Staff; Inmate who Reported a Sexual Abuse

Provision (a): Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Facility Policy addresses the inmate being informed by staff when the investigation is completed, informed of the outcome of the investigation, and the documentation of the notification. The PREA Compliance Manager will remain abreast of an investigation conducted by any of the investigative entities by serving as the primary contact person(s), as determined by the interviews. The CCADC Policy provides that any inmate who makes an allegation of sexual abuse shall be informed verbally by the Jail Administrator and in writing following an investigation, as to whether the allegation was substantiated, unsubstantiated, or unfounded.

Provision (b): If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate.

The CCADC Policy states the facility shall request all relevant information from the investigating agency to inform the inmate of the outcome of the investigation.

Provision (c): Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is

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

The Policy requires that following an inmate's allegation that a staff member committed sexual abuse against the inmate, the inmate will be informed of the following, unless it has been determined that the allegation is unfounded, whenever:

- a. The staff member is no longer assigned within the inmate's housing unit;
- b. The staff member is no longer employed at the facility;
- c. The staff member has been indicted on a charge related to sexual abuse within CCADC; or
- d. The staff member has been convicted on a charge related to sexual abuse within the facility.

Provision (d): Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

The Policy provides that following an inmate's allegation that he has been sexually abused by another inmate, the alleged victim shall be subsequently informed whenever:

- a. The alleged abuser is criminally charged related to the sexual abuse; or
- b. The alleged abuser is adjudicated on a charge related to sexual abuse.

Provision (e): All such notifications or attempted notifications shall be documented.

The Policy provides that all such notifications or attempted notifications be documented.

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

Conclusion: The interviews with the identified staff confirm the Policy requirements and their knowledge of the process of reporting to an inmate regarding the outcomes of an allegation of sexual abuse. Based on the review and analysis of the available documentation and interviews, the Auditor has determined the facility is compliant with this standard regarding reporting to inmates.

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires staff disciplinary sanctions up to and including termination for violating facility's sexual abuse or sexual harassment policies. Also, the policy mandates that the violation be reported to the PREA Coordinator and the Criminal Investigation Division. All disciplinary sanctions are maintained in the employees HR file in accordance with CCADC policy and procedures. Termination is the presumptive sanction for staff who have engaged in sexual abuse. Additionally, staff may not escape sanctions by resigning. Staff who resign because they would have been terminated, are reported to the local law enforcement, unless the activities were not clearly criminal. There has been one employee disciplined in the past 12 months for violation of the facility's sexual abuse or sexual harassment policies. The Jail Administrator interview validated his technical knowledge of the reporting process was consistent with CCADC policies and procedures.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Records of disciplinary sanctions taken against staff for violations of the agency sexual abuse or sexual harassment policies in the past 12 months.

Interviews: Jail Administrator; PREA Compliance Manager

Provision (a): Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

CCADC Policy provides that staff be subject to disciplinary sanctions up to and including termination for violating facility sexual abuse or sexual harassment policies. The interview with the Jail Administrator, who performs personnel duties, confirmed the Policy.

Provision (b): Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

The Policy states that termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse with an inmate as confirmed by the Jail Administrator.

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

CCADC Policy provides that disciplinary sanctions for violations of CCADC policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with

similar histories. Additionally, the Policy states all employee discipline and termination are governed solely by At Will employee law.

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

CCADC Policy states all terminations for violations of the facility's sexual abuse or sexual harassment policies, or staff resignations related to violations of this policy, shall be reported to law enforcement, unless the activity is clearly not criminal. In addition, it shall be reported to relevant licensing bodies.

Conclusion: Based upon the review of Policy and interview, the Auditor has determined the facility is compliant with this standard regarding disciplinary sanctions for staff.

115.77 | Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that volunteers and contractors in violation of the facility's policies and procedures regarding sexual abuse and sexual harassment of inmates will be reported to the Office of Professional Standards and the Criminal Investigation Division "(unless the activity was clearly not criminal)," and to relevant licensing bodies. Additionally, the policies require the facility staff to take remedial measures and prohibit future contact with inmates in the case of any violation of the facility's sexual abuse and harassment policies by contractors or volunteers. All volunteers and contractors must sign the PREA Acknowledgement Form upon completion of the PREA training they received. This was verified with the documentation review and during an interview with the Jail Administrator and Volunteer/Contract Employee. There have been no volunteers or contractors reported in the past 12 months for engaging in sexual abuse or sexual harassment of an inmate.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA

Interviews: Jail Administrator; PREA Compliance Manager

Provision (a): Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Although there were no contractor or volunteer violations of facility sexual abuse or sexual harassment policies the previous 12 months, facility policy includes the requirements of the standard.

