

PREA Facility Audit Report: Final

Name of Facility: North Alabama Community Based Facility/Community Work Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/06/2024

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input type="checkbox"/> |
| Auditor Full Name as Signed: Darla P. O'Connor | Date of Signature: 05/06/2024 |

| AUDITOR INFORMATION | |
|-------------------------------------|--|
| Auditor name: | OConnor, Darla |
| Email: | doconnor@strategicjusticesolutions.com |
| Start Date of On-Site Audit: | 03/14/2024 |
| End Date of On-Site Audit: | 03/15/2024 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | North Alabama Community Based Facility/Community Work Center |
| Facility physical address: | 1401 State Highway 20 West, Decatur, Alabama - 35601 |
| Facility mailing address: | 1401 Hwy 20W, Decatur, Alabama - 35601 |

| Primary Contact |
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|--------------------------|--------------------------|
| Name: | Sergeant Leo Hale IPCM |
| Email Address: | leo.hale@doc.alabama.gov |
| Telephone Number: | 2563500876 |

| Warden/Jail Administrator/Sheriff/Director | |
|---|-------------------------------|
| Name: | Errol Pickens |
| Email Address: | errol.pickens@doc.alabama.gov |
| Telephone Number: | 2563500876 |

| Facility PREA Compliance Manager | |
|---|--------------------------|
| Name: | Leo Hale |
| Email Address: | leo.hale@doc.alabama.gov |
| Telephone Number: | O: 256-350-0876 ext. 63 |

| Facility Health Service Administrator On-site | |
|--|-----------------------------------|
| Name: | Valerie Davenport |
| Email Address: | valerie.davenport@yescarecorp.com |
| Telephone Number: | 2563500876 |

| Facility Characteristics | |
|--|-------|
| Designed facility capacity: | 703 |
| Current population of facility: | 655 |
| Average daily population for the past 12 months: | 645 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |

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| Age range of population: | 21-85 adult |
| Facility security levels/inmate custody levels: | Level 2 min community/min out |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 69 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 18 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 85 |

AGENCY INFORMATION

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| Name of agency: | Alabama Department of Corrections |
| Governing authority or parent agency (if applicable): | |
| Physical Address: | 301 South Ripley Street, Montgomery, Alabama - 36130 |
| Mailing Address: | |
| Telephone number: | |

Agency Chief Executive Officer Information:

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| Name: | |
| Email Address: | |
| Telephone Number: | |

Agency-Wide PREA Coordinator Information

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|--------------|-------------------------|-----------------------|---------------------------------|
| Name: | Christy Slauson-Vincent | Email Address: | christy.vincent@doc.alabama.gov |
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Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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:

1

- 115.67 - Agency protection against retaliation

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

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| 1. Start date of the onsite portion of the audit: | 2024-03-14 |
| 2. End date of the onsite portion of the audit: | 2024-03-15 |

Outreach

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| 10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Identify the community-based organization(s) or victim advocates with whom you communicated: | <p>Just Detention International was contacted December 22, 2023. JDI responded they had not had any information from the facility in the past 12 months.</p> <p>ACAR was contact December 22, 2023. ACAR responded that Crisis Services of North Alabama was the service provider to North Alabama Work Release Center</p> <p>Crisis Services of North Alabama was contacted January 4, 2024 and they confirmed they were the service provider for North Alabama Work Release Center and there had been one forensic examination in the past 12 months.</p> |

AUDITED FACILITY INFORMATION

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| 14. Designated facility capacity: | 703 |
| 15. Average daily population for the past 12 months: | 645 |
| 16. Number of inmate/resident/detainee housing units: | 10 |

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| <p>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)</p> |
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Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

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| <p>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</p> | <p>633</p> |
| <p>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</p> | <p>6</p> |
| <p>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</p> | <p>20</p> |
| <p>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</p> | <p>2</p> |
| <p>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</p> | <p>3</p> |

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| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: | 2 |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit: | 5 |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit: | 0 |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit: | 0 |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit: | 3 |
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit: | 0 |

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| <p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p> | <p>The institutional count the first day of the on-site audit was 633. For a facility with a population of 633, the PREA Auditor Handbook indicates that a minimum of fifteen targeted inmate interviews are required. Sixteen inmates from targeted groups were interviewed.</p> <p>At the beginning of each interview the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the inmate’s participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the appropriate protocol questions.</p> <p>The Auditor interviewed the following:</p> <ul style="list-style-type: none"> 0 - transgender inmates 3 - physically disabled inmate. 2- Cognitively disabled inmates. 2 - hearing impaired inmates. 1 - visually impaired 2 - inmates who disclosed abuse in screening. 2 - LEP inmates 0 - reported abuse 4- gay or bisexual inmates 0 - inmates in segregation housing for PREA 0 - youthful offenders. |
| <p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p> | |
| <p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p> | <p>69</p> |

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| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | <p>85</p> |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | <p>18</p> |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | <p>The vast majority of volunteers are serving in a religious services capacity. The contractors are primarily medical and mental health staff.</p> |

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

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| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | <p>15</p> |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply) | <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None |

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| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse? | According to the PREA Auditor Handbook, the auditor was required to conduct a minimum of fifteen random inmate interviews. The Auditor interviewed fifteen random inmates. |
| 56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

The institutional count the first day of the on-site audit was 633. According to the Auditor Handbook with a population of 633, the auditor shall interview a minimum of 15 random inmates and 15 targeted inmates. Fifteen random inmates were interviewed. These were inmates that were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race. During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process.

A total of fifteen formal random inmate interviews were conducted.

As a result of the audit notice posting the Auditor received zero letters from inmates. At the beginning of each interview the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willingly participated in the interview process. All responses were recorded by hand.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

| Targeted Inmate/Resident/Detainee Interviews | |
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| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed: | 16 |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> | |
| 60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol: | 3 |
| 61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol: | 2 |
| 62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol: | 1 |
| 63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol: | 2 |

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| <p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>2</p> |
| <p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>4</p> |
| <p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>The facility reported there were zero transgender or intersex inmates assigned to the facility. Medical personnel stated there were no transgender or intersex inmates assigned to the facility at the time of the on-site audit. During the facility tour the Auditor did not observe any transgender inmates.</p> |
| <p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p> | <p>0</p> |

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| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>At the time of the on-site audit the one individual who reported abuse was not listed on the master inmate roster and no longer at the facility.</p> |
| <p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p> | <p>2</p> |
| <p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |

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| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>The facility reports they do not place inmates in segregated housing for risk of sexual victimization. During interviews the staff working the segregation unit reported the same. At the time of the on-site there were zero inmates in segregation as a result of risk of sexual victimization.</p> |
| <p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p> | <p>The institutional count the first day of the on-site audit was 633. According to the Auditor Handbook with a population of 633, the auditor shall interview a minimum of fifteen targeted inmates.</p> <p>Sixteen targeted inmates were interviewed. The Auditor requested and received a roster of inmates who fell into the targeted categories. The Auditor randomly chose inmates from each applicable category to interview, ensuring diversity in age and race. Once selected each inmate was put on “call-out” with a time to report to the private space designated for interviews.</p> <p>The Auditor interviewed the following:</p> <ul style="list-style-type: none"> 0 - transgender inmates 3 - physically disabled inmates. 2- Cognitively disabled inmates. 2 - hearing impaired inmates. 1 - visually impaired 2 - inmates who disclosed abuse in screening. 2 - LEP inmates 0 - reported abuse 4- gay or bisexual inmates 0 - inmates in segregation housing for PREA 0 - youthful offenders. |
| <p>Staff, Volunteer, and Contractor Interviews</p> | |
| <p>Random Staff Interviews</p> | |
| <p>71. Enter the total number of RANDOM STAFF who were interviewed:</p> | <p>13</p> |

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| <p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p> | <p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p> |
| <p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p> | <p>There were no problems in selecting random staff. Random staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a specialized staff.</p> |
| <p>Specialized Staff, Volunteers, and Contractor Interviews</p> | |
| <p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p> | |
| <p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p> | <p>22</p> |
| <p>76. Were you able to interview the Agency Head?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |

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| 78. Were you able to interview the PREA Coordinator? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 79. Were you able to interview the PREA Compliance Manager? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

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| | <input checked="" type="checkbox"/> Other |
| If "Other," provide additional specialized staff roles interviewed: | Classification Staff Mailroom Staff |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of VOLUNTEERS who were interviewed: | 1 |
| b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other |
| 82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| a. Enter the total number of CONTRACTORS who were interviewed: | 1 |
| b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply) | <input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other |

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| <p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p> | <p>There were no problems in selecting specialized staff. Specialized staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a random staff member.</p> |
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

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| <p>84. Did you have access to all areas of the facility?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
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Was the site review an active, inquiring process that included the following:

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| <p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
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| <p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
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| <p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p> | <p><input checked="" type="radio"/> Yes <input type="radio"/> No</p> |
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88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

The North Alabama Work Release Center (NAWRC) is in northern Alabama, at 1401 Highway 20 West, Decatur, AL. The facility houses adult male inmates with custody levels of minimum out and minimum community custody, as well as Level I and Level II custody classifications.

The facility has a perimeter fence that surrounds the compound. The last major renovation was the addition of Dormitory J in 2008, which expanded capacity by 340 beds. The facility consists of 11 buildings. A security guard assigned to an office building located at the entry gate monitors all incoming and outgoing movement.

There are nine open bay dormitories for inmate housing and one restricted movement dorm with three cells containing four beds in each cell. The main dormitory building also includes shift commander office, captain's office, classification offices, inmate processing and visual search area. Inmates are assigned to the various dormitories based on their custody level and classification that includes regular inmate housing, the Chaplain selects a Veterans Dorm for prior military service member with Honorable Discharged, Work Release/Substance Abuse Program Unit, and an Honor Dorm.

The inmate dormitories have access to common area restrooms with individual showers and toilets that include curtains and partitions for additional privacy to the inmate population. All inmate restrooms have appropriate shower curtains and toilet divider walls that provide privacy.

The medical building includes a nurse's station, inmate job placement office, IPCM's office, Warden Office, inmate intake area and multiple storage rooms.

The inmate recreation building includes a chapel, weight room, two television rooms and the maintenance area.

The facility is convenient to Decatur's job market where the inmates have access to job opportunities in the community. The facility is classified as a minimum out and community

custody facility, as well as Level II custody correctional facility. The facility has a maximum capacity rate of 703 inmates. The number of inmates admitted to the facility during the past 12 months was 727. Six-Hundred-Thirty-Three inmates were reported confined at the facility on the day of the audit. The facility has 69 staff, 85 volunteers, and 18 contractors. The facility had PREA signage posted. The signs were visible at the entrance point, in the food service area, every dormitory, and above the inmate telephones, etc.

The auditor also observed a "PREA box" located in buildings. This box is for inmates and staff to submit PREA related complaints/ concerns.

The Auditor observed the facility has multiple vans, which are used to transport inmates to work sites throughout the Decatur, Alabama area daily for a substantial inmate work program in the community.

The facility has sufficient camera coverage which was made more robust by security mirrors enhancing inmate supervision.

The Auditor was given unimpeded and complete access to all areas of the facility.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

Yes

No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Personnel and Training Files:

The PAQ reflects 69 facility staff. Names were chosen randomly from the staff roster to select staff records for review. The records were selected by randomly choosing the records of new hires, newly promoted employees, and seasoned employees. All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable. These documents were reviewed off site after hours and returned to the facility the next morning.

Inmate Records:

There were inmate names, chosen randomly from the master roster, with varying arrival dates to determine the records to be reviewed. Of the 50 records reviewed:

PREA Information at Intake - 50 were given PREA information within 24 hours of arrival at the facility. This was confirmed through a signed PREA General Information Form, that they had received PREA information.

72-hour Risk Assessment - 50 had a risk assessment within 24 hours of arrival at the facility. This was confirmed by the risk assessment instrument.

30-day Comprehensive PREA Education - 50 were provided comprehensive PREA Education within 30 days of arrival. This was confirmed by the signed Inmate Awareness Acknowledgement Form.

PREA 30-day Re-Assessment - 50 reassessments were conducted within 30 days of arrival. This was confirmed by the PREA Reassessment form, ADOC Form 454-K- August 1, 2016.

These documents were reviewed off site after hours and returned to the facility the next morning.

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, the facility reported one

allegations of sexual abuse and seven allegations of sexual harassment in the past twelve months.

The Auditor was provided and reviewed one PREA sexual abuse allegation/investigation file and seven sexual harassment allegations/investigations files.

The file was reviewed using the PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case# / ID
- Date of Allegation
- Date of Investigation
- Staff-or-Inmate-on-Inmate
- Sexual Abuse or Sexual Harassment
- Final Disposition
- Is Disposition Justified?
- Investigating Officers
- Notice Given to Inmate

Investigation Files:

Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review, it was referred for prosecution. The case remains in the prosecutorial process.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were

investigated administratively. After investigation all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.

The PAQ indicated there were one forensic medical examination completed in the past twelve months. These examinations were conducted by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was offered to the inmate who had a SANE examination. This was confirmed by the IPCM as well as SANE personnel.

The institution staff I encountered were cooperative. Their attitudes indicated a culture of awareness of the significance of sexual safety.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

| | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual abuse | 1 | 0 | 0 | 1 |
| Staff-on-inmate sexual abuse | 0 | 0 | 0 | 0 |
| Total | 1 | 0 | 0 | 1 |

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

| | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|---|------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual harassment | 4 | 0 | 4 | 0 |
| Staff-on-inmate sexual harassment | 3 | 0 | 0 | 3 |
| Total | 7 | 0 | 4 | 3 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

| | Ongoing | Referred for Prosecution | Indicted/ Court Case Filed | Convicted/ Adjudicated | Acquitted |
|--------------------------------------|---------|--------------------------|----------------------------|------------------------|-----------|
| Inmate-on-inmate sexual abuse | 0 | 1 | 0 | 0 | 0 |
| Staff-on-inmate sexual abuse | 0 | 0 | 0 | 0 | 0 |
| Total | 0 | 1 | 0 | 0 | 0 |

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 0 | 1 | 0 |
| Staff-on-inmate sexual abuse | 0 | 0 | 0 | 0 |
| Total | 0 | 0 | 1 | 0 |

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

| | Ongoing | Referred for Prosecution | Indicted/ Court Case Filed | Convicted/ Adjudicated | Acquitted |
|---|---------|--------------------------|----------------------------|------------------------|-----------|
| Inmate-on-inmate sexual harassment | 0 | 0 | 0 | 0 | 0 |
| Staff-on-inmate sexual harassment | 1 | 1 | 0 | 0 | 0 |
| Total | 1 | 1 | 0 | 0 | 0 |

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 0 | 0 | 4 | 0 |
| Staff-on-inmate sexual harassment | 1 | 1 | 1 | 0 |
| Total | 1 | 1 | 5 | 0 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

| | |
|--|---|
| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled: | 1 |
|--|---|

| | |
|---|---|
| <p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p> |
| <p>Inmate-on-inmate sexual abuse investigation files</p> | |
| <p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p> | <p>1</p> |
| <p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>Staff-on-inmate sexual abuse investigation files</p> | |
| <p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p> | <p>0</p> |
| <p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |

| | |
|---|--|
| <p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |
| <p>Sexual Harassment Investigation Files Selected for Review</p> | |
| <p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>7</p> |
| <p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p> |
| <p>Inmate-on-inmate sexual harassment investigation files</p> | |
| <p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>4</p> |
| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |

| Staff-on-inmate sexual harassment investigation files | |
|--|--|
| 111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled: | 3 |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files. | There was one sexual abuse allegation in the past 12 months. There were 7 sexual harassment allegations in the past 12 months. The Auditor reviewed all records for the past 12 months. |
| SUPPORT STAFF INFORMATION | |
| DOJ-certified PREA Auditors Support Staff | |
| 115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | <input type="radio"/> Yes <input checked="" type="radio"/> No |

Non-certified Support Staff

| | |
|---|---|
| <p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-on-site through the post-on-site phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
|---|---|

AUDITING ARRANGEMENTS AND COMPENSATION

| | |
|--|---|
| <p>121. Who paid you to conduct this audit?</p> | <p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p> |
|--|---|

| | |
|--|--|
| <p>Identify the name of the third-party auditing entity</p> | <p>Corrections Consulting Services</p> |
|--|--|

| Standards | |
|--|--|
| Auditor Overall Determination Definitions | |
| <ul style="list-style-type: none"> • 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 | |
| <p>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.</p> | |

| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
|---------------|---|
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Pamphlet, Inmate Awareness in English, and Spanish • ADOC Organizational Chart • ADOC, PREA Director Qualifications • ADOC, PREA Compliance Manager Qualifications and Training • Standard Operating Procedure (SOP) #454-1 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Institutional PREA Compliance Manager (IPCM) |

- Agency PREA Director (PD)

During the interview process, the IPCM indicated:

- There was sufficient time to complete the required PREA responsibilities.
- The IPCM has no other responsibilities other than to ensure the institutions compliance with the PREA standards and has the authority to make any changes needed to address PREA issues.

Through the interview process the agency PD confirmed the IPCM has no other responsibilities other than to ensure the institutions compliance with the PREA standards and has the authority to make any changes needed to address PREA issues.