Provision (b): The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Although there were no contractor or volunteer violations of facility sexual abuse or sexual harassment policies the previous 12 months, facility policy includes the requirements of the standard.

Conclusion: Based upon the review and analysis of the available documentation, the Auditor has determined the facility is in compliance with this standard regarding corrective action for contractors and volunteers.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that any inmate found to have violated any of the agency's sexual abuse or sexual harassment policies will be subject to disciplinary sanctions. CCADC staff provides each inmate with an Inmate/PREA Orientation and Inmate Rule Book that includes their rights and responsibilities, a disciplinary list of violations, disciplinary procedures and transfers. Inmates are not offered therapy counseling or other interventions designed to address and correct the underlining reasons for their conduct. There were no administrative findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility in the past 12 months. The Jail Administrator indicated that inmates may also be referred for prosecution if the allegations were criminal.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Documentation of screening; Documentation of appropriate training

Interviews: Jail Administrator; PREA Compliance Manager; Medical and Mental Health Staff

Provision (a): Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

The Policy addresses an administrative process for dealing with rule violations and references the policy that deals with discipline. Sanctions are directly related to the seriousness of the negative behavior. The interview with the Jail Administrator revealed the process regarding allegations of inmate-on-inmate abuse which can include the inmate being transferred from the facility or placed in restrictive housing during the investigation.

Provision (b): Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

Any disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. In the event a disciplinary sanction results in the isolation of an inmate, agencies shall not deny the inmate daily large-muscle exercise or access to any legally required educational programming or special education services. Inmates in restrictive housing shall receive daily visits from a medical or mental health care clinician. Inmates shall also have access to other programs and work opportunities to the extent possible.

Provision (c): The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

The CCADC Policy provides that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. This was confirmed by the interview with the Jail Administrator

Provision (d): If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Inmates are not offered therapy counseling or other interventions designed to address and correct the underlining reasons for their conduct.

Provision (e): The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

CCADC Policy provides the facility may discipline an inmate for sexual contact with staff only upon finding that the staff member did not consent to such contact.

Provision (f): For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

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

Provision (g): An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced

The Policy prohibits any sexual conduct between inmates. All such conduct is subject to disciplinary action. Referral for prosecution would occur after determination the sexual activity was coerced.

Conclusion: There have been no inmates placed in restrictive housing as a disciplinary sanction for sexual abuse in the past 12 months. Additionally, there have been no administrative or criminal findings of inmate-on-inmate sexual abuse in the past 12 months. Based upon the review and analysis of the available documentation, the Auditor determined the facility is compliant with this standard regarding interventions and disciplinary sanctions for inmates.

115.81 | Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The agency policy requires immediate referral to medical and mental health services after information of prior sexual victimization or sexual aggressive behaviors is discovered during the screening process. Services are provided within 14 days by facility medical and mental health staff. Interviews confirmed informed consent is obtained before information is shared regarding a victimization that may have occurred prior to incarceration.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Medical/Mental health secondary materials; Sample of inmate confinement records

Interviews: PREA Compliance Manager; Medical and Mental Health Staff; Staff Responsible for Risk Screening; Inmates who Disclose Sexual Victimization at Risk Screening

Provision (a): If the screening pursuant to § 115.41 indicates that a inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.

The Policy provides that an inmate who indicates during initial screening that they were a victim or perpetrator of sexual abuse shall be offered a follow-up visit with medical or mental health staff within 14 days of the intake screening. A review of documentation, including Intake Staff Notes, demonstrates inmates are offered follow-up meetings in a timely manner, prior to the 14 days. This information was also confirmed through the interview with the Intake Staff.

Provision (b) & (c): If the screening pursuant to § 115.41 indicates that an inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

The Policy supports that any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. The Auditor observed the inmate files maintained in a secure manner. The files are secured in a locked cabinet behind a locked door, when the office is unoccupied. The files have a list of individuals that have access to them.

Provision (d) & (e): Medical and mental health practitioners shall obtain informed consent

from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

The Policy provides that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. The facility has created the Informed Consent form to document this type of situation. There are no inmates under the age of 18 held at this facility.

Conclusion: Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding medical and mental health screenings; and history of sexual abuse.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

The CCADC Prisons Policy F.3400 and CCADC SOP requires inmate victims of sexual abuse are offered timely information about and timely access to emergency contraception and sexually transmitted disease prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate and unimpeded access to emergency medical treatment and crisis intervention services. The medical staff have a protocol in place to assist in expediting an inmate to the emergency room with specific documentation for the staff. Additionally, documentation provided confirmed treatment services are provided to every victim without financial cost. Kennestone Hospital provides the emergency services and forensic examinations and liveSAFE Resources as the outside victim advocate services for this facility. An interview with the medical and mental health staff confirmed that inmates have immediate access to emergency medical and mental health services.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Medical/Mental health secondary materials

Interviews: PREA Compliance Manager; Medical and Mental Health Staff; Inmates who Reported a Sexual Abuse; Staff First Responder

Provision (a): Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

The Policy mandates the victim receives timely and unimpeded access to emergency medical treatment, crisis intervention services and advocacy services. The victim would be transported to Kennestone Hospital for a forensic examination, at no cost to the victim which is acknowledged by facility and Kennestone Hospital Policies. The Policy and interviews with the Medical and Mental Health staff revealed the medical and mental health services are determined according to the professional judgment of the practitioner. Inmates are informed of medical services during intake and sign acknowledgement statements indicating key information reviewed in the education session which includes treatment services. The inmates have access to Medical Request Forms on their living units.

Inmates are provided access to an outside victim advocacy agency for services through a MOU with the liveSAFE Resources which includes but is not limited to emotional support and accompaniment through the forensic examination and investigative interviews. The advocate will go to the facility or the hospital to provide services. Review of medical files shows that medical and mental health staff members maintain secondary materials and documentation of inmate encounters.

Provision (b): If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the

victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

The interviews with clinical staff revealed inmates have access to unimpeded access to emergency services. The Policy and the written coordinated response plan flow chart provide guidance to staff in protecting inmates and for contacting the appropriate staff regarding allegations or incidents of sexual abuse, including contacting medical and mental health staff. The on-call medical list has the names of medical staff and their emergency contact number. The full-time medical practitioner is generally on-call 24/7 as determined by the interview. Review of the coordinated plan; observations of the interactions among inmates, medical and mental health practitioners; and staff interviews indicated unimpeded medical and crisis intervention services will be available to a victim of sexual abuse.

Provision (c): Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

The Policy and interviews confirmed processes and services are in place for a victim to receive timely access to sexually transmitted infection prophylaxis, where medically appropriate. Additionally, follow-up services as needed will be provided by the facility's medical and mental health staff, according to the interviews with clinical staff.

Provision (d): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The Policy 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 investigation arising out of the incident. This was also confirmed through staff interviews.

Conclusion: Facility Policy revealed emergency services will be provided by medical and mental health staff. The medical and mental health staff interviews revealed they are knowledgeable of actions to take regarding an incident of sexual abuse. It is documented through Policy and understood by the medical and mental health staff that treatment services will be provided at no cost to the victim. Based upon the review and analysis of the available evidence, the Auditor has determined the facility is compliant with this standard regarding access to emergency medical and mental health services.

115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; CCS Policy OPS-300_F-06 Response to Sexual Abuse

Interviews: PREA Compliance Manager; Medical and Mental Health Staff; Inmates who Reported a Sexual Abuse

Provision (a): The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

Policies require that a medical and mental health evaluation and treatment be offered to inmate victims of sexual abuse. According to the interviews, medical and mental health staff members are aware of the Policy mandates. The Policies and interviews support medical and mental health evaluations and treatment will be offered to all inmates who have been victimized by sexual abuse. Interviews with the clinical staff and observations confirmed ongoing medical and mental health care will be provided as appropriate, including assessments and therapy.

Provision (b): The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Interviews with the clinical staff and observations confirmed on-going medical and mental health care will be provided as appropriate and will include but not limited to additional testing and medical services; medication management, if prescribed; individual counseling; trauma group; and referrals as needed. The Policy states that follow-up services will be provided.

Provision (c): The facility shall provide such victims with medical and mental health services consistent with the community level of care.

Facility Policy, staff interviews and observations revealed medical and mental health services are consistent with the community level of care.

Provision (d): Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

Female victims of sexual abuse, while incarcerated, are offered pregnancy tests.

Provision (e): If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

Policy provides that such victims shall receive timely and comprehensive information about

and timely access to all lawful pregnancy-related medical services.

Provision (f): Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

The Policy and interviews ensure that victims of sexual abuse will be provided tests for sexually transmitted infections as medically appropriate. Testing would be done at Kennestone Hospital and follow-up services may be done at the facility, as needed.