Provision (a)

The agency has policies and procedures relative to this provision. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, Section II, p. 1, indicates a zero-tolerance policy against sexual abuse, harassment, and sexual misconduct. Any sexual conduct, whether inmate-on inmate or staff-on-inmate, whether consensual or coerced, is prohibited.

Section III of ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, and ADOC Male Inmate Handbook, dated September 25, 2017, lists the definitions describing prohibited behaviors in relation to sexual abuse and sexual harassment. Policy language is specific in providing the definitions of substantiated, unsubstantiated, and unfounded allegations, as well as associated sanctions.

Additionally, policy language outlines staff responsibilities, procedures for the prevention of, response to, and the reporting and investigation of sexual abuse and sexual harassment. The policy is consistent with the PREA standards.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section E, 1 - 10, identifies the roles and responsibilities of the agency PD, and relate directly to the implementation, management and monitoring of the ADOC's compliance with PREA Standards, including collaboration with the various levels of management ranging from the Warden/Director to the Associate Commissioner levels, as well as the collaboration with the ADOC Legal Division. The reviewed policy is consistent with the PREA Standards and outlines the agency's approach to sexual safety.

The ADOC PD is classified at the Director level as confirmed through a review of the agency organization chart. The PD has regular contact with the facilities throughout the state through site visits, emails, and direct conversations with the twenty-six

| | |
|--|--|
| | <p>assigned Institutional PREA Compliance Managers (IPCM) who are assigned to various locations, as well as the twenty-six back-up IPCM's. These additional managers ensure the PD has sufficient coverage at each ADOC facility and allows her sufficient time to fulfill her varied responsibilities and ensure PREA compliance.</p> <p>Provision (c)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, establishes, identifies, and outlines the roles and responsibilities of the IPCM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the IPCM to coordinate the institutions efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards and outlines the agency's approach to sexual safety.</p> <p>The facility IPCM is under the supervision of the agency PREA Director. This was confirmed by a review of the institutional organizational chart.</p> <p>Conclusion</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses zero tolerance of sexual abuse and sexual harassment: PREA coordinator.</p> |
|--|--|

| | |
|---------------|--|
| 115.12 | Contracting with other entities for the confinement of inmates |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Contract with Alabama Therapeutic Education Facility (ATEF) <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Contract Administrator <p>During the interview process, the agency contract administrator confirmed all contracts to hold ADOC inmates, without exception, have the PREA requirement as part of the agreement.</p> <p>Provision (a)</p> |

Pre-Audit Questionnaire (PAQ) revealed there was one contract for the confinement of ADOC inmates.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section D, states the ADOC general Counsel shall be responsible for ensuring that contracts for confinement of inmates include a provision indicating to the contracting entity its obligation to comply with the PREA standards and the ADOC's monitoring of such compliance.

ADOC Inmate Housing Agreement with Alabama Therapeutic Education Facility (ATEF) outlines the ATEF responsibility to adhere to the PREA standards. It states in part "pursuant to 28 C.F.R. Part 115.12, ATEF is obligated to adopt and comply with all PREA standards, and the ADOC shall monitor the ATEF for compliance."

ADOC Contract with Alabama Therapeutic Education Facility (ATEF), states, "Vendor (ATEF) shall comply with Alabama Code Section 14-11-31, as well as 28 C.F.R. Part 115, the Prison Rape Elimination Act ("PREA"). The ADOC has a Zero Tolerance Policy toward all forms of custodial sexual misconduct, sexual abuse, and sexual harassment. See Administrative Regulation 454, Inmate Sexual Assault and Harassment Awareness (Prison Rape Elimination Act (PREA)). Any type of conduct - including suspected conduct - that falls within the context of custodial sexual misconduct/sexual abuse, as defined by either the State or Federal laws referenced above, shall be reported immediately to the Warden of Kilby Correctional Facility or his/her designee for conduct involving male Inmates, or the Warden of Tutwiler Correctional Facility or his/her designee for conduct involving female Inmates, as well as the ADOC's PREA Director or designated PREA Contract Monitor. Pursuant to 28 C.F.R. Part 115.12, Vendor is obligated to adopt and comply with all PREA standards, and the ADOC shall monitor Vendor for compliance consistent with the compliance conditions set forth above. Vendor shall provide reasonable access to the PREA Contract Monitor; provide relevant documentation as requested; require and provide training of all of its employees, agents, or contractors; and provide a Report from any PREA audit, which shall be performed by an independent, DOJ certified auditor."

Provision (b)

See Provision (a) for details regarding this provision.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses contracting with other entities for the confinement of inmates.

| | |
|---------------|--|
| 115.13 | Supervision and monitoring |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Form 454-J, Annual PREA Staffing Plan Review
- ADOC Form 454-G, Log of Unannounced Rounds
- Copies of Deviation Log
- Facility Blueprint/Layout
- Facility Staffing Plan Checklist

Interviews with the following:

- Agency PREA Director (PD)
- Warden
- Institutional PREA Compliance Manager (IPCM)
- Intermediate-or-Higher Level Facility Staff
- Random Staff

During the interview process, the PD indicated the agency has proactively implemented several initiatives and measures to increase security staffing in facilities agency wide.

1. February 2023 - the agency hired a new Deputy Commissioner of Administrative Services
2. March 2023 - the agency implemented pay increases and new in-hire rates for security classes. The COT class is the one that was intended to increase staffing, the higher-level classifications were adjusted in accordance. The COT went from pay grade 66 (\$33,381.60-\$55,855.20) to pay grade 68 (35,092.80-\$58,692.00) with an in-hire rate of step 16 (then \$50,712.00 annually). The agency has increased the number of On Site and Meet & Greet events statewide. There were originally 19 scheduled for 2023 (1-2 per month) and this has been amended to 91 total events for the year.
3. April 2023 - the agency implemented compression pay for existing security personnel. This gave employees in the classifications a 4-step pay increase to reduce the compression caused by bringing new employees in at a higher rate. The agency implemented Applicant Pro applicant tracking system and the use of Indeed to post job listings.
4. May 2023 - the agency requested and received approval from APOSTC to allow academy attendees until week 6 to pass the physical requirements thus allowing more time to meet APOST PAAT standards.
5. June 2023 - the agency hired a new Personnel Director
6. July 2023 - the agency streamlined the CSG hiring process and requested a review of pay ranges for Canine classes.
7. August 2023 - the agency hired a new Hiring manager to manage the hiring team and provide strategic planning for the hiring processes agency wide. Saturday hiring events were added to the schedule to reach more candidates.

8. September 2023 - the agency began promoting eligible Correctional Security Guards to new Correctional Security Guard, Senior classification. The agency also began combining On Site and Meet & Greet events into "Hiring Events" to encompass all types of candidates.
9. October 2023 - the agency created Correctional Officer hourly classification in order that part-time, retired security personnel could maximize the newly legislated earnings threshold of \$52,000 annually.
10. November 2023 - the agency put in place a process that enables ADOC Personnel to pay for and acquire birth certificates for Alabama born candidates not in possession of an original certified birth certificate (APOSTC requirement) thereby eliminating a common barrier to hiring. The agency also approved proctors for the ACT/WorkKey testing thereby eliminating another common barrier to hiring. ADOC also approved to pay for testing, previously paid for by candidates.
11. December 2023 - the agency hired a new staff member to process security registers to ensure security promotions and rehires are processed timely.

During the interview process, the Warden and the IPCM indicated they are both responsible for reviewing the staffing levels and how they affect the inmate programming, as well as any changes or modifications to the video monitoring. They also review other concerns which include physical plant configuration, internal or external oversight bodies, inmate population composition, placement of supervisory staff, line-staff needs and any prevalence of substantiated or unsubstantiated incidents of sexual abuse. Additionally, the Warden stated during his regular staff meeting, staffing plan compliance and any deviations from the staffing plan is a frequent topic of discussion.

According to the PAQ there are currently sixty-two Shift Uniform Security Officers out of the eighty-nine allotted for the facility. There were five new staff hired in the past twelve months.

There was one interview conducted with intermediate or higher-level staff. This interviewee affirmed the higher-level staff are required to make unannounced rounds and document them. During random informal conversations with staff, the staff stated the supervisors and higher-level staff conduct unannounced rounds and document them in the logbook. This was validated by the Auditor through a review of the logbook.

Through the interview process, it was indicated supervisors tour their units and areas regularly throughout each shift, converse with staff of all levels as well as inmates, and audit, review, and sign logbooks. During the time, the Auditor was on-site; managers and supervisors were observed walking working in various capacities throughout the facility.

During the interview process, random staff verbalized the prohibition of staff alerting each other when a supervisor is making their rounds.

Provision (a)

Pre-Audit Questionnaire (PAQ) indicated the facility does have a staffing plan and it is reviewed at least annually.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, D, 1, indicated the Warden will assist in the development and will make his/her best effort to comply with the staffing plan. The plan will provide for adequate levels of staffing and where applicable, video monitoring to protect inmates against sexual abuse.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, D, 2, requires the PD to meet with the Warden annually to discuss the need for any adjustments that need to be made to the staffing plan, video monitoring systems and other monitoring technologies. This is documented on the ADOC Form 454-J, Annual PREA Staffing Plan Review.

The ADOC Form 454-J, Annual PREA Staffing Plan Review requires the staffing analysis to include:

- Accepted detention and correctional practices.
- ADOC and the facility determination of which duties will be handled by facility staff, ADOC staff or outside agencies.
- Any findings of inadequacy from any investigative agencies within ADOC.
- Any findings of inadequacy from internal or external oversight bodies
- The Camera Management Plan and all components of the facility's physical plant.
- The composition of the inmate population.
- The number and placement of supervisory staff.
- Institutional programming and options for supervision of inmates.
- Facility specific relief-factors
- Any applicable state or local laws, regulations, or standards; and
- The prevalence of substantiated or unsubstantiated incidents of sexual abuse and sexual harassment.

Additionally, policy dictates the facility must ensure all relieved posts are staffed at the times specified in the staffing plan and all gender-restricted posts, if any, are posted by male staff only. When it is necessary to close a post(s) due to insufficient staffing, a decision must be approved by the Warden or Captain.

The Auditor reviewed the most recent annual PREA staffing plan. The plan was comprehensive and addressed each of the bullet items required according to Provision (a). On an annual basis, quality assurance audits are conducted to ensure compliance with the established staffing model. The staffing plan was predicated upon an inmate population of 702. The average daily number of inmates during the time of the audit was 633.

Provision (b)

The facility has established a staffing plan, which is predicated on the daily average

of 702 inmates. In the event a mandatory post is vacant, the post is filled with overtime staff or staff re-directed from non-mandatory posts. It is the watch commander's responsibility to document these instances.

The PAQ, indicated the most common reasons for deviations from the staffing plan in the past twelve months:

1. Staffing shortage
2. Medical transfers
3. Transfers to other facilities
4. Security staff call ins
5. Emergency transfers
6. Staff leaving early (sick)

The Auditor did not find any occurrence when inmate education was discontinued due to limited staff coverage in the past twelve months.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, Section D, requires the staffing plan review to be completed in consultation with the PREA Director (PD) and that the PD receive a copy of the PREA Compliant Staffing Plan. The Auditor requested and was provided a copy of the 2020 ADOC Form 454-J, Annual PREA Staffing Plan Review that was forwarded to the ADOC PD. The staffing plan reviews had been completed by the Warden as required. The reviews discussed the staffing plan, video monitoring and the resources required to adhere to the staffing plan.

Additionally, this policy requires that an internal audit of the staffing plan be conducted on an annual basis. This assessment is an extensive review of all areas of the facility to ensure adequate staffing levels are present where inmates may be present. Justification for the need for additional staff or modifications to the facility, to include the deployment of video monitoring equipment, is addressed by the committee on an annual basis. The annual review of the staffing plan includes facility and department management level staff which include the PD, Warden, IPCM, and Captain.

The facility has a minimum staffing requirement. In the event a mandatory post is vacant for whatever reason, the post is filled with overtime staff or staff redirected from non- mandatory posts. When it was necessary to close a post(s) due to insufficient staffing, the decision was approved by the Warden or Captain.

The facility has sixty-two Shift Uniform Security Officers assigned to the facility.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, C, mandates that intermediate level or higher-level supervisors conduct and document unannounced rounds on all shifts.

These rounds are documented on the Shift Report, including the date, time and person's name who made the rounds. In addition the ADOC Form 454-G, Log of Unannounced Rounds, is required to be completed for each shift and submitted to the IPCM. This report documents the required unannounced rounds and the PREA Hotline check conducted once per shift. The Auditor reviewed thirty days of these reports through the document review process. The Auditor also reviewed the Shift reports and noted consistent entries by supervisors on all shifts.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, C, indicates the staff are prohibited from alerting other staff when these rounds are occurring, barring legitimate operations of the facility.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility does meet every provision of the standard which addresses supervision and monitoring.

RECOMMENDATION:

Considering the facility is currently staffed at 69% with 27 vacant correctional officer positions, the Auditor strongly recommends the facility/agency continue their initiative-taking course of contracting with outside agencies to provide Correctional Officer support until staffing levels are sufficient for the safety and security of the institution, inmates, and staff.

| 115.14 | Youthful inmates |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 <p>Observations during on-site review</p> <p>During the facility tour the Auditor did not observe any youthful offenders.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden |

- Institutional PREA Compliance Manager (IPCM)

During the interview process the Warden and IPCM confirmed the facility does not house youthful offenders. At the time of the on-site audit there were zero youthful offenders assigned to the facility.

Provision (a)

The PAQ indicated the facility does not house youthful offenders. The IPCM and the Warden confirmed this assertion.

A review of the master inmate roster showed zero inmates with a birth date later than 2006.

Provision (b)

According to the PAQ, the facility does not house youthful offenders.

Provision (c)

According to the PAQ, the facility does not house youthful offenders.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding youthful inmates.

| 115.15 | Limits to cross-gender viewing and searches |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Complete roster of facility inmates • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Administrative Regulation #336 • ADOC Form 302-A Incident Report • ADOC PREA Director Transgender Risk Assessment Memo, dated February 20, 2020, • Training records for cross-gender and transgender searches |

Observations during on-site review

During the facility tour, opposite gender staff were observed entering the housing units and announcements of their presence were made. The Auditor was also announced by staff when entering the inmate housing and restroom areas as she is of opposite gender.

Interviews with the following:

- Random Staff
- Random Inmates
- Targeted Inmates

During the interview process, random staff members were questioned about cross gender search practices. All staff recalled having the training specific to this and reported that cross gender strip searches or cross gender body cavity searches do not occur at this facility.

All staff interviewed reported opposite gender staff announcements are made when entering the housing units.

During the interview process, random staff indicated there are always sufficient male staff members available to conduct any searches needed, and that male staff would be diverted to address the issue if needed.

Each inmates interviewed stated female staff announce their presence before entering the bathroom area and wait a period after announcing before entering. Every inmate reported female staff announce their presence when entering the housing unit. All inmates interviewed confirmed they can dress without being viewed by staff of the opposite gender.

All staff members interviewed recalled having this specific training and reported cross gender strip searches or cross gender body cavity searches do not occur at the facility. In addition, the interviewed staff indicated specifically that no searches are conducted for the sole purpose of identifying inmate genital status.

All inmates interviewed confirmed female staff do not conduct cross gender searches.

Provision (a)

The PAQ indicated the facility had zero cross-gender strip or cross-gender viewed body cavity searches in the past twelve months.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, Section E, 1, states that employees/ staff members shall not conduct cross-gender strip or visual cavity searches, except in exigent circumstances or by medical practitioners. The reviewed policy is consistent with the PREA standards.

ADOC Administrative Regulation #336, Operations, regarding Searches, dated

February 8, 2016, p. 4, Section F, Number 3, states staff shall not conduct cross gender unclothed searches or cross gender visual body searches except in exigent circumstance. The reviewed policy is consistent with the PREA standards.

ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 5, Section F, Number 4, states all cross gender unclothed searches or cross gender visual body cavity searches shall be documented. The reviewed policy is consistent with the PREA standards.

A review of the staff training records confirmed all staff had been trained in cross gender searches.

Provision (b)

The facility is a male facility.

Provision (c)

ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 5, Number 4 indicates that all cross gender unclothed searches and cross gender visual body cavity searches be documented.

ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 6, Number 11, indicates that such searches are to be documented on the ADOC Form 302-A Incident Report. The reviewed policy is consistent with the PREA standards.

At the time of the on-site audit there were zero transgender inmates assigned to the facility. Consequently, zero transgender inmates were interviewed, regarding searches.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, Section E, 3 states each ADOC facility shall implement procedures that enable inmates to shower, perform bodily functions and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitals, except in exigent circumstances or when such viewing is incidental to routine cell and/or dorm checks. Such procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit. The reviewed policy is consistent with the PREA standards.

The facility has ten housing units.

1. Dormitory A is restrictive housing and has three cells that have four beds in each cell for a capacity of 12.
2. Dormitory B is an open bay housing unit with a capacity of 108.
3. Dormitory C is an open bay housing unit with a capacity of 32.
4. Dormitory D is an open bay housing unit with a capacity of 32 in D-1 and 22 in

D-2.

5. Dormitory E is an open bay housing unit with a capacity of 68.
6. Dormitory F is an open bay housing unit with a capacity of 6.
7. Dormitory G is an open bay housing unit with a capacity of 48.
8. Dormitory H is an open bay housing unit with a capacity of 15.
9. Dormitory I is an open bay housing unit with a capacity of 44.
10. Dormitory J is an open bay housing unit with a capacity of 340.

All cells have a sink and toilet inside the cell with the shower stall being separate and outside the cell. Privacy in the showers was acceptable, as was the toilet inside the cell. The open bay dormitory housing units have communal bathrooms located on one side of the dormitory. In the communal bathrooms, privacy is acceptable and is such that it would be difficult for opposite sex staff to easily observe an inmate in the shower or on the toilet.

At the time of the on-site audit there were zero transgender inmates assigned to the facility. Consequently, zero transgender inmates were interviewed regarding perform bodily functions and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitals.

Provision (e)

ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 5, Number 6 indicates staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p.15, Section E, 4 indicates staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

At the time of the on-site audit there were zero transgender inmates assigned to the facility. Consequently, zero transgender inmates were interviewed regarding, staff had not searched or physically examined them for the sole purpose of determining the inmate's genital status.

Provision (f)

The Auditor reviewed PREA training documentation of sixty-nine members that occurred in 2023. The Auditor verified each signature on the sign-in sheet correlated to an existing staff member, ensuring the staff had received the required training. All participants also signed their acknowledgment of all training materials. Training topics included appropriate search techniques, specific to cross-gender pat searches and searches of transgender and intersex inmates. Additional training documents provided direction to staff on proper documentation practices when cross gender searches were conducted.

Conclusion:

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| | Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding limits to cross-gender viewing and searches. |
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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) and supporting documentation provided. · Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 <ul style="list-style-type: none"> • ADOC MOU with Alabama Institute for the Deaf and Blind • Inmate Receipt of PREA/Acknowledgment (Disabled, low-Vision and Deaf Only) • Low Functioning Information/Materials Used • Transcript explaining Google Translate • IPCM Memo, Access to interpreter, undated <p>Observations of PREA poster locations during on-site tour of facility</p> <p>During the tour, the Auditor observed the NO MEANS NO PREA poster was prominently displayed in each housing unit, work area, hallways, as well as numerous other areas throughout the facility in both English and Spanish. Additionally, the IPCM had created PREA bulletin boards throughout the facility.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head or Designee • Random Staff • Institutional PREA Compliance Manager (IPCM) • Inmates with disabilities or LEP <p>During the interview with the Agency Head designee, shared the ADOC has established procedures to provide inmates with disabilities or inmates who are Limited English Proficient (LEP), the opportunity to participate in PREA reporting process through several avenues such as, Google Translate, staff interpreters, outside service providers via an MOU.</p> |

During the interview process the IPCM indicated there had not been any instances in the past twelve months when an interpreter service was required.

Of the random staff interviewed, all recalled the process of how to utilize Google Translation for interpretation services. Most indicated that in the event translation is required, they would try to find a staff member to provide translation and then contact the shift supervisor before using Google Translate.

During the interview process physically disabled inmates, including vision impaired inmates, indicated they felt safe. They felt their needs were being met. None of the inmates interviewed reported feeling vulnerable to sexual abuse or sexual harassment due to their disability. None of the inmates reported any concerns with safety or security.

Provision (a)

The PAQ indicated the ADOC has established procedures to provide disabled inmates and limited English proficient inmates with equal opportunity to participate in and benefit from all aspects of the agency's effort to prevent, detect and respond to sexual abuse and sexual harassment.

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, c, states the IPCM shall provide all inmates accessible education formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills or otherwise disabled, and not rely on inmate for this service.

The ADOC has an existing Memorandum of Understanding (MOU) with the Alabama Institute for the Deaf and Blind for translation and assistance services for those effected inmates, as verified by the Auditor.

The IPCM Memorandum, Access to interpreter, undated states Access to interpretation services in not only provided by the Alabama Institute for the deaf and blind but all Institutional PREA Compliance Managers have access to Google Translate services though the internet. With Google Translate services the IPCM's have access to interpretation services in emergency situations. Below is the link to Google Translate services. <https://translate.google.com/>. All instructions for this service are provided on screen.

The facility can also utilize the Google Translate Services (<https://translate.google.com/>) to address any translation needs for the inmates of the facility. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week. Access to this service can be facilitated through the respective watch commander.

The Auditor reviewed written documents, training materials, as well as PREA brochures, which are provided in both English and Spanish to the inmate population.

Provision (b)

The PAQ indicated the agency has established procedures to provide inmates with limited English proficiency 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 ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, items a-d, denote numerous items relative to ensuring each inmate is given information in verbal and written form, and that all information regarding ADOC's PREA policy is understood by the inmate.

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 2, items a - d, dictates inmate PREA education information will include: Prevention of sexual abuse and harassment; self-protection; methods of reporting; and treatment and counseling availability.

As mentioned in provision (a), the ADOC has an established MOU with the Alabama Institute for the Deaf and Blind. The facility also employs an ADA Coordinator who is charged with coordinating training and educational materials for all ADA inmates.

Provision (c)

The PAQ indicates the agency policy 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, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, c, addresses the prohibition of using other inmates for translation services.

The ADOC requires that only professional interpreters or translation services, including sign language, are available to assist inmates in understanding PREA policy, how to report allegations, and/or participate in investigations of sexual misconduct. The policy advises inmates are not authorized to use interpretation/translation services from other inmates, family members or friends for these purposes.

The PAQ indicates in the past twelve months, zero inmate interpreters participated in PREA related situations.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding inmates with disabilities and inmates who are limited English proficient.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
- ADOC Administrative Regulation #216
- Personnel records review for current employees
- Employee background checks
- Application/Pre-Employment Questionnaire

Interviews with the following:

- Administrative (Human Resources) Staff

During the interview process the HR Director indicated:

- The ADOC requires background checks on all new hires, promotions, and existing staff every five years.
- The Divisional HR Department is responsible for tracking the due dates of all staff requiring their five-year criminal history check, ensuring they are completed as required.
- The ADOC has a centralized database that tracks the completion of all background checks and tracks the due dates of the five-year criminal history background check.
- Potential hires are required to fill out the personnel documents, which require the disclosure of the standard required items.
- The ADOC takes a highly active stance with the requirements of the PREA standards and have developed a very comprehensive system of tracking to ensure that all the required history checks are completed for pre-hires, promotions, and five-year reviews.
- A condition of staff employment is that any arrest activity must be reported through the respective employer reporting structure. Additionally, any information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be provide up on request.

Provision (a)

The PAQ indicated the facility has sixty-nine total staff with five new hires in the past twelve months. Further, they reported eighteen contractors and eighty-five volunteers who have contact with inmates.

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 12, V, A, 4, a, declares that ADOC agency policy prohibits the hiring or promotion of an employee or 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.
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.

The Auditor reviewed a random sampling of staff records. Each of the records reviewed contained all items required by the standard, which included documentation and Criminal History Check information. The Auditor was able to verify all records reviewed contained all items required by the standard, including PREA documentation and verification of the completed criminal history checks.

Provision (b)

ADOC Administrative Regulation #216, regarding Background Investigations, dated December 7, 2015, p. 2, Section V, B, states the agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist service of any contract, who may have contact with inmates.

The Auditor was provided and reviewed a current listing of all facility staff that reflected the dates of their last criminal background records check and their next scheduled five-year criminal check.

Provision (c)

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 12, V, 4, b, indicates that before hiring a new employee or contractor, the ADOC Personnel Division or designee shall:

1. Conduct a criminal background records check,
2. Make its best efforts to contact all prior institutional employers regarding substantiated allegations of sexual abuse or any resignation during a period of sexual abuse investigation.
3. Ask potential employees and contractors about previous misconduct described in Paragraph V, A, 4, a of this regulation: (refer to AR 216 Background Investigations and ADOC Form 216-B, PREA Compliance).
4. Apprise potential employees and contractors that false information or material omission regarding such misconduct shall be grounds for termination and that they have a continuing duty to disclose such conduct.

In the preceding twelve months there were five persons hired who may have contact with inmates who had a criminal background completed. The Auditor conducted a review of the criminal history checks. These records contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks.

Provision (d)

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 12, V, A, 4, b, (1), indicates that before hiring a new employee or contractor, the ADOC Personnel Division or designee shall conduct a criminal background record check.

The PAQ indicated there are eighteen contractors and eighty-five volunteers who have contact with inmates.

Additionally, the PAQ indicated during the past twelve months there was one contract where criminal background record checks were conducted on staff covered in the contract who might have contact with inmates. Documentation indicating the contractors and volunteers have current criminal background history checks was provided to the auditor for review.

Provision (e)

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, V, A, 4, f, requires that the ADOC Personnel Director conduct a criminal background record check every five years on all current employees and contractors.

The Auditor conducted a review of the requested personnel records and verified all the records reviewed contained all items required by the standard, including the PREA documentation, verification of the completed criminal history checks, and the three questions listed under Provision (a).

Provision (f)

The Auditor reviewed form ADOC 216-B which is provided to all applicants to the ADOC. This form is the Prison Rape Elimination Act (PREA) Compliance that is required to be completed by all applicants. The form has several questions, as required in Provision (a) of this standard, related to whether the candidate has ever been accused, charged, or investigated for any type of sexual misconduct, inappropriate sexual activity, sexual abuse, or sexual harassment.

Provision (g)

The ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, V, A, 4, b, (2), states that before hiring a new employee or contractor the ADOC Personnel Division or designee shall, apprise the potential employee and contractor that false information or material omissions regarding such misconduct shall be ground for termination and that they

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| | <p>have a continuing duty to disclose such conduct.</p> <p>Provision (h)</p> <p>Policy states unless prohibited by law, the ADOC will 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 an employee has applied to work. The HR Director confirmed this information.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding hiring and promotion decisions.</p> |
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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • Facility Schematic (Blueprint/Layout of Facility) <p>Observations during on-site review</p> <p>The Auditor conducted a comprehensive tour of the facility. Since the last audit there has not been any substantial expansions or additions to the facility.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head or designee • Warden <p>Through the interview process the Agency Head Designee and the Warden both advised that any construction, renovation, or modification would be done with full consideration of all PREA standards. They both advised there are meetings that would be held regarding any building or construction considerations and that safety and cameras, or other technologies would be discussed and conserved at such meetings. During these meetings the executive staff would meet with all key supervisors and managers to discuss any pertinent issues, such as Data/Reporting issues, Grievances, Disciplinary Reviews, Video Summary Reviews, Use of Force Incidents, as well as the</p> |

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| | <p>analysis of key data such as overtime, leave time morale, etc.</p> <p>Provision (a)</p> <p>The PAQ indicates the facility has not acquired any new facilities or made substantial expansions or modifications to the existing facility since the last PREA audit.</p> <p>Provision (b)</p> <p>The PAQ indicates the facility has not installed or updated the video monitoring system, electronic surveillance system or other technology since the last PREA audit. Executive staff agreed that cameras effectively help in security, as well as assist in mitigating and preventing sexual abuse and sexual harassment.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding upgrades to facility and technology.</p> |
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| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Review:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Administrative Regulation #300 • Memorandum of Understanding Between ADOC and ACAR • Evidence Protocol/Investigations/Medical National Protocol for Sexual Assault Medical Forensic Examinations • SANE Centers/Rape Crisis Centers Regional List <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Random Staff • SAFE/SANE Staff • Institutional PREA Compliance Manager (IPCM) <p>Through the interview process random staff affirmed:</p> |

- Their understanding of the process and rules of evidence should an inmate report alleged sexual abuse.
- Articulated the basic preservation of evidence component of both victim and abuser. They were also able to explain their responsibilities up to the point when they transfer responsibility to either investigative or medical staff.

Through the interview process a SAFE/SANE representative confirmed the exams are provided at no cost to the inmate and that all forensic services are provided when the inmate is presents at Crisis Services of North Alabama #256-716-4052. Forensic nurses (SAFE/SANE) are available twenty-four hours a day, seven days a week.

During the interview process the IPCM indicated in the past twelve months there was one inmate transported for SAFE/SANE services.

During the interview process the IPCM indicated advocacy services are offered through contract and are built into the forensic exam process. The IPCM stated that all requirements of PREA have been incorporated into the contract. Prior to the examination, the inmate meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through Crisis Services of North Alabama #256-716-4052, in collaboration with mental health services.

Provision (a)

The PAQ indicated the facility/agency is responsible for conducting administrative and criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct. According to the PAQ, the ADOC has thirty-seven investigators who have been assigned to address any administrative or criminal investigations. The Institutional PREA Compliance Manager (IPCM) provides investigative assistance for those inmate-on- inmate sexual harassment administrative cases.

The ADOC has a uniform evidence protocol, as outline in ADOC Administrative Regulation #300, dated April 18, 2016, p. 1, Section II, which states the policy of the ADOC is to conduct all investigations in a fair and impartial manner, maintain confidentiality in all investigations, and protect the constitutional rights of all individuals subjected to investigation.

Provision (b)

The Auditor was able to speak with personnel at Crisis Services of North Alabama #256-716-4052, who advised they have a Sexual Assault Nurse Examiner (SANE) facility offering exams 24 hours a day, 7 days a week. The SANE nurse performs the forensic examination, collects all evidence, and does a complete physical examination. Medications are given to help prevent transmission of disease. The exams are free of charge and are paid through the Alabama Crime Victim Compensation Fund. Further each inmate who has a SANE exam is assigned a Rape Response Advocate upon arrival, prior to the forensic examination taking place. The Auditor was advised in the past twelve-months there was one forensic examination

The IPCM confirmed this information.

Provision (c)

The PAQ indicates all treatment services are provided to the victim without financial cost.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section G, 3, c, indicated treatment services shall be provided to the victim without financial cost and regardless if the victim names the abuser or cooperates with an investigation arising out of the incident.

The Auditor was provided with a Memorandum of Understanding (MOU) between the ADOC and the Alabama Coalition Against Rape (ACAR). This MOU establishes collaboration between the ADOC and twenty-eight rape crisis centers throughout the State of Alabama to provide confidential support services related to sexual abuse at ADOC facilities. Crisis Services of North Alabama #256-716-4052, provides treatment services to the inmates of the facility. This includes SAFE/SANE exams as well as victim advocacy services.

Provision (d)

As stated in Provision (c), a victim advocate is provided during the forensic medical examination. In addition, per the MOU with ACAR, the victim/inmate is also provided advocacy assistance through Crisis Services of North Alabama.

Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review prosecution was declined.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were investigated administratively. After investigation, all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for

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| | <p>prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.</p> <p>There was one forensic medical examination completed in the past twelve months. This examination was completed by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was provided for the inmate at the time of the examination.</p> <p>Provision (e)</p> <p>As stated in Provision (d) during the examination, the inmate meets the victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/ requested.</p> <p>Provision (f)</p> <p>As reported in Provision (a) the facility/agency is responsible for conducting administrative and criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct.</p> <p>Provision (g)</p> <p>Auditor is not required to audit this provision.</p> <p>Provision (h)</p> <p>As reported in Provision (d) victim advocacy services are offered through contract and are built into the forensic exam process.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding evidence protocol and forensic medical examinations.</p> |
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| 115.22 | Policies to ensure referrals of allegations for investigations |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation Review:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Standard Operating Procedure Investigations & Intelligence #454 |

- ADOC Administrative Regulations #300
- ADOC Duty Officer Report
- National Institute of Corrections Investigations course certificate completions and continuing education credits

Interviews with the following:

- Random Staff
- Investigative Staff

Through the interview process staff verbalized their responsibility to report any suspicion, or knowledge of an allegation of sexual abuse and sexual harassment. Each reported they were required to make such a report as soon as possible, but no later than four hours of becoming aware of it.

During the interview process, investigative staff indicated all allegations are investigated. The ones which are criminal in nature are investigated by LESD and then referred to the local district attorney office for prosecution. The administrative ones are investigated by the IPCM.

Provision (a)

The agency and facility refer all investigations to the Alabama Department of Corrections (ADOC) Law Enforcement Services Division (LESD). According to the PAQ, the ADOC has a team of thirty-two staff investigators. The auditor reviewed documentation confirming the investigators completed the specialized investigative training from the National Institute of Corrections.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, 1, b, states the Law Enforcement Services Division (LESD) is responsible for conducting a prompt, thorough and objective investigation, whether administrative or criminal. Administrative investigations shall be completed regardless of the results of any criminal investigations and regardless of the subject's continued employment by ADOC. LESD shall refer all substantiated criminal cases to the local District Attorney's office and will be available, as requested, to collaborate with those authorities to support criminal prosecution of those cases.

The PAQ reflects there was one allegation of sexual abuse and seven allegations of sexual harassment in the past twelve months.

The PAQ indicates there was one forensic exam completed in the past twelve months. This examination was completed by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was provided for the inmate at the time of the examination.