Provision (g): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

All treatment services will be provided at no cost to the victim, according to Policy and staff interviews. The health Services Administrator indicated her role in a sexual assault would be to treat any emergent need and attempt to preserve the evidence. She stated she would take vital signs, conduct a health assessment and a mental health assessment with a concern for suicide potential. The Mental health staff person related she would triage the needs and deal with any emergent issues and provide crisis intervention services including a mental health assessment of the inmate and then ongoing counseling as needed. She also indicated she may make a referral to a community mental health provider if needed. The inmate is offered the services of an outside victim advocate as well. These services are provided pursuant to a memorandum of agreement the facility has with liveSAFE Resources who agreed to provide an advocate to accompany the inmate during the forensic exam if requested by the inmate.

Provision (h): N/A. This facility is a jail.

Conclusion: Based upon the review and analysis of the documentation, the Auditor has determined the facility is compliant with this standard regarding ongoing medical and mental health care for sexual abuse victims and abusers.

115.86 | Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

CCADC meets the requirements of this standard based upon the following evidence:

CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires a PREA Post Incident Review of every sexual abuse allegation at the conclusion of all investigations, except those determined to be unfounded within 30 days. CCADC Sexual Abuse Incident Review Team consists of the PREA Coordinator, Classification Supervisor, Shift Supervisor, Captain of the Jail, Mental Health staff, Health Services Administrator, and CID Investigator or OPS Investigator (As applicable). There have been seven criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days excluding only "unfounded" incidents in the past 12 months. Staff interviews confirmed they would document their review on their PREA Post Incident Review form that captures all aspects of an incident.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Reports of findings from sexual abuse incident reviews; Documentation of completed criminal or administrative investigations of sexual abuse.

Interviews: Jail Administrator; PREA Compliance Manager; Incident Review Team member

Provision (a): The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.

The Policy requires the facility to 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 deemed to be unfounded. The Jail Administrator is familiar with the Policy requirements.

Provision (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation.

The Policy requires that the reviews occur within 30 days of the conclusion of the investigation. There have been seven criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days excluding only "unfounded" incidents in the past 12 months. The Jail Administrator confirmed incident reviews would occur within 30 days of the conclusion of an investigation in accordance with facility Policy and the standard.

Provision (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The Policy identifies the incident review team members as Upper Level Management with input from line supervisors, investigators, and medical and/or mental health staff.

Provision (d): The review team shall:

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

The Policy outlines the requirements of the standard for the areas to be assessed by the incident review team. The interview with the Jail Administrator, review of Policy and documentation method confirmed the incident review team is charged with considering the factors identified in this standard provision regarding the results of the investigation, including: considering the make-up and vulnerability of the population such as gang affiliation; whether the inmate identifies as gay, bisexual, transgender, or intersex; other group dynamics; assessment of the area relative to the allegations; and adequacy of staffing.

The Policy requires the meeting to be documented, including recommendations and the document provided to the Jail Administrator. The interview with the Incident Review Team Member confirmed the facility would prepare a report of its findings and any recommendations for improvement when conducting a sexual abuse incident review. He confirmed the team would consider all factors required by the standard.

Provision (e): The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.

The Policy states the agency shall implement the recommendations for improvement or shall document its reasons for not doing so. The Jail Administrator is familiar with this Policy requirement. The form, PREA Incident Review Board, has been developed for documenting the incident review team meeting and it allows for documentation of the considerations of the standard. Additionally, the form provides for recommendations for improvement by the team members.

Conclusion: Based upon the review and analysis of the available documentation, the Auditor has determined the facility is compliant with this standard regarding sexual abuse incident reviews.

115.87 Data collection Auditor Overall Determination: Meets Standard Auditor Discussion CCADC meets the requirements of this standard based upon the following evidence:

CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires the collection of accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. CCADC has a data collection instrument to answer all questions for the U.S. Department of Justice Survey of Sexual Abuse Violence. A review of the annual report revealed it was completed according to this standard.

Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; PREA Annual Report; Survery of Sexual Victimization

Interviews: Jail Administrator; PREA Compliance Manager

Provision (a): The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

The Policy requires the use of a standardized instrument with definitions to collect accurate, uniform data for every allegation of sexual abuse.

Provision (b): The agency shall aggregate the incident-based sexual abuse data at least annually.

The Policy and review of the annual report and data gathering instrument and other documents confirm the facility collects incident-based, uniform data regarding allegations of sexual abuse and sexual harassment. A standardized instrument and specific guidelines and definitions are used to assist in identifying the data.

Provision (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

A review of the PREA Data document demonstrates that it includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the U. S. Department of Justice.

Provision (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

The facility maintains and collects various types of identified data and related documents regarding PREA. The facility collects and maintains data in accordance with Policy directives and CCADC aggregates the data which culminates into an annual report.

Provision (e): The agency also shall obtain incident-based and aggregated data from every

private facility with which it contracts for the confinement of its inmates.

N/A. The agency does not contract for the confinement of its inmates.