Provision (b)

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| | <p>The policy's regarding the ADOC's obligation to thoroughly investigate all matters relative to Sexual Abuse and Sexual Harassment are provided in Provision (a).</p> <p>The agency employs trained peace officer staff who have the authority to conduct sexual abuse/sexual harassment investigations. All investigations are managed by the ADOC Law Enforcement Services Division. All LESD Investigators and staff officers are trained peace officers. All substantiated criminal investigations are referred to the district attorney for prosecution. Investigations that are administrative in nature are completed by LESD. ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section C, 5, LESD is responsible for notifying the inmate whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.</p> <p>The facility documents all allegations in a Duty Officer Report (DOR), which are either followed up through the administrative or criminal investigation process. The ones which are criminal in nature are investigated by LESD and then referred to the local district attorney office for prosecutorial consideration. The policy and processes are published on the agency website, as verified by the Auditor.</p> <p>Provision (c)</p> <p>As stated in Provision (a) the agency and facility refer all investigations to the Alabama Department of Corrections (ADOC) Law Enforcement Services Division (LESD).</p> <p>Provision (d)</p> <p>Auditors are not required to audit this provision.</p> <p>Provision (e)</p> <p>Auditors are not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies to ensure referral of allegations for investigations.</p> |
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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. |

- ADOC Administrative Regulation #454
- Training Curricula
- Annual Staff Training Records
- PREA Test
- IPCM Training
- Staff Training Meetings, Signature Page

Observations during on-site review

During the on-site facility tour, the Auditor observed a bulletin board which depicted various aspects of the PREA standards. It contained various items regarding PREA such as terminology, how to report, zero tolerance, the inmate right to be free from sexual abuse and sexual harassment, #6611 (which is the number the inmates dial to report any incident of sexual abuse).

Interviews with the following:

- Random Staff

Each of the random staff interviewed recalled attending the initial PREA training when they were hired or when PREA went into effect. All staff interviewed confirmed they receive annual PREA training, as well as additional in-service training.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, V, A, 1 indicates employees shall receive training to include, but not be limited to, the prevention, detection, response and reporting of allegations of inmate sexual abuse, sexual harassment, and custodial sexual misconduct. Such training shall encompass all required areas employees need to know to ensure compliance with PREA standard requirements. Employee instruction shall be accomplished during initial training, annual in-service training, specialized training, and additional training as needed. Employee training shall be documented to denote employee understanding of material and verified through employee signature and refresher training shall be accomplished at least every two years.

The Auditor reviewed the agency's curriculum and training materials. The core training materials were developed by The Moss Group and contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the employee's classification with some specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed staff training records. Each reviewed record contained all relevant documentation to reflect the staff had met their initial PREA requirements. In addition, the Auditor reviewed all the sign-in sheets for PREA refresher training for the

past twelve months which were confirmed by staff signatures, each of the employees had acknowledged receiving PREA training.

Provision (b)

The policy regarding the ADOC's responsibility to provide training and education regarding Sexual Abuse and Sexual Harassment are provided in Provision (a).

The training provided by the ADOC, addresses both male and female issues. However, the facility staff training has been tailored specifically to the male inmate population. The Auditor reviewed the training materials utilized for the staff. The training materials are consistent with this PREA standard.

As stated in Provision (a), the Auditor reviewed the sign-in sheets for the training that occurred at the facility, verifying attendance of all staff.

Provision (c)

According to the PAQ 100% have received PREA training in the past twelve months.

A tri-fold pamphlet is distributed to staff entitled PREA, Prison Rape Elimination Act, What Staff Should Know About Sexual Misconduct with Inmates. This pamphlet addresses the major components of PREA, definitions of Sexual Abuse and Sexual Harassment, as well as other issues for staff to consider. This pamphlet is not part of the primary training program, rather it is provided as supplemental information for the staff to consider.

The ADOC developed a small pocket-sized spiral notebook, entitled Prison Rape Elimination Act (PREA), A Trauma-Informed Guide for First Responders. This spiral notebook is made of laminated plastic, with tabbed sections for easy review. The seven sections are:

- Intro to PREA
- Definitions of Sexual Abuse and Sexual Harassment
- PREA Components
- Prevention
- Detection
- Response
- Summary/Resources

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. A copy of these receipts was observed in every file reviewed by the Auditor. The receipts contained various dates which reflected separate training sessions.

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| | <p>In instances where a receipt for training material was not required, staff would sign-in on a training attendance sheet, verifying their attendance at the required training. The Auditor reviewed copies of each training session for the past twelve months, reflecting training completed by staff.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies regarding employee training.</p> |
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| 115.32 | Volunteer and contractor training |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Review:</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) and supporting documentation provided. · ADOC Administrative Regulation #454 · ADOC Administrative Regulation #216 · Contractor Training Records · Volunteer Training Records <ul style="list-style-type: none"> • Training Curricula Volunteer/Contractor Training • Volunteer/Contractor Training Card <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Contractor who has contact with inmates. • Volunteer who has contact with inmates. <p>Through the interview process a contractor acknowledged completing PREA training, prior to being allowed contact with inmates. Further recalling the level of training was specific to the contractor’s role or responsibilities in the facility. The contractor verbally articulated a comprehensive and complete understanding of the agency’s zero-tolerance policy and how to address any instance when an inmate reports a PREA specific issue.</p> <p>Through the interview process a volunteer acknowledged completing PREA training before being allowed contact with inmates. Recalling the level of training was specific</p> |

to the volunteer role and responsibilities in the facility. The volunteer verbally demonstrated to the Auditor a comprehensive and complete understanding of the agency's zero-tolerance policy and how to address any instance when an inmate reports a PREA specific issue.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, K, 8, indicates the IPCM is responsible to ensure all volunteers and contractors at their facility have received appropriate training.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, Section M specifies that employees, contractors, and volunteers are responsible for adherence to ADOC policies and procedures relating to inmate sexual abuse, sexual harassment, and custodial sexual misconduct.

The Auditor reviewed documentation indicating that the contractors and volunteers have received PREA training in the past twelve months.

The Auditor reviewed the agency's curriculum and training materials. The core training materials were developed by The Moss Group and contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements to facilitate retention of the required elements. The level or complexity of the training will depend on the responsibilities and role of the contractor or volunteer.

Provision (b)

The Auditor was provided with a four-page handout entitled Prison Rape Elimination Act PREA Training for Volunteers and Contractors. The handout covers items relating to PREA starting with an overview, purposes of PREA, objective of PREA, the ADOC procedures for reporting incidents and/or allegations of prison rape, as well as the definition of Sexual Assault, Sexual Harassment, and Custodial Misconduct. The last page is an Acknowledgement page for the contractor or volunteer to sign, with a copy of the acknowledgment being retained in the IPCM training file. This handout is supplemental to the mandated training of volunteers and contractors.

At the present time medical staff are contract staff. These contract staff are provided specific PREA training related to health care providers. Their training is entitled, "Prison Rape Elimination Act and What Healthcare Providers Need to Know. In addition to that specific training, they also provided ADOC specific PREA training.

A tri-fold pamphlet is distributed to volunteers and contractors entitled PREA, Prison Rape Elimination Act, Training for Volunteer and Contractors. This pamphlet addresses the major components of PREA, definitions of Sexual Abuse and Sexual Harassment, as well as other issues for volunteers and contractors to consider. This pamphlet is supplemental to the mandated training of volunteers and contractors.

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| | <p>Provision (c)</p> <p>As indicated in Provision (b) copies of the acknowledgment page from the PREA training is retained by the IPCM. The Auditor reviewed the sign-in sheets from the PREA training sessions for the past twelve months. Each sign in sheet reflected acknowledgment signatures from contractors and volunteers for the PREA training they received.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined the agency/facility meets every provision of the standard which addresses policies regarding volunteer and contractor training.</p> |
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| 115.33 | Inmate education |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • Inmate Awareness Acknowledgement Form AR 454-A • ADOC PREA General Information Form • NO MEANS NO Poster <p>Observations during on-site review</p> <p>During the on-site tour, the Auditor observed PREA informational “NO MEANS NO’ posters in English and Spanish and PREA informational bulletin boards in English and Spanish throughout the facility.</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Intake Staff • Random Staff • Institutional PREA Compliance Manager (IPCM) <p>During the interview process intake staff confirmed:</p> <ul style="list-style-type: none"> • Inmates are provided a PREA orientation packet upon arrival. |

- The inmate signs the acknowledgment form which is retained in the inmate file.
- Inmates are required to watch the PREA video before being assigned to a housing unit. This is a requirement for all inmates, whether they are a new intake or a transfer from another facility.

During the interview process, the IPCM explained the procedure if an inmate had a disability not covered under the training elements established by the facility. It was indicated, the ADA coordinator would ensure each inmate is able to understand and retain the PREA materials to a comfort level of comprehension.

During the interview process inmates remembered:

- Receiving written PREA materials at some point after their arrival.
- The material they received including information about the facility's zero tolerance policy and ways to report.
- The inmates who arrived prior to PREA going into effect, recalled receiving the materials and attending training when PREA was implemented.
- All inmate interviewees spoke highly of the IPCM and stated their belief that he cared for their safety.

During interviews with inmates, each were asked to briefly outline what they learned during PREA training. All responses were similar in nature and were generally:

- Zero tolerance for sexual abuse or sexual harassment
- The right to not be sexually abused or sexually harassed; How to report sexual abuse or sexual harassment.
- Right not to be punished for reporting sexual abuse or sexual harassment.

Provision (a)

According to the PAQ there were 727 inmates admitted during the past twelve months who were given PREA information at intake.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p.13, B, 1, a, states all inmates shall be given understandable information, both written and verbal, explaining the ADOC's zero tolerance PREA policy including how to report sexual abuse and harassment upon initial intake into an ADOC institution.

The Inmate Awareness Acknowledgement Form AR 454-A is an acknowledgement form the inmate signs confirming the inmate has received an orientation on the prohibition, prevention, detection and self-protecting, reporting, treatment, and counseling and victims' services available relating to inmate sexual abuse, sexual harassment, custodial sexual misconduct, and the Prison Rape Elimination Act (PREA).

The NO MEANS NO Poster highlights:

RIGHT TO REPORT- Encouraging individuals if you, or someone you know, is experiencing sexual abuse or sexual harassment, Alabama Department of Corrections wants to know.

HOW TO REPORT - *6611 is the external reporting hotline that can be called from the inmate phone system; report to a staff member, volunteer, contractor, medical or mental health; report to the IPCM; drop a letter in the PREA box; write a letter to LESD using an LESD envelope; tell an outside person and allow them to report third party; or fill out an investigation request through the LESD via the ADOC's website.

VICTIM SUPPORT SERVICES - ADOC has partnered with ACAR to provide survivors of sexual abuse with confidential emotional support services. It lists the telephone numbers and mailing address to access these resources.

The Auditor reviewed a copy of the Initial Intake Acknowledgement (ADOC Form 454-A) which is completed by each inmate upon arrival. This form is a checklist of eight-line items, which require the inmate to read and sign, and is witnessed by a staff signature. The form is then placed in the inmate file. The checklist includes:

1. The ADOC has a Zero Tolerance Policy toward Prison Rape
2. Sex between inmates is not allowed.
3. Forcing or coercing another inmate into sexual acts is illegal.
4. It is illegal for a staff member to have sex with an inmate.
5. If you are being harassed or have been sexually assaulted or if you have witnessed sexual harassment or sexual assault you may report it, one of the following ways:
 - a. Report to any ADOC Employee
 - b. Report it to the Institutional PREA Compliance Manager
 - c. Dialing *6611 on any inmate phone system
 - d. Write a letter to the ADOC I & I Division using a pre-addressed envelope that is available for the drop boxes.
 - e. Have a family member or friend report it via the ADOC website.
www.doc.alabama.gov
6. All claims of sexual harassment and sexual assault will be investigated.
7. A statement of the findings of the investigation will be provided to the victim.
8. Criminal charges will be pursued, if applicable.

Of the inmate records reviewed, signed, and dated, documentation of PREA education was retained in every file with the rest of the inmate information. The date of the signature coincided with the date the inmate arrived at the facility. In addition to the orientation packet, all inmates coming through watched the seventeen-minute ADOC PREA video, which is produced in both English and Spanish. All inmate records reviewed revealed they were screened within 72 hours of arriving, received 30-day comprehensive PREA education and were re-assessed within 30-days as required by standard.

The facility has ample telephones designated for inmate use. Using any of these telephones, an inmate can dial *6611 and be immediately connected to the PREA hotline. The inmate is then advised he can make a report anonymously. The inmate is also advised that the call may be recorded. The call is free of charge and confidential. This was confirmed by the Auditor on the on-site tour.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, b, states all inmates shall receive a comprehensive educational orientation by an IPCM on the ADOC's zero tolerance PREA policy and how to report sexual abuse and harassment within 30 days of arrival into an ADOC institution. The facility policy is a replica of the ADOC policy.

The PAQ indicates, during the past twelve months there were 665 inmates admitted to the facility whose length of stay was more than thirty days. The PAQ also reflected all inmates were provided the PREA information which included their right to be free from sexual abuse, as well as the policies and procedures for reporting. Per the PAQ 100% of the inmates admitted to their facility in the past twelve months received the mandated information.

Provision (c)

As indicated in Provision (b) 100% of inmates who entered the facility during the past twelve-month period received the required PREA training. At the time of PREA implementation, all inmates were required to attend PREA training. Inmates arriving after implementation received their training at intake. This training, at intake, is facilitated using viewing videos. The inmate is also provided an inmate handbook, written material on sexual abuse and sexual harassment, and What You Should Know About Sexual Abuse and Assault pamphlet. At the end of the intake process is a question-and-answer period to reinforce retention of the information presented during intake.

The information was documented with verification of the training retained in the inmate file. The Auditor reviewed a copy of this documented verification.

As indicated in Provision (b) the intake staff provide the PREA information immediately upon arrival into the facility.

Provision (d)

According to the PAQ PREA education is available in formats accessible to all inmates, including those who are limited English proficient, visually impaired, hearing impaired or otherwise disabled.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, c, requires that the IPCM provide all inmates accessible educational formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service.

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| | <p>The various training elements provided to the inmate population range from PREA orientation video and documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish.</p> <p>Provision (e)</p> <p>As stated in previous provisions, all inmates are required to sign the ADOC Administrative Regulations #454-A, Inmate Awareness Acknowledgment. A copy of this acknowledgment is scanned and retained in the inmate file as documentation.</p> <p>As stated in provision (a), a review of random inmate records was conducted. The signed acknowledgment was in every record.</p> <p>The ADOC has a database to track if an inmate has participated in the mandated PREA training. The database can conduct a query by inmate name and facility to verify whether an inmate has received training.</p> <p>Provision (f)</p> <p>The agency/facility ensure the inmates receive crucial education about sexual abuse and sexual harassment. Using varying formats, the inmate population receives valuable information in user friendly, comprehensible ways. The various delivery systems are PREA video inmates watch upon arrival, Initial Intake Acknowledgement (ADOC Form 454-A), NO MEANS NO posters, PREA orientation packet, ADOC PREA General Information Form and supplemental information such as the inmate handbook, the trifold PREA inmate pamphlet and PREA information entered on each inmate's tablet.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard for inmate education.</p> |
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| 115.34 | <p>Specialized training: Investigations</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • Specialized Training Curriculum • Training Certificates for Investigators |
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Interviews with the following:

- Investigative Staff

Through the interview process, the investigative staff indicated specialized training had been completed by all investigators.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, V, 2 indicates that additional training related to investigators roles includes, but is not limited to:

- Interviewing Sexual Abuse Victims
- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action
- Criteria and evidence required to substantiate a case for prosecutorial referral

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, further dictates that all training must be documented and verified through employee signature and must be retained by the agency.

ADOC SOP, OPR: I & I Number 454, PREA Sexual Assault Investigations, p. 2, C, 1 specifies that the I & I investigators shall receive additional training related their roles to include, but not be limited to:

- Interviewing Sexual Abuse Victims
- Conducting Sexual Abuse Investigations in confined settings
- Investigation and Evidence Collection for Inmate Sexual Offenses
- Sexual Harassment and Custodial Sexual Misconduct

The Auditor reviewed portions of the on-line training required of all ADOC investigators. This material is provided on-line through the United States Department of Justice, National Institute of Justice entitles, Sexual Abuse and the Initial Responder. This on-line training provides investigative staff training in the following areas:

- PREA Investigations
- Collaborating with Victims Interviewing Techniques
- Institutional Culture and Investigations

According to the PAQ, the ADOC currently employs thirty-seven PREA investigators statewide. The Auditor reviewed training certificates for each of the investigators assigned to the Northern Region, as well as the Specialized Investigation Training certificates provided by the Moss Group. The training records reflected the required

training items in addition to various other courses such as: Trauma-Informed Sexual Assault, Human Trafficking, Prison Rape and Sexual Assault Investigations.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, V, 2, mandates investigators and other ADOC employees with PREA related responsibilities to receive additional training related to their roles to include, but not limited to:

- Interviewing Sexual Abuse Victims
- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action
- Criteria and evidence required to substantiate a case for prosecutorial referral

The Auditor viewed the US Department of Justice, Bureau of Prisons, NIC training entitled "Sexual Abuse and the Initial Responder." There are currently five chapters provided in this training course:

- Course Introduction
- PREA Investigations
- Collaborating with Victims
- Interviewing Techniques
- Institutional Culture and Investigations

Through a review of training records and an interview with an investigator, the Auditor was able to confirm that all training requirements have been met.

Provision (c)

As outlined previously in Provision (a) & (b) ADOC Administrative Regulation 454 address this provision.

The ADOC currently employs thirty-seven PREA investigators statewide. The Auditor reviewed training certificates for each of the ADOC Law Enforcement Services Division PREA Investigators, as well as the Specialized Investigation Training certificates provided by the Moss Group.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies regarding specialized training: investigations.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC MOU with ACAR
- Training Records of Medical and Mental Health Practitioners
- Specialized Training Curricula

Interviews with the following:

- Medical Staff
- Mental Health Staff

Medical and mental health staff assigned to the facility are primarily contract staff. Through staff interview and review of training documents by the Auditor, each of the assigned staff members has attended the required training and meet all training requirements.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 12, V, 3, a-g, dictates that Medical and Mental Health employees, shall receive additional training to include, but is not limited to:

- a. How to detect and assess signs of sexual abuse and harassment.
- b. How to preserve physical evidence of sexual abuse.
- c. How to respond effectively and professionally to victims of sexual abuse and harassment.
- d. How and to who to report allegations or suspicions of sexual abuse and harassment
- e. Recognizing the special medical and mental needs of all inmates
- f. Factors to consider in an inmate's risk of sexual victimization.
- g. Training shall be documented to denote employee understanding of material and verified through employee signature.

A review of the provided lesson plan/training materials demonstrate compliance with this training requirement.

Provision (b)

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| | <p>N/A - All medical staff are prohibited by procedure from performing forensic examination on sexual abuse victims.</p> <p>Provision (c)</p> <p>As indicated in Provision (a), through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.</p> <p>Provision (d)</p> <p>The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for ADOC employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, that the contracted medical staff received the general PREA training mandated for all ADOC employees.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies regarding specialized training: medical and mental health care.</p> |
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| 115.41 | Screening for risk of victimization and abusiveness |
| | <p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Administrative Regulation #637 • ADOC Form 454-C, Classification PREA Risk Factors Checklist • ADOC Form 454-K, PREA Risk Assessment • Risk Assessment Checklist <p>Interview with the following:</p> <ul style="list-style-type: none"> • Staff Responsible for Risk Screening • Institutional PREA Compliance Manager (IPCM) • Agency PREA Director (PD) • Random Inmates <p>Through the interview process, inmates recalled:</p> |

- Being asked questions relative to their concern for sexual safety, and if they felt like they were going to harm themselves.
- Being asked questions specific to previous sexual abuse & harassment within three days of their arrival at the facility.
- Being asked questions relative to this standard. Most indicated they recalled being interviewed within a couple of weeks after arrival.

Through the interview process, intake staff indicated they do not discipline any inmate for their refusal to answer these questions during an assessment, rather each of them indicated they would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the inmate chose not to respond.

The Auditor interviewed the PREA Director and the IPCM regarding who can specifically access the screening information collected during intake and screenings, and was advised that Medical Staff, Classification Staff and the PREA Compliance Manager have access. The PREA Director and IPCM acknowledged the PREA Director made a procedural change by adding the IPCM as back-up to conduct the Risk Assessments when Classification cannot.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 15, F, 1, mandates all ADOC facilities, including are required to screen all new inmates, at initial intake. The intake is to occur no more than 72-hours after arrival and is to screen for potential risk of sexual vulnerability and potential risk of sexual aggression. The intake shall be completed using ADOC Form 454-C, PREA Risk Factors Checklist.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 15, F, 2, mandates all ADOC facilities, are required to screen all inmates transferring from another facility, at initial intake. The intake is to occur no more than 72-hours after arrival and is to screen for potential risk of sexual vulnerability and potential risk of sexual aggression. The intake shall be completed using ADOC Form 454-C, PREA Risk Factors Checklist.

During the on-site audit, the facility staff explained the intake screening process and the Auditor subsequently reviewed intake screening documents. The intake staff explained each of the documents and assessments utilized. The intake staff also modeled each of the questions, providing the Auditor with a clear and thorough understanding of the overall intake and classification process.

Provision (b)

As stated in (a), according to the listed policies all inmates must be screened within 72 hours of arrival.

The Auditor reviewed the PAQ which indicated in the past twelve 12 months, 100% or 720 inmates were screened for the risk of sexual victimization or sexual abusiveness

within 72 hours of their entry into the facility.

A list of inmates' arrival dates and dates of evaluation do demonstrate compliance with this standard. Using this list, the Auditor reviewed random inmate files to ensure they received the training and how that training was completed. The files were for inmates from varying housing units, ethnic and racial backgrounds. Of the records reviewed, all records had verification that the initial screening had occurred within 72-hours of arrival.

As stated in Provision (a), the Auditor was able to specifically question staff about the required questions. The intake staff replied that all the PREA related questions are asked during initial intake and ongoing classification screenings.

Provision (c)

The Auditor reviewed copies of intake forms and screening assessments from the intake staff, which were documented on the ADOC Form 454-K, PREA Risk Assessment and ADOC Form 454-C, Classification PREA Risk Factors Checklist. These forms are the foundation for an assessment that provides the intake and classification staff with an independently developed, validated and objective assessment used for screening assessments, as outline in the following paragraph.

ADOC Administrative Regulation #637, dated May 9, 2018, Gender Dysphoria, p. 2, V, A, 1, states that pursuant to ADOC Administrative Regulation 454 "Prison Rape Elimination ACT" (PREA), all new incoming inmates shall be screened at the reception and diagnostic centers for a history of predatory sexual behavior, sexual abuse and the likelihood/potential of sexual abuse/victimization using the PREA screening checklist and instructions utilizing the PREA screening checklist (Form 454- C).

Staff members who conduct intake screenings utilize ADOC Form 454-K, PREA Risk Assessment and ADOC Form 454-C, Classification PREA Risk Factors Checklist for guidance in conducting an initial assessment of an inmate's risk of victimization and risk of abusiveness. All inmates are reassessed within thirty-days.

The Auditor was able to verify compliance with this provision through the review of inmate records, reflecting copies of the required assessments. A copy of the risk assessment questionnaire was provided to the Auditor. A review of this instrument indicates it is weighted and scored based upon responses to specific questions required in the Standard and Provision.

As stated in (a), the Auditor was able to interview intake staff who were able to explain to the Auditor through the intake screening and classification process, which included an overview of the ADOC Form 454-C, Classification PREA Risk Factors Checklist and ADOC Form 454-K, PREA Risk Assessment.

Provision (d)

The Auditor reviewed the ADOC Form 454-C, Classification PREA Risk Factors Checklist, Parts 1 and 2, and compared the questions on Part 1 of the form with the requirements for Provision (d). All items for Provisions (d) have been included into

Part 1 of the screening instrument. The included items are:

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 was previously 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 non-conforming.
8. Whether the inmate has previously experienced sexual victimization
9. The inmate's own perception of vulnerability.
10. The facility **does not** detained inmates solely for civil immigration purposes.

As stated in (a), the screening and intake process was explained to the Auditor, which included the ADOC Form 454-C, Classification PREA Risk Factors Checklist and ADOC Form 454- K, PREA Risk Assessment.

Provision (e)

The Auditor reviewed the ADOC Form 454-C, Classification PREA Risk Factors Checklist, Parts 1 and 2, and compared the questions on Part 2 of the form with the requirements for Provision (e). All items required for Provision (e) have been included in the screening instrument, which addresses Possible Sexual Predatory Risk Factors. The items addressed include:

- Prior acts of sexual abuse
- Prior convictions for violent offenses
- History of prior institutional violence or abuse

As stated in (a), the screening and intake process was explained to the Auditor, which included the ADOC Form 454-C, Classification PREA Risk Factors Checklist and ADOC Form 454- K, PREA Risk Assessment.

Provision (f)

The Auditor reviewed the PAQ which indicated within the past twelve months, 665 or 100% have been reassessed for the risk of sexual victimization or risk of sexually abusiveness of other inmates within thirty days of their entry into the facility.

Provision (g)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, F, 5, specifies all inmates shall be reassessed for risk of sexual victimization and abusiveness within thirty-days of intake. In addition, upon receipt of additional information that bears on an inmate's risk of sexual victimization or abusiveness, additional screening will be conducted.

As stated in Provision (a), the Auditor was able to sit with and interview intake staff who were able to walk the Auditor through the intake screening and classification process. Intake staff indicated they monitor all the inmate population and will conduct a re-assessment when warranted due to:

- A referral
- A request
- An incident of sexual abuse, or
- A receipt of additional information that may have some bearing on the inmate’s risk of victimization or abusiveness.

Provision (h)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 7, indicates during the time of these assessments the ADOC shall take no formal or informal disciplinary action should an inmate refuse to participate or answer any screening questions.

These policies are all encompassing and do not specifically identify the inmates relative to their disabilities, gender preferences, history of sexual victimization and/or the inmate’s own perception of vulnerability. Should the inmate choose not to answer for any reason, they cannot be disciplined. The policy language is broad and applicable to this provision.

Provision (i)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 8, mandates there will be appropriate controls on the dissemination of screening information as to ensure each inmate’s sensitive information is not exploited.

As stated in (a), the Auditor interviewed intake staff. During that interview, the intake staff indicated access to the inmate’s classification information is secured, with controlled access by classification staff.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility does meet every provision of the standard for, Screening for Risk of Sexual Victimization and Abusiveness.

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Documentation Review:

Pre-Audit Questionnaire (PAQ) and supporting documentation provided.

ADOC Administrative Regulation #454

ADOC SOP Number 454-5

Form 454-C, Classification PREA Risk Factors Checklist

ADOC Form 454-K, PREA Risk Assessment

ADOC, PREA Director memo, dated February 20, 2020, Transgender Reassessment and Housing.

Inmate Records

Intake Risk Assessment Checklist

Risk Assessment Checklist

Housing Designation Spreadsheet

Interview with the following:

- Staff Responsible for Risk Screening
 - Institutional PREA Compliance Manager (IPCM)
 - Agency PREA Director (PD)

During the interview process, staff who are responsible for risk screening advised the Auditor that because of the assessment procedures being utilized, each inmate is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each singular inmate when making classification and housing decisions.

During the interview process, the intake staff who are responsible for risk screening, indicated transgender or intersex inmates view of their own safety is taken into serious consideration when determining housing placements and programming assignments. In addition, the staff indicated because of the assessments that are utilized, each inmate is evaluated separately.

During the interview process, the IPCM indicated every assessment completed by staff is factored into the placement and programming of each inmate (ADOC forms 454-C and 454-K). Further the inmate's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every inmate, especially those at elevated risk of being sexually victimized, are separated from

those of at elevated risk of being sexually abusive.

During interviews with the PD, IPCM and staff responsible for screening, all specified the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. They further confirmed that regular classification reassessments are conducted a minimum of every six months, or if the inmate engages in an incident of a sexual nature.

During the interview process with the PD and the IPCM, both indicated that neither the agency or facility are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates. Both indicated that all LGBTI inmates are housed within the general population unless specific issues are present and only then the appropriate staff will meet with the inmate and address the concerns.

During the interview process, the Auditor asked the PD, IPCM and the staff responsible for risk screening about the showering arrangements for transgender or intersex population. Each indicated the inmate's views of their own safety is given thoughtful consideration when providing showering options. In addition, they clarified that transgender or intersex inmates would be able to shower separately from other inmates by utilizing alternate shower times.

Provision (a):

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 9, a, specifies that during the screening process and PREA Mental Health Assessment shall be used to make individualize and safety-based determination and assist in the initial classification and institutional assignment of the inmate, with the goal of keeping separate inmates at high-risk of being sexually victimized from those at high risk of being sexually abusive.

Following a review of inmate records, the Auditor was able to verify the information from these assessments was being utilized in the various classification decisions made by staff.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 10, a, indicates the information obtained during the screening process and PREA Mental Health Assessment is used to make individualize and safety-based determinations and assist in the initial classification and institutional assignment of the inmate, as well as determine work, education, and program assignments.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse

and Harassment, dated January 4, 2016, p. 17, F, 10, f, requires that when 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, ADOC shall consider on a case-by-case basis whether the placement would ensure the inmate's health and safety, and whether the placement would present management or security concerns.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, d, advises that 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.

Provision (e)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, e, shows that a transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration.

Provision (f)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, g, reveals transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

Each of the housing areas have bathrooms with shower stalls that are not easily seen by staff. The random staff who were interviewed indicated that if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates. It was indicated that the alternate shower time would be thirty minutes before or after other inmates are allowed to shower.

Provision (g)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, c, specifies 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.

Conclusion:

Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard requiring the use of screening information.

115.43 Protective Custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Review:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation 454
- ADOC Administrative Regulation 435
- Segregation Log/Holding Cell/Crisis Cell
- Post Allegation Protective Custody Form

On-Site observations:

During the facility tour, no inmates were in the segregation unit for risk of sexual victimization.

Interview with the following:

- Warden
- Institutional PREA Compliance Manager (IPCM)

Through the interview process the Warden and the IPCM both confirmed zero inmates had been placed in segregation because of PREA allegations or issues.

Provision (a):

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, J, 1, specifies that inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternative and a determination made that there are no other alternatives available.

During the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The PAQ reflects this information. According to the PAQ, the facility does not have protective custody. However, it does have a restrictive housing unit. Inmates are placed in this unit if they are in fear for their safety or a potential escape risk. Inmates do not usually stay for more than 72hrs.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, J, 2, indicates that inmates placed into segregated housing as the only means of protecting such an inmate shall have access

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| | <p>to all programs, privileged, education and work opportunities, to the extent possible, and it shall only be until an alternative means of separation from the likely accuser can be arranged, a time period not to ordinarily exceed thirty days. In these cases, the facility shall clearly document the basis for the facility's concerns for the inmate's safety and the reason no alternative means of separation can be arranged.</p> <p>As stated in Provision (a), during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The PAQ reflects this information.</p> <p>Provision (c)</p> <p>As stated in Provision (a), during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The PAQ reflects this information. Consequently, no inmates were held longer than thirty days.</p> <p>Provision (d)</p> <p>N/A</p> <p>Provision (e)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, J, 3, states inmates placed into segregated housing as the only means to protect such an inmate shall be afforded reviews by the facility every thirty days to determine whether there is a need to continue separation from the general population.</p> <p>As stated in Provision (a), during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The PAQ reflects this information.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard relative to protective custody.</p> |
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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided |

- ADOC Administrative Regulation #454
- PREA Poster in English and Spanish
- Inmate Legal Mail Envelopes
- MOU with Securus for Hotline services
- NO MEANS NO Poster
- Director Central Records Division, Civil Immigration Letter, dated January 25, 2019

Observations during on-site review

During the on-site portion of the audit, the Auditor observed the NO MEANS NO poster in both English and Spanish throughout the facility. These posters were observed in each housing unit, common areas, main hallways, intake holding area, dining room, etc. In addition, the Auditor observed boxes with PREA in bold lettering located in the facility. While interviewing mailroom staff, the Auditor was informed inmates can request and obtain envelopes which are self-addressed to the Director of the LESD for inmates to provide confidential information relative to PREA utilizing the legal mail process.

During the on-site portion of the audit, the Auditor evaluated the telephones for access to the *6611 PREA hotline. In every instance, the PREA hotline functioned as required. When the receiver was picked up a recorded message would give the person on the phone the option of making an anonymous, free telephone call to the PREA Hotline. Then would inform the caller the call would be recorded. When calling the PREA Hotline the inmate can leave a message that is up to 2 minutes in length.

Interview with the following:

- Institutional PREA Compliance Manager (IPCM)
- Random Staff
- Random Inmates

During the interview process the IPCM confirmed there is a process for the inmate population to report abuse or harassment to a public or private entity. It was confirmed the ADOC has an MOU with an outside agency, which provides an avenue for the inmate population to contact them and leave an anonymous message. Further these messages are provided directly to the agency PREA Director via email for appropriate follow-up and resolution.

Through the interview process, staff indicated they would accept a report or allegation from an inmate and provide it to their supervisor for further direction. They each also reported inmates can report multiple ways which include, but are not limited to, telling a staff member, calling the PREA hotline posted throughout the facility, or telling a family member. Staff interviewed stated inmates can privately report sexual abuse or sexual harassment as well; through the hotline number *6611 or through legal mail using a pre-addressed LESD envelope.

During interviews with staff, several methods for staff to privately report sexual abuse

of inmates were identified. All staff indicated that they may choose to make a private report to their supervisor, the PREA Director or the IPCM.

Through the interview process, inmates indicated they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the *6611 telephone number, contacting the IPCM, having a family member contact the institution, contacting a staff member, and using the PREA boxes throughout the facility. Most indicated they would tell a staff member first.

Through the interview process, inmates reported being familiar with the PREA hotline. All the inmates reported they were aware they could make a report via the telephone without providing their name or ID number. They further were aware of calls to *6611 being recorded.

During the process of interviewing inmates regarding provision (c), 100% indicated they were aware they can make reports of sexual abuse or sexual harassment in person and in writing.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 21, Section H, 2, a, specifies that inmates may report sexual abuse or harassment verbally or in writing, third party or anonymously. Inmates may file a grievance, call the PREA hotline, deposit a complaint in the PREA drop box (a secure receptacle located at each facility), tell the IPCM, contact LESD by using a pre-addressed LESD envelope, or they may tell any staff, contractor or volunteer and expect the information to be reported immediately and thoroughly investigated as indicated in this policy.