Provision (f): Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

The Policy states that upon request, CCADC shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. A request was not made for the previous calendar year.

Conclusion: Based upon the review and analysis of the documentation, the Auditor has determined the facility is compliant with this standard regarding data collection.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires the review of data for corrective action to improve the effectiveness of its prevention, protection and response policies, practices and training. A review of the 2019 Annual Report indicated compliance with the standard and included all of the required elements. The CCADC 2019 Annual Report is posted on the CCADC Website for public review.
	Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; 2017, 2018, and 2019 Annual Reports
	Interviews: Jail Administrator; PREA Coordinator; PREA Compliance Manager

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	The CCADC Policy 08-05-09 2019 PREA and Facility Standard Operating Procedure (SOP) PREA requires that data is collected and securely retained for 10 years. The aggregated sexual abuse data was reviewed, and all personal identifiers are removed. An interview with the PREA Coordinator indicated all sexual abuse data collected would be maintained in compliance with the PREA Standards, for at least 10 years after the date of initial collection, unless federal, state or local law required otherwise.
	Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Historical data since August 20, 2012; Agency Website
	Interviews: PREA Coordinator

115.401 Frequency and scope of audits Auditor Overall Determination: Meets Standard **Auditor Discussion** CCADC meets the requirements of this standard based upon the following evidence: Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA; Agency records; Agency Website Interviews: PREA Coordinator; PREA Compliance Manager Provision (a): During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once. Since August 2016, the Cherokee County Sheriff's Office has ensured one-third of all operated facilities have been audited as evidenced by the Final Audit reports provided on the Agency's website. Provision (b): During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited. Since August 2016, the Cherokee County Sheriff's Office has ensured one-third of all operated facilities have been audited as evidenced by the Final Audit reports provided on the Agency's website. Provision (h): The auditor shall have access to, and shall observe, all areas of the audited facilities. The Auditor was provided complete access to the facility and observed all areas of the facility's buildings and grounds. Provision (i): The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information). All relevant documents were provided to the Auditor upon request. **Provision (m):** The auditor shall be permitted to conduct private interviews with inmates. The facility made space available for private staff and inmate interviews. Provision (n): Inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. Inmates were provided information on the "Notice of the Auditor's Onsite Visit" regarding how to send confidential information to the Auditor.

Conclusion: Based upon the review and analysis of the documentation, the Auditor has

determined the facility is compliant with this standard regarding frequency and scope of audits.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	CCADC meets the requirements of this standard based upon the following evidence:
	A review of the Cherokee County Sheriff Office web page at https://www.cherokeega-sheriff.org/ revealed PREA Audit Reports dating back to 2014 through 2017 for facilities operated by the Cherokee County Sheriff Office are posted and can be downloaded.
	Documentation Reviewed: PREA Pre-Audit Questionnaire; CCADC Policy 08-05-09 2019 PREA; Facility Standard Operating Procedure (SOP) PREA
	Interviews: PREA Coordinator; PREA Compliance Manager

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.)	yes	
	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.)	yes	
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)?	yes	

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 p	roficient
	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.)	yes
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115.21 (a)	Evidence protocol and forensic medical examinations	

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
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.)	yes

115.35 (d)	Specialized training: Medical and mental health care		
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes	
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes	
115.41 (a)	Screening for risk of victimization and abusiveness		
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes	
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes	
115.41 (b)	Screening for risk of victimization and abusiveness		
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes	
115.41 (c)	Screening for risk of victimization and abusiveness		
	Are all PREA screening assessments conducted using an objective screening instrument?	yes	

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

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, 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 degree, 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 degree, 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.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	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.)	yes
	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.)	yes
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.)	yes
	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.)	yes
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.)	yes
	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.)	yes
	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.)	yes

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.)	yes
	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.)	yes
	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.)	yes

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.)	yes
	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.).	yes
	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.)	yes
	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.)	yes
	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.)	yes
	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.)	yes
	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.)	yes
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.)	yes

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 abu	sers
	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	yes
	electronic monitoring data?	
		yes
	electronic monitoring data? Do investigators interview alleged victims, suspected perpetrators, and	yes
115.71 (d)	electronic monitoring data? Do investigators interview alleged victims, suspected perpetrators, and witnesses? Do investigators review prior reports and complaints of sexual abuse	

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

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	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 70 (4)		
115.78 (d)	Disciplinary sanctions for inmates	
115.76 (u)	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?	no
115.78 (d)	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	no

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.)	na
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 victinabusers	ms and
	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.)	yes
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.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse viction abusers	ms and
	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 viction abusers	ms and
	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.)	na
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.)	na	
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes	
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	