Provision (b)

The Auditor reviewed a copy of the MOU between Securus Technologies and the ADOC. This contract went into effect May 15, 2019. The contract is to provide a comprehensive correctional communications system statewide. Through Securus Technology the following Hotline numbers are available on every inmate telephone, twenty-four hours a day, seven days a week.

- PREA and Investigations and Intelligence Hotline (*6611) (This call is recorded and archived because it is the 3rd party hotline and the in-house hotline.)
- ADOC Crime Tip Hotline designated as 1-866-293-7799, Option 4
- ACAR Hotline designated as 1-800-639-4357 (This call is NOT recorded or monitored because it serves as the confidential support line.)

The recording feature on these telephones must store call recordings for at least five years. The vendor must maintain such records as accessible online to the ADOC at no cost. Via workstation, the System must allow Authorized Users to lock call recordings to ensure their retrieval beyond the on-line storage period. Once a call recording is locked, it must be available on-line unlocked.

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| | <p>Director Central Records Division, Civil Immigration Letter, dated January 25, 2019, states the Alabama Department of Corrections does not detain persons solely for civil immigration purposes.</p> <p>Provision (c)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, a, states ADOC employees, can receive information, including verbal, written, third party reports or anonymous complaints, concerning inmate sexual abuse, sexual harassment and custodial sexual misconduct; retaliation against inmates or staff who report such an incident, or any staff neglect or violation of responsibility that may have contributed to an incident or violation shall immediately report the incident through their chain of command.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, H, 1, b, stated that any knowledge, suspicion or information regarding sexual abuse, sexual harassment, and custodial sexual misconduct shall be reported immediately.</p> <p>A review of the inmate handbook published September 25, 2017, p. 23, states “All reports are investigated and are confidential – the ADOC and its staff want to keep you safe!”</p> <p>Provision (d)</p> <p>As identified in Provision (c), this matter is addressed in ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, V. Procedures, Section H.</p> <p>Conclusions:</p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard relative to inmate reporting.</p> |
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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023 |

Interviews with the following:

- Random and Specialized Staff
- Random and Targeted Inmates

Through the interview process, inmates reported there was a grievance procedure in place to manage PREA allegations.

Through the interview process, staff reported there was a grievance procedure in place to manage PREA allegations.

Provision (a):

The agency and facility both report they do have an administrative procedure to address male inmate grievances regarding sexual abuse.

The Pre-Audit Questionnaire (PAQ) indicates the agency/facility has an administrative procedure for dealing with inmate grievances regarding sexual abuse.

According to the PAQ the facility had zero grievances in the past twelve months.

The Auditor reviewed ADOC Administrative Regulation #454 and the Male Inmate Handbook, as both indicate ADOC as an agency does not have an inmate grievance procedure in place for male inmates.

Provision (b)

According to the PAQ the agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Additionally, the agency policy does not require an inmate to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 6, F, indicates staff are expected to resolve inmate complaints at the lowest level whenever possible and to be of assistance with inmate concerns that can be resolved informally and without formal grievance processes.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 6, G, indicates in part there will be no time limit imposed on when an inmate may submit a grievance regarding an allegation of sexual abuse or sexual harassment.

Provision (c)

The PAQ indicates the agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

The PAQ indicates the agency's policy and procedure requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the

subject of the complaint.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, pp. 5-6, E, indicates inmates are not required to manage or discuss any grievance through a staff member who is the subject of the grievance. However, inmates are encouraged, but not required, to discuss their issue or concern with officers and first line supervisors and attempt to have their concern managed at the lowest possible level first.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 8, R, indicated grievances received by the IGO that allege sexual abuse or sexual harassment will be logged and forwarded to the IPCM for investigation in accordance with this AR 454, Inmate Sexual Abuse and Harassment (Prison Rape Elimination Act [PREA]). All sexual abuse and harassment allegations will be taken seriously and investigated.

Provision (d)

According to the PAQ, in the past 12 months, there were zero grievances filed that alleged sexual abuse:

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, pp. 9-10, Z, 1, d, states the IGO shall provide a response to Step 1 to the grievant within ten (10) days of IGO receipt.

Provision (e)

According to the PAQ, the agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

According to the PAQ, the agency policy and procedure requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 5, D. indicates an inmate may obtain assistance from another inmate in preparing a grievance. An inmate may also obtain assistance from outside resources, such as family members or attorneys. However, no person may submit a grievance on the inmate's behalf.

Provision (f)

According to the PAQ, the agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. If it is an emergency grievance alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours

According to the PAQ, there were zero emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past twelve months.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 10-11, AA, 1. Indicates the grievance process begins when an inmate submits a completed Inmate

Grievance Form 406-A, Inmate Grievance Form. The grievance may be submitted in a manual or electronic form, as available. If the grievant indicates the grievance is an emergency, the IGO shall log, expedite, and forward emergency grievances to the Warden/Designee. The Warden/Designee shall promptly determine if he or she agrees that the grievance qualifies as an emergency. If the matter qualifies as an emergency, the Warden/Designee shall immediately address and promptly document any such emergency and the responsive action taken. For allegations of sexual abuse or sexual harassment by another inmate, the emergency grievance shall be directed to the IPCM for resolution. Any grievance alleging physical or sexual abuse of an inmate by staff shall be directed to LESD for resolution. For allegations of sexual abuse or sexual harassment by another inmate, or allegations of verbal, physical, or sexual abuse by staff, the Warden/Designee shall function as appropriate.

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 11, AA, 4, indicates appeals involving emergency grievances shall be forwarded to the DGC. The DGC shall decide on the emergency grievance appeal immediately if the matter is always a substantiated emergency or within seventy-two (72) hours of receipt. The responsive action directed shall be documented.

Provision (g)

According to the PAQ, the agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith. In the past twelve months the facility had zero inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency/facility against the inmate for having filed the grievance in bad faith:

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 7, L, indicates Reprisals are prohibited. ADOC does not tolerate any form of retaliation by inmates or staff for use of, or participation in, the grievance process. Such acts will be grounds for inmate disciplinary action, staff corrective action, possible criminal investigation, and/or prosecution of inmates or staff.

Conclusions:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding exhaustion of administrative remedies.

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| 115.53 | Inmate access to outside confidential support services |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Documentation Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.

ADOC Administrative Regulation #454

- MOU with Rape Crisis Center
- NO MEANS NO Poster
- Alabama Advocacy Hotline
- MOU with Outside Confidential Support Service Agency Advocacy Centers Contact Information

Observations during on-site review

During the tour of the facility, the Auditor observed the NO MEANS NO posters throughout the facility, in English and Spanish.

Interviews with the following:

- Random Inmates
- Representative from Crisis Services of North Alabama

During the interview process, inmates responded they were familiar with the PREA hotline. Each reported the call was free and confidential. Each responded they knew about an outside agency because of the PREA training and the posters around the facility.

The Auditor spoke with a representative from Crisis Services of North Alabama #256-716-4052 and was advised a victim advocate is made available to be present with the victim before, during and following the examination. Additionally, the advocate conducts follow-up contacts with the victim to ensure aftercare is arranged and firmly in place.

During the interview process, inmates responded they were familiar with the PREA hotline *6611. The *6611 line is recorded and archived. Each responded they knew some of the information they provided might be given to the facility staff.

Provision (a)

The facility provided the Auditor a listing from the Alabama Coalition Against Rape (ACAR) Member Crisis Centers, including the mailing address, as well as the office telephone number. The listing further broke down the contact information by county for utilization by respective facilities. A representative from Crisis Services of North Alabama #256-716-4052, confirmed they provide services to facility.

Provision (b)

During the tour of the facility, the Auditor tested several wall phones for access to the ADOC PREA hotline. Each time the PREA hotline functioned appropriately. The phones

are checked once on each shift by an intermediate or higher staff member to make sure they are in working order to reach the PREA hotline without difficulty.

A representative from Crisis Services of North Alabama #256-716-4052 advised a victim advocate is made available to be present with the victim before, during and following the examination. The representative reported Crisis Services of North Alabama staff have a responsibility to inform any victim that some information the victim shares with them may need to be provided to facility staff. This information may be medical and/or non- medical, for purposes such as institutional security, PREA investigation, and further medical and mental health services.

Provision (c)

The Auditor was provided a copy of a MOU between the ADOC and the Alabama Coalition Against Rape (ACAR) to facilitate services related to implementation of the Prison Rape Elimination Act. The MOU states that ACAR will provide confidential emotional support services related to sexual abuse. ACAR is also required to either maintain or enter into other agreements with community service providers to provide confidential emotional support services related to sexual abuse to inmates within its custody, specifically establishing services that are closest to the respective facilities. The ACAR Hotline is 1-800-639-4357. This call is NOT recorded or monitored because it serves as the confidential support line.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding inmate access to outside confidential support services.

| 115.54 | Third-party reporting |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none">• Pre-Audit Questionnaire (PAQ) and supporting documentation provided.• ADOC webpage link - http://www.doc.state.al.us/PREA• ADOC Administrative Regulation #454• Reporting Forms for LESD• Website Publication Showing DOC PREA Email - DOC.PREA@doc.alabama.gov <p>Provision (a)</p> <p>The ADOC has provided access to a third-party reporting process through their agency website. On the agency website, the individual wishing to report a PREA</p> |

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| | <p>related incident can access this through the PREA link, located under the ADOC tab. Located below the PREA Director’s name is a link, Request an Investigation. http://www.doc.state.al.us/PREA. This link allows for the initiation of a third-party request.</p> <p>ADOC has provided an additional access point for third party reporting through their agency website. On the agency website, the individual wishing to report a PREA related incident can access this through the PREA link, located under the “About ADOC” tab. Located below the PREA Director’s name is a link that asks the individual if they would like to email their report, then providing the email address link: DOC.PREA@doc.alabama.gov</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding third party reporting.</p> |
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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Documentation reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Administrative Regulation 302 • Mandatory Reporting Law (Alabama Code 26-14-13) • Informed Consent for Medical Services <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Staff • Medical Staff • Warden • PREA Director (PD) • Institutional PREA Compliance Manager (IPCM) <p>During interviews with staff, all were aware of their reporting duties and were able to explain how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e., their supervisor, medical staff, etc. All staff indicated PREA related allegations and reports go to the IPCM, who then notifies the investigative staff.</p> |

During interviews with medical staff, all were aware of their responsibility to keep information confidential and only release it on a need-to-know basis. They were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each verbalized their understanding of the policy as well as their rights and responsibilities. They all articulated they were obligated to advise the victim (inmate) of the limitations of confidentiality, due to the mandatory reporting law, prior to the initiation of services.

During interviews with the Warden, PREA Director and IPCM, each articulated they were aware of the requirement to report all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, to the facilities designated investigators.

During interviews with the Warden, PREA Director and IPCM each confirmed allegations of sexual abuse and sexual harassment are reported to the IPCM and LESD.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, a, specify ADOC employees/staff who receive any information, including verbal, written, third-party reports and anonymous complaints concerning inmate sexual abuse, sexual harassment, and custodial sexual misconduct, retaliation against inmates or staff who report such an incident; or any staff neglect or violation of responsibilities that may have contributed to an incident or violation, shall immediately report the incident through their chain of command.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, b, states that any knowledge, suspicion, or information regarding sexual abuse, sexual harassment and custodial sexual misconduct shall be reported.

The ADOC provides all first responders a pocket size spiral booklet entitled "Prison Rape Elimination Act (PREA). A Trauma-Informed Guide for First Responders." The booklet provides a quick reference guide to all aspects of the PREA process including the responsibility and role of medical staff to preserve evidence and the process of disseminating information, and to whom.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, c, indicates an employee or staff member shall not reveal any information related to a PREA incident to anyone other than to the extent necessary to make investigation, management, and treatment decisions. Initial interviews of potential sexual abuse victims should be limited to only information necessary to protect the victim from immediate harm until an Investigator arrived for a more detailed interview.

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| | <p>The Auditor reviewed a copy of the Informed Consent for Medical Services the inmate signs prior to treatment. The consent document releases and gives permission to the medical or mental health care provider to provide pertinent and relevant information to individuals who need to know.</p> <p>Provision (c)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, f, declares medical and mental health practitioners shall ensure all inmates are informed prior to the initiation of the service of the limits of their confidentiality and shall report information about sexual victimization to the facility IPCM.</p> <p>The ADOC provides all first responders a pocket size spiral booklet entitled “Prison Rape Elimination Act (PREA). A Trauma-Informed Guide for First Responders.” The booklet provides a quick reference guide to all aspects of the PREA process including the responsibility and role of medical staff to preserve evidence and the process of disseminating information, and to whom.</p> <p>Provision (d)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, g, mandates that any allegation of sexual abuse or sexual harassment involving a youthful inmate or a vulnerable adult inmate under a State statute, shall additionally be reported to the Alabama Department of Human Resources.</p> <p>Provision (e)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, b, specifies that any knowledge, suspicion or information regarding sexual abuse or sexual harassment or custodial sexual misconduct shall be reported to the IPCM, PREA Director and the I & I investigator immediately, in accordance with AR302, Incident Reporting.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff and agency reporting duties.</p> |
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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | Documentation Reviewed: |

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- Duty Officer Reports (DOR)

Interviews with the following:

- Agency Head or designee
- Warden
- Random Staff

Through the interview process the Agency Head designee who indicated that if information were received that an inmate was in imminent danger, the facility would be contacted and the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.

Through the interview process the Warden stated immediate action would be taken to protect the victim (inmate). The victim (inmate) might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. Further the perpetrator, if known, would be placed in their transitional unit, and transferred to another facility.

Through the interview process random staff reported if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, protect the victim, contact their supervisor, and preserve evidence.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section J, 1, indicates inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternative available.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 10, Section K, 3, specifies the IPCM is responsible for recommending placement and/or transfer of inmates involved in reported incidents of sexual abuse and sexual harassment with the approval of the Warden or designee, and taking immediate action when an inmate is subject to a substantial risk of imminent abuse.

According to the PAQ in the past 12 months, the agency or facility determined six times that an inmate was subject to a substantial risk of imminent sexual abuse. In each case, action was taken immediately taken. In each case the incident was documented on a Duty Officer Report (DOR).

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| | <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding agency protection duties.</p> |
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| 115.63 | Reporting to other confinement facilities |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC form 454-F, Reporting to Other Confinement Facilities <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head or designee • Warden • PREA Director (PD) • Institutional PREA Compliance Manager (IPCM) <p>During the interview process, the Agency Head designee, Warden, PREA Director and the IPCM all confirmed any notification received regarding a PREA incident, whether it be sexual abuse or sexual harassment or sexual misconduct that occurred within any ADOC facility will be investigated in accordance with the guidelines of ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016.</p> <p>During the interview process the Agency Head designee indicated all allegations received are referred to the Director of Investigations, with contact being made with the IPCM and an investigator is assigned to conduct a review.</p> <p>During the interview process the Agency Head designee, Warden, PREA Director and IPCM all indicated once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately assigned to an investigator to conduct the investigation.</p> <p>Through the interview process the Warden indicated when the facility receives an allegation from another facility/agency that sexual abuse or sexual harassment occurred at their facility involving another inmate, they will monitor the inmate until the investigation is complete. If it involves a staff member, the staff member would be placed in a no-contact status, until the investigation was complete.</p> |

Through the interview process, the Warden indicated that any report of sexual abuse or sexual harassment that occurred at another facility would immediately be met with notification from his office to the office of the Warden from the other facility.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, d, mandates the Warden, upon receiving an allegation that an inmate was sexually abused while confined in another facility, shall notify the lead of the other facility of the alleged abuse as soon as possible, but no later than 72-hours from receiving the allegation. (See ADOC Form 454-F, Reporting to Other Confinement Facilities.)

According to the PAQ, the facility received zero allegations that an inmate was abused while confined to another facility. The PAQ further indicated if an allegation had been received indicating an inmate was abused while confined at another facility, the IPCM would notify the Warden and fill out form 454-F (Reporting to other Confinement Facilities). The Warden would notify the Warden at the other facility. Both Wardens would sign that they sent and received the information. The IPCM would notify LESD and send the DOR. If a sexual assault kit is needed the inmate will be transported to the SANE Center for the exam.

Provision (b)

The 72-hour notification requirements are the same as indicated in Provision (a).

The IPCM provided a blank copy of the ADOC Form 454-F, Reporting to Other Confinement Facilities for the Auditor to review.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, d, indicates the Warden is responsible for notifying the other confinement facility and should do so using ADOC Form 454-F, Reporting to Other Confinement Facilities.

Provision (d)

According to information received from the facility, in the last twelve months they received zero inmate notifications of sexual abuse or sexual harassment that occurred in another confinement facility. The Warden and the IPCM confirmed this information. The Warden confirmed a form ADOC Form 454-F, Reporting to Other Confinement Facilities would have been provided to the other facility within 72 hours of the inmate reporting the allegation.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding reporting to other confinement agencies.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- PREA First Responder Duty Card
- PREA Pocket Guide for First Responders

Interviews with the following:

- Warden
- Security Staff First Responders
- Non-Security First Responder

During the interview process the Warden indicated first responder staff have been trained in the PREA process, and frequent training is conducted to ensure competency and compliance.

During the interview process staff were able to articulate step-by-step how to respond to a PREA incident. All staff, volunteers and contractors were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident to the senior staff member on duty.

During interviews with first responders, all stated they were trained in the PREA process through annual in-service training, on the job training, and staff meetings. Each verbalized the IPCM is constantly reminding them of PREA policies and speaking with them regarding the importance of PREA and sexual safety.

During the interview process non-security staff who were interviewed, all stated they would notify security staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until security staff arrived. They all verbalized the importance of, as well as their understanding of, the need for confidentiality in all cases.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, Section G, 1, a-g, states that upon learning of an allegation of a PREA related incident, the first responder shall:

- a. Ensure the victim(s), aggressor(s), and witness(es) are physically separated.

- b. Protect and preserve the crime scene until appropriate steps can be taken to collect evidence.
- c. Request the victim not bathe, wash, brush teeth, eat, drink, smoke, urinate or defecate.
- d. Ensure the alleged aggressor does not bathe, wash, brush teeth, eat, drink, smoke, urinate or defecate.
- e. If the first responder staff is not security staff, the responder should request the alleged victim not take any actions that would destroy evidence and notify security staff.
- f. Do not show the alleged victim(s), aggressor(s), or witness(es) any evidence, such as but not limited to, pictures or video footage of the incident, and do not interview any of these parties on the specifics of the incident.
- g. As soon as possible first responders shall notify the Shift Commander of the incident and draft an Incident Report.

All security staff, non-security staff and administrative staff interviewed had a First Responder Duty Card. This card is a pocket size laminated card that provides a step-by-step outline of what staff are required to follow when a PREA incident occurs or is reported. Each card provides bulleted items from the PREA policy mentioned in this provision.

The Auditor was provided a copy of the spiral bound pocket booklet entitled "Prison Rape Elimination Act PREA- A Trauma-Informed Guide for First Responders." This booklet was provided to all staff. The booklet is divided into the following sections:

- Intro to PREA
- Definitions
- PREA Components
- Prevention
- Detection
- Response
- Summary and Resources.

Each section gives the staff an overview of all aspects of PREA related issues and responsibilities and roles of first responders, as well as other staff.

Per the PAQ, In the past 12 months, there was one allegation that an inmate was sexually abused. The allegation was inmate-on-inmate and was investigated administratively.

After investigation, it was deemed to be unsubstantiated. It was referred to OPS for further investigation and prosecutorial consideration. After review and investigation, the allegation and investigative finding were submitted for prosecution. At the time of the on-site audit the referral for prosecution had not been closed.

According to the PAQ of these allegations of sexual abuse in the past 12 months:

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| | <ul style="list-style-type: none"> • Zero times the first security staff member to respond to the report separated the alleged victim and abuse. • Zero times the staff were notified within a time that still allowed for the collection of physical evidence. • Due to time frames, zero times did first security staff member to respond to the report requested that the alleged victim (and alleged abuser) not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. <p>Provision (b)</p> <p>Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegations of sexual abuse and seven allegations of sexual harassment.</p> <p>The PAQ indicates that the first responder was not a security staff member.</p> <p>The Auditor's review of the PREA training curriculum all staff, volunteers and contractors received identifies whoever received the information first, as a First Responder, including staff, volunteers, and contractors. As a First Responder these individuals are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, relay any observations to the investigators, IPCM or shift commander.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff first responder duties.</p> |
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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • PREA First Responder Card • PREA Pocket Guide for First Responders • Coordinated Response SOP |

Interviews with the following:

- Warden

Through the interview process, the Warden indicated the coordinated response has been identified in the policy ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016. Indicating each item breaks down the various responsibilities for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on-the-job training. Further, the staff have all been issued PREA First Responder Card and the PREA Pocket Guide for First Responders to keep on their person while at work.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, Section G, 1, outlines the responsibilities of a First Responder upon learning of an allegation of a PREA related incident.

According to the PAQ, the facility has developed 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 Auditor was provided a copy of the spiral bound pocket booklet entitled "Prison Rape Elimination Act PREA- A Trauma-Informed Guide for First Responders." This booklet was provided to all staff. The booklet is divided into the following sections:

- Intro to PREA
- Definitions
- PREA Components
- Prevention
- Detection
- Response
- Summary and Resources.

Each section gives the staff an overview of all aspects of PREA related issues and responsibilities and roles of first responders.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, Section G, 2, the responsibilities of a Shift Commander upon learning of an allegation of a PREA related incident.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, Section G, 3, outlines the responsibilities of Medical and Mental Health care personnel upon learning of an allegation of a PREA related incident.

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| | <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, outlines the responsibilities of employees and staff when reporting an allegation of a PREA related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 21, Section H, 2, outlines the steps for inmates to report an allegation of a PREA related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, 1, outlines the roles and responsibilities of the IPCM and investigators in investigations of inmate-on-inmate sexual abuse and staff-on-inmate sexual abuse and harassment.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, 2, outlines the roles and responsibilities of the IPCM and investigators in investigations of inmate-on-inmate sexual harassment.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding coordinated response.</p> |
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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Memorandum, Collective Bargaining and PREA Standard 115.66, dated 3/19/19. <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Personnel Director <p>Through the interview process, the Personnel Director indicated corrections officers and other prison staff employed by the ADOC do not have a labor union. Further the ADOC does not engage in collective bargaining with corrections officers or other</p> |

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| | <p>facility staff.</p> <p>Provision (a)</p> <p>ADOC Memorandum, Collective Bargaining and PREA Standard 115.66, dated 3/19/19, from the agency Personnel Director states corrections officers and other prison staff employed by the ADOC do not have a labor union. Therefore, the ADOC does not engage in collective bargaining with corrections officers or other facility staff.</p> <p>Management does have the right to separate the inmate from a staff member who is the subject of an investigation. This separation can either be temporarily reassigning the employee, redirecting the employee, or restricting the employee from the grounds during the investigation.</p> <p>The facility has not had any PREA related incidents that required alleged staff sexual abusers to not have contact with any inmate pending the outcome of an investigation during the audit period.</p> <p>Provision (b)</p> <p>The Auditor is not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding preservation of ability to protect inmates from contact with abusers.</p> |
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| 115.67 | Agency protection against retaliation |
| | Auditor Overall Determination: Exceeds Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Form 454-D, Sexual Abuse/Harassment Retaliation Monitoring <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head or designee • Warden • Institutional PREA Compliance Manager (IPCM) <p>Through the interview process the Warden advised:</p> |

- There are multiple measures used to protect inmates and staff from retaliation.
- These measures include considering and monitoring if the inmate is being given changes in housing assignments, work assignments or an increase in disciplinary reports.
- The monitoring of staff includes watching for negative performance reviews or work reassignments.
- Retaliation is not tolerated at the facility.
- If retaliation does occur, those responsible for the retaliation will be investigated and disciplined.
- Disciplinary action would be taken related to any retaliation and the alleged abuser could be placed in restrictive housing if needed.

Through the interview process the IPCM indicated status checks are conducted on inmates weekly for retaliation monitoring.

Through the interview process the Agency Head designee indicated

- Protective measures would be taken if an inmate or staff member expressed fear of retaliation.
- Protective measures would include housing changes or facility transfers, placement in protective custody if needed and continuous monitoring of the inmate.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section K, 1, specifies that retaliation in any form for the reporting of, or cooperation with, sexual abuse or harassment allegations is prohibited.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section K, 2, indicates the Warden and the IPCM shall ensure inmates and staff who report sexual abuse, sexual harassment or cooperate with the sexual abuse investigation are protected from retaliation by other inmates or staff.

According to the PAQ the IPCM has been identified as the individual who is primarily responsible for monitoring retaliation.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, pp. 23-24, section K, outlines the agency's protection against retaliation. Section K2 specifically states that the Warden and IPCM are responsible for ensuring protection against retaliation.

A review of the ADOC 454-D for the one allegation of sexual abuse reported in the

previous twelve months, indicated the required monitoring indicated that no retaliation was reported.

The IPCM indicated the facility did not have any incidents that required inmates to be transferred due to a PREA related incident for sexual safety, during this reporting period.

Provision (c)

The PAQ indicated that the facility monitors for retaliation and that it does so for at least 90 days.

The PAQ indicated that there had been zero instances of retaliation in the previous twelve months.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section K, 2, a, mandates the Warden and the IPCM shall ensure inmates and staff who report sexual abuse and sexual harassment or cooperate with a sexual abuse investigation are protected from retaliation by other inmates or staff. Moreover, it delegates the primary responsibility to the IPCM for this monitoring; stating the IPCM will monitor the conduct and treatment of inmate(s) or staff for at least 90-days after an incident is reported. The time frame can be extended in thirty-day increments if there is a continuing need.

Provision (d)

The IPCM showed the Auditor ADOC Form 454-D, Sexual Abuse/Harassment Retaliation Monitoring, which would be used to track retaliation if it occurred. This three-page form is divided into thirteen weeks with each week having dedicated space for the date, steps taken to ensure retaliation was not happening and comments by the monitoring staff member. At the end of the form is a space for the findings of the retaliation monitoring, i.e., monitoring complete – no retaliation found; monitoring complete, retaliation addressed and resolved; continue monitoring for thirty days. The very bottom of the form has a space for the signature of the IPCM monitoring the retaliation and the date.

Provision (e)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section K, 2, d, directs that all appropriate measures shall be taken to protect any individual who cooperates with an investigation and expresses fear of retaliation.

Provision (f)

The Auditor is not required to audit this provision.

Conclusion:

Considering the IPCM meets with the inmate weekly for ninety days during the retaliation monitoring period, the Auditor has determined the agency/facility exceeds

thestandardregardingagencyprotectionagainstretaliation.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Form 454-H, Prison Rape Elimination Act (PREA) Post- Allegation Protective Custody, dated January 4, 2016
- Post Allegation Protective Custody Form
- Restricted Housing Log/Holding Cell/Crisis Cell

Observations during on-site review

During the tour, it was observed that there were no inmate victims of sexual abuse in restrictive housing as a means of involuntary protection or segregation due to an allegation of sexual abuse.

Interviews with the following:

- Warden
- Staff who supervise inmates in segregated housing

The interview with the Warden indicated that it is prohibited to place inmates in involuntary segregated housing after a sexual abuse or sexual harassment allegation. Inmates are only placed in restrictive housing if requested.

Interviews with staff who supervise inmates in segregated housing indicated that there have been zero inmates placed in restrictive housing due to their allegations of sexual abuse or for risk of sexual victimization.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section J, 1, specifies inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternative available. (See ADOC Form 454-H, PREA Post Allegation Protective Custody)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse

and Harassment, dated January 4, 2016, p. 23, Section J, 2, indicates in cases where segregated housing is the only means to protect such an inmate, the inmate shall have access to all programs, privileges, education, and work opportunities, to the extent possible, and it shall only be until an alternative means of separation from likely abusers can be arranged, a time not ordinarily to exceed thirty days. Furthermore, in these cases the facility shall clearly document:

1. The basis for the facility's concern for the inmate's safety
2. The reason why no alternative means of separation can be arranged.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding post allegation protective custody.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Administrative Regulation #300
- ADOC Standard Operating Procedure Investigations & Intelligence #454
- Alabama Department of Corrections form #454-C
- Investigative Outcomes/Disposition
- Investigative Review Team Meeting Minutes
- Notification to Inmate

Interviews with the following:

- Investigative Staff
- Warden
- PREA Director (PD)
- PREA Compliance Manager (IPCM)

During the interview process the LESD 0investigator indicated:

- Investigations begin immediately following notification from the facility. The same protocols are used regardless of how the incident is reported, whether it is in person, telephonically, third party, by mail or anonymously.

- Specialized training had been provided.
- All investigations follow practically the same investigative format. Interviews with the victim first, then any witnesses, leaving the perpetrator for last. The investigation varies slightly if it is an alleged sexual harassment rather than an alleged sexual assault or sexual abuse.
- The credibility of anyone involved in the investigation is determined through the investigative process. Everyone is treated as credible and truthful unless the investigation proves otherwise.
- Polygraphs are not used in the investigative process of PREA cases.
- If a principle (victim or abuser) is released or terminated from the agency, it in no way alters the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved.
- In administrative investigations the evidence is followed as it unfolds. In following the evidence, Investigative staff attempt to determine if staff actions or failure to act contributed to the allegation. All findings are summarized in an investigative report.
- When it appears, a crime may have been committed, all questions immediately stop. The perpetrator is immediately read their Miranda rights and the case, including all evidence. At this point, LESD will only conduct compelled interviews after consultation with prosecutors, and a definite determination is made such interviews will not be an obstacle for subsequent criminal prosecution.
- When it seems, a crime has been committed the case is referred to the district attorney. The district attorney then decides if it is prosecutable. If so, the case is criminally investigated. Upon the conclusion of the criminal investigation, the case is presented for prosecution.

The investigator reported he could not think of a possible situation where an external agency would conduct a sexual abuse investigation inside of an ADOC facility. ADOC is set up in such a manner that it handles all its own administrative and criminal investigations.

Through the interview process, the Warden and the PREA Director both reported they had never known of an outside agency investigating, but if it did occur, they would remain in the loop through the LESD Director.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, and the ADOC Standard Operating Procedure I & I #454, Investigation, and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, require the Department to investigate all allegations of sexual misconduct involving inmates thoroughly, promptly, and objectively under the jurisdiction or authority of the Department. When LESD (formerly I & I) investigate allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations including third party and anonymous reports.

The auditor reviewed documentation confirming the investigators completed the specialized investigative training from the National Institute of Corrections. LESD completes all administrative and criminal investigations. LESD refers all substantiated criminal cases to the local district attorney office and are available, as requested, to work with those authorities to support criminal prosecution of those cases.

The PAQ reflects there were a total of eight allegations of sexual abuse and sexual harassment in the past twelve months. Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review, it was referred for prosecution. The case remains in the prosecutorial process.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were investigated administratively. After investigation all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.

The PAQ indicated there were one forensic medical examination completed in the past twelve months. These examinations were conducted by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was offered to the inmate who had a SANE examination. This was confirmed by the IPCM as well as SANE personnel.

Provision (b)

ADOC Standard Operating Procedure I & I #454, Investigation, and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 2, III, C, requires all investigators used by the ADOC to receive special training in sexual abuse investigation pursuant to 115.34 of the Prison Rape Elimination Act.

LESD Investigators receive additional training including interviewing techniques for

sexual abuse victims, conducting sexual abuse investigations in a confinement setting, investigation and evidence collection for inmate sexual offenses, sexual harassment, and custodial sexual misconduct. This training is documented and was verified by the Auditor through employee signatures on sign-in sheets as well as certificates of completion.

The Auditor reviewed the investigator training records and verified attendance and participation in all mandated training.

Provision (c)

In ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 2, III, it states investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Furthermore, it states investigators shall interview alleged victims, suspected perpetrators, and witnesses in person, and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

If it is an alleged sexual assault or sexual abuse incident, the investigator goes to Crisis Services of North Alabama #256-716-4052, where the victim is being seen. Except in the cases where the SAFE/SANE team collects the evidence, the investigator collects and secures all evidence. The investigator is trained in evidence collection through the agency's investigator training and NIC training. The Auditor reviewed training records, which confirmed this training.

Provision (d)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, F, 1, i, states when the quality of evidence supports criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews could be an obstacle for subsequent criminal prosecution.

Provision (e)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 2, E, is clear the credibility of the alleged victim, suspect and witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff. LESD shall not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth telling or verification device as a condition of proceeding with the investigation of any allegation.

Provision (f)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, F, 2 & 3, state administrative investigations shall include an effort to determine whether staff actions or failure to act contributed to the abuse; and shall be documented in written

investigative reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

Provision (g)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, G, states that criminal investigations shall be documented in a written investigative report that contains a thorough description of physical, testimonial, and documentary evidence with attached copies of all documentary evidence where feasible.

When asked about handling criminal investigation, the investigator reported all steps of the process are thoroughly documented, including investigative steps, interviews, facts, evidence and findings.

Provision (h)

During the past 12 months there has been zero substantiated allegations of conduct that appear to be criminal that were referred for prosecution

Provision (i)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, J, states that the departure of the alleged abuser or victim from the employment of the facility or agency, shall not provide a basis for terminating an investigation.

Provision (j)

ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, J, requires the agency retain all written reports referenced in this provision for as long as the individual is incarcerated or employed by the agency, plus five years.

Provision (k)

Auditors are not required to audit this provision.

Provision (l)

While the ADOC handles all aspects of the investigations, ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, L, indicates that if an outside agency were to investigate an allegation of sexual abuse within one of its facilities, the facility shall cooperate with the outside investigators. Outside agency involvement is only authorized by and coordinated through LESD and the ADOC Commissioner.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding

criminal and administrative agency investigations.

115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Administrative Regulation #300

Interview with the following:

- Investigative Staff

Through the interview process the investigative staff relayed that during an investigation, all available evidence is collected (physical, from the victim, from the perpetrator, from the scene, interviews, etc.) and submitted to both facility administration and the District Attorney's Office for their review and consideration.

Through the interview process, the investigative staff reported a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, specifies the standard of proof in all investigations of sexual abuse and harassment is a preponderance of the evidence.

ADOC Administrative Regulation #300, Investigations, and Intelligence Division, dated April 18, 2016, p. 5, declares the LSED (formerly I & I) Division shall distribute all investigative reports as follows:

- Commissioner or designee
- Inspector General
- Deputy/Associate Commissioners, Institutional Coordinators, Institutional Wardens, as appropriate
- District Attorney of county having jurisdiction if incident involved criminal conduct
- ADOC official that requested the investigation
- Investigations that involve central office personnel will be distributed only to

the Commissioner of Corrections.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding evidentiary standard for administrative investigations.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- Investigative Outcome/Disposition
- Notification to Inmate (Must have Signature)
- Investigative Review Team Meeting

Interview with the following:

- Warden
- Investigative Staff

During the interviewing process the investigative staff reported the final step of the investigation process, takes place after all findings have been determined. At the conclusion of any PREA investigation LESD submits a close out letter to the victim and the perpetrator, advising each of the conclusion of the investigation and the findings. The Warden was asked a similar question and echoed the response of the investigative staff.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section H, 2, f, specifies following the LESD investigation into an inmate's allegation that he or she suffered from sexual abuse, the LESD shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

The PAQ reflects there were a total of eight allegations of sexual abuse and sexual harassment in the past twelve months. Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review, it was referred for prosecution. The case remains in the prosecutorial process.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were investigated administratively. After investigation all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.

The PAQ indicated there was one forensic medical examination completed in the past twelve months. These examinations were conducted by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was offered to the inmate who had a SANE examination. This was confirmed by the IPCM as well as SANE personnel.

Provision (b)

N/A

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section C, 6, indicates the LESD shall be responsible for informing an inmate of the following information when an inmate alleges that an employee/staff member committed sexual abuse against the inmate:

1. The employee/staff is no longer with the ADOC.
2. The employee/staff is no longer at the institution.
3. The employee/staff has been indicted on a charge related to sexual abuse.
4. The employee/staff has been convicted on a charge related to sexual abuse.
5. All Notifications shall be documented.

Provision (d)

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| | <p>See provision (a) for the breakdown of allegations in the past 12 months.</p> <p>Out of the total of three sexual abuse cases, zero were referred for a forensic examination. All forensic examinations are conducted by SANE personnel at One Place Family Justice Center, 530 S, Lawrence Street, Montgomery, AL 36104; 334-262-7378.</p> <p>Provision (e)</p> <p>Records reviewed on-site revealed there were 63 PREA allegations in the past twelve months. Of the 63 allegations, 60 were sexual abuse allegations and 3 were sexual harassment allegations. All were administratively investigated. There were zero criminal investigation in the past 12 months.</p> <p>Provision (f)</p> <p>The Auditor is not required to audit this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding reporting to inmates.</p> |
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| 115.76 | Disciplinary sanctions for staff |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Administrative Regulation #208, Personnel, dated 08/17/05, Employee Standards of Conduct and Discipline • ADOC memorandum, PREA Compliance Standard 115.76, Disciplinary Sanctions for Staff <p>Interviews with the following</p> <ul style="list-style-type: none"> • Warden • Institutional PREA Compliance Manager (IPCM) <p>During the interview process the Warden and the IPCM both, individually and collectively, confirmed during the previous twelve months there had not been any terminations, resignations, or other sanctions against staff for violation of the</p> |

agency's sexual abuse or sexual harassment or sexual misconduct policies.

Provision (a)

According to the PAQ, the facility staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, Section V, 4, a, indicates that if an employee has engaged in the following conduct:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institutions
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
3. Has been civilly or administratively adjudicated to have engaged in activity described above

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, Section V, 4, d states employees shall be subject to disciplinary sanctions up to and including termination for violation of the agency's sexual abuse or sexual harassment policies.

Provision (b)

According to the PAQ, in the past twelve months, zero staff from the facility violated the agency sexual abuse or sexual harassment policy. In the past 12 months, zero staff from the facility were terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.

According to the PAQ, termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline provides a detailed description of the standards of conduct and discipline, and the responsibilities, policies and procedures concerning employee behavior and work performance. It also provides a table of disciplinary sanctions as a guide to implement disciplinary action when necessary.

Additionally, ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline includes numerous sample documents relating to personnel matters, such as Notice of Pre-Dismissal Conference, Summary of Pre-Dismissal Conference, Resignation from Employment, as well as a disciplinary matrix ranging from verbal counseling to dismissal.

Provision (c)

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| | <p>ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline indicates disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstance of the acts committed, the staff members disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>Provision (d)</p> <p>ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline mandates that all terminations for violations of ADOC's sexual abuse and sexual harassment policies or resignations by staff who would have been terminated for sexual abuse or sexual harassment, if not for their resignation, shall be reported to local prosecutors, unless the activity was clearly not criminal in conformance with Alabama law. ADOC shall also report the staff members to any relevant licensing bodies.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for staff.</p> |
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| 115.77 | Corrective action for contractors and volunteers |
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| | <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Administrative Regulation #216, Personnel, dated December 7, 2015 • ADOC memorandum, PREA Compliance Standard 115.77, • Corrective Action for Contractors and Volunteers • Training Records for Contractors • Training Records for Volunteers <p>Interview with the following:</p> <ul style="list-style-type: none"> • Warden • Institutional PREA Compliance Manager (IPCM) • Contractor • Volunteer |

During the interview process the Warden disclosed that when a potential PREA issue arises with a volunteer or contractor, the matter is immediately referred to the Director of LESD for follow-up. During this time, the contractor or volunteer are not allowed access to the facility pending investigation and review of the matter.

During the interview process the IPCM confirmed 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. The IPCM further confirmed during the preceding twelve months there were not any incidents of PREA allegations related to volunteers or contractors.

During the interview process a volunteer and a contractor acknowledged completing PREA training before being allowed contact with inmates. Recalling the possibility of separation from inmates during any type of PREA investigation should an issue arise.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, Section V, 4, b, 4, indicates that before hiring a new employee or contractor, the ADOC Personnel Division or designee shall apprise potential employees and contractors that false information or omissions regarding the following misconduct shall be grounds for termination:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institutions.
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.
3. Has been civilly or administratively adjudicated to have engaged in activity described above.

Moreover, each new employee or contractor must be apprised of their continuing duty to disclose such conduct.

Provision (b)

ADOC Administrative Regulation #216, Personnel, dated December 7, 2015, pp. 6 - 11 are attachments of forms a new employees must complete before being hired. The required questions are on the forms.

According to the PAQ, there were zero incidents of PREA allegations related to volunteers or contractors in the past twelve months.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding corrective action for contractors and volunteers.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Administrative Regulation #403

Interview with the following:

- Warden
- Medical Staff

During the interview process the Warden indicated inmate discipline is based on level of the violation and the penalties imposed are comparable to other inmate's penalties. Penalties might include change of housing assignment, loss of good-time credit, and prosecution, when appropriate.

During the interview process the Warden indicated if the inmate has a mental history, mental health staff will be involved to assist in determining appropriate sanctions.

During the interview process the medical staff confirmed they can make recommendations for referrals for inmates for therapy, counseling, or other interventions to address underlying issues related to abuse. The inmate's issues would be addressed during regular counseling sessions or group counseling sessions. Participation in interventions is not a condition for access to other programming or benefits.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, indicates that inmates shall be subject to disciplinary sanctions following a formal disciplinary process to findings that the inmate engaged in inmate-on-inmate sexual abuse to following a criminal finding of guilt for an inmate-on-inmate sexual abuse.

Additional information received provided an overview of the administrative and criminal cases, including status. Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review, it was referred for prosecution. The case remains in the prosecutorial process.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were investigated administratively. After investigation all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.

The PAQ indicated there were one forensic medical examination completed in the past twelve months. These examinations were conducted by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was offered to the inmate who had a SANE examination. This was confirmed by the IPCM as well as SANE personnel.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, H, 2, e, states that each case shall be carefully evaluated on its merit, considering evidence and circumstances and whether there is any possibility that the alleged incident could have occurred.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, H, 2, e, states that each case shall be carefully evaluated on its merit, considering evidence and circumstances and whether there is any possibility that the alleged incident could have occurred.

Provision (d)

The IPCM reported the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Provision (e)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, H, 2, e, states that each case shall be

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| | <p>carefully evaluated on its merit, considering evidence and circumstances and whether there is any possibility that the alleged incident could have occurred.</p> <p>The IPCM indicated the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.</p> <p>Provision (f)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, H, 2, c, specifies an inmate reporting sexual abuse or sexual harassment, shall not be issued a disciplinary report for lying based solely on the fact their allegations were determined to be unfounded or that the inmate later decides to withdraw his allegation.</p> <p>The IPCM indicated the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>Provision (g)</p> <p>ADOC Rules Violation Definitions and Examples, associated with RV#912 Sexual Offenses (non-Forcible) / Soliciting is defined as the commission of any sexual act during which both participants act willingly, to include touching, hugging, fondling, kissing, etc. The agency prohibits all sexual activity between inmates.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for inmates.</p> |
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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Form 454-C, PREA Risk Factors Checklist • Risk Assessment Checklist • Mental Health Referral • Medical Referral • Classification Spreadsheet |

Interview with the following:

- Medical Staff
- Staff who conduct risk screenings

Through the interview process staff who conduct intake screenings confirmed:

Inmates are offered a follow-up meeting with a mental health professional, within fourteen days of intake, if the intake screening indicates the inmate is at substantial risk for victimization, aggressiveness or has a history of victimization.

All medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.

Inmates are offered a follow-up meeting with a mental health professional, within fourteen days of intake, if the intake screening indicates the inmate is at elevated risk for victimization, aggressiveness or has a history of victimization.

Through the interview process the medical staff confirmed they obtained 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 eighteen.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 15, F, specifies if an inmate has an elevated risk to be victimized or screens as sexually aggressive a mental health professionals shall meet with the inmate and review their screening information. If the screening indicates the inmate has prior sexual victimization or sexual aggression in their history, the mental health professionals shall offer a follow-up meeting with mental health within fourteen days of the intake screening.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 6 indicates within a set time period, not to exceed thirty days from the inmate's arrival, the inmate shall be re-assessed for risk of victimization or abusiveness using the risk screening assessment and any additional, relevant information received since the intake screening. An inmate's risk level is to also 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.

During the document review there were inmate names, chosen randomly from the master roster, with varying arrival dates to determine the records to be reviewed. Of the 50 records reviewed:

PREA Information at Intake - 50 were given PREA information within 24 hours of arrival at the facility. This was confirmed through a signed PREA General Information Form, documenting they had received PREA information.

72-hour Risk Assessment - 50 had a risk assessment within 72 hours of arrival at the facility. This was confirmed by reviewing the completed the risk assessment instrument.

30-day Comprehensive PREA Education - 50 were provided comprehensive PREA Education within 30 days of arrival. This was confirmed by the signed Inmate Awareness Acknowledgement Form.

PREA 30-day Re-Assessment - 50 reassessments were conducted within 30 days of arrival. This was confirmed by reviewing the completed PREA Reassessment form, ADOC Form 454-K-August 1, 2016.

These documents were reviewed off site after hours and returned to the facility the next morning.

Provision (c)

Policy dictates if the screening indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the staff ensures that the inmate is offered a follow-up meeting with a mental health practitioner within fourteen days of the intake screening.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 9, denotes that all information obtained during the intake screening process and PREA Mental Health Assessment shall be used to make individualize and safety based determinations and assist in the initial classification and institutional assignment of the inmate as well as determine work, education and programs, in accordance with ADOC Classification Manual, AR433 and AR435, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Provision (e)

The IPCM confirmed medical and mental health practitioners obtained 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 eighteen.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding medical and mental health screenings, history of sexual abuse.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
- ADOC Form MH-008, Referral to Mental Health.
- ADOC MOU with Alabama Coalition Against Rape (ACAR)

Interview with the following

- Medical Staff
- First Responders

Through the interview process medical staff reported treatment is provided immediately and is based on their professional judgment. Medical and mental health work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Interviews with first responders revealed notification is made via the telephone to the medical staff who are on duty when they are informed of an incident of sexual abuse. The inmate is taken to Crisis Services of North Alabama #256-716-4052., if a forensic examination is appropriate.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, F, 3, a, specifies that victims of sexual abuse at the facility shall be referred immediately to Medical. Victims shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The IPCM shall also refer an inmate victim immediately to an ADOC Mental Health professional for further treatment and counseling. A referral shall be made utilizing ADOC Form MH-008, Referral to Mental Health.

A Memorandum of Understanding (MOU) has been entered into between the ADOC and the Alabama Coalition Against Rape (ACAR) for the purpose of facilitating services related to implementation of Prison Rape Elimination Act (PREA). ACAR is a community service provider who is being contracted to provide confidential emotional support services related to sexual abuse to inmates within ADOC custody.

All forensic medical exams and SAFE/SANE (Sexual Assault Nurse/Examiner) personnel are located at Crisis Services of North Alabama #256-716-4052. In the

unlikely event a SAFE/SANE practitioner is not on shift, one is always on call 24/7 and will report immediately to conduct the rape kit examination, provide results of the exam to ADOC, as well as other issues relative to the SART (Sexual Assault Response Team) exam.

The IPCM confirmed there was one inmate who were transported for SANE examinations in the past twelve months.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, b, dictates that if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, G, 3, mandates that inmate victims of sexual abuse or sexual harassment while incarcerated be offered timely information about access to emergency contraception, pregnancy tests, tests for sexually transmitted infections, and prophylaxis where medically appropriate.

As previously cited in Provision (a) medical and mental health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and mental health work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, G, 3, c, declares treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with an investigation arising out of the incident.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the 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

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation #454
- ADOC Form MH-008, Referral to Mental Health
- ADOC MOU with ACAR
- Referral for on-going treatment (Must have inmate signature)

Interview with the following:

- Medical Staff

Through the interview process medical staff reported treatment is provided immediately and is based on their professional judgment. Medical and mental health work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Interviews with medical staff support compliance in evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff reflects an active understanding of the importance of appropriate evaluation, follow-up, treatment planning and service referral.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, d, specifies that inmates shall receive medical and mental health evaluations and treatment shall be offered to all inmates who have been victimized by sexual abuse.

A Memorandum of Understanding (MOU) has been entered into between the ADOC and the Alabama Coalition Against Rape (ACAR) for the purpose of facilitating services related to implementation of Prison Rape Elimination Act (PREA). ACAR is a community service provider who is being contracted to provide confidential emotional support services related to sexual abuse to inmates within ADOC custody.

All forensic medical exams and SAFE/SANE (Sexual Assault Nurse/Examiner) personnel are located at Crisis Services of North Alabama #256-716-4052.. SAFE/SANE practitioners are on staff. In the unlikely event a SAFE/SANE practitioner is not on shift, one is always on call 24/7 and will report to conduct the rape kit examination, provide results of the exam to ADOC, as well as other issues relative to the SART (Sexual Assault Response Team) exam.

The Auditor reviewed records produced by the facility documenting the community standard of care, the evidence of Sexually Transmitted Infection testing, prophylaxis treatment, psychiatry and psychology services, crisis intervention. These services are free of charge to inmates regardless of whether the abuser is named or whether the inmate cooperates with an investigation.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, e, dictates that 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 upon their released from custody.

Provision (c)

Interviews with medical staff support compliance in evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff reflects an active understanding of the importance of appropriate evaluation, follow-up, treatment planning and service referral.

Documentation and records review supported attentiveness to follow-up services and treatment plans. The files demonstrated detailed and professional notes on the evaluations conducted by medical and mental health staff and their follow-up appointments with inmates. Follow-up consisted of routine inmate visits with medical and mental health staff.

Provision (d)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, mandates that inmate victims of sexual abuse or sexual harassment while incarcerated be offered timely information about access to emergency contraception, pregnancy tests, tests for sexually transmitted infections, and prophylaxis where medically appropriate.

The IPCM confirmed there was one inmate referred for SART examinations by SAFE/ SANE practitioners in the previous twelve months.

Provision (e)

N/A - All-male facility.

Provision (f)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, mandates that inmate victims of sexual abuse or sexual harassment while incarcerated be offered timely information about access to emergency contraception, pregnancy tests, tests for sexually transmitted infections, and prophylaxis where medically appropriate.

Provision (g)

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| | <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, e, mandates that all ongoing 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.</p> <p>Provision (h)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, g, states an attempt shall be made to conduct a mental health evaluation of known Inmate-on-Inmate abusers within sixty (60) days of learning of such abuse history and offer treatment. All referrals for mental health shall be made using ADOC Form MH-008, Referral to Mental Health.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims.</p> |
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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • ADOC Form 454-E, Sexual Abuse Incident Review • Sexual Assault Incident Review <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Warden • Institutional PREA Compliance Manager (IPCM) • Incident Review Team (IRT) <p>Through the interview process, the Warden indicated the multidisciplinary IRT consists of intermediate or higher-level facility managers, supervisors, investigators, as well as medical and mental health practitioners. Further the facility is willing to consider and incorporate recommendations from team members.</p> <p>Through the interview process the Warden, IPCM as well as other members of the</p> |

Incident Review Team reported the team would make recommendations for corrections or improvements for shortcomings discovered during the incident review process.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, H, 1, k, indicates that a review team, including upper-level management officials, with input from line supervisors, investigators, and medical and mental health practitioners, shall conduct an incident review within thirty days of the conclusion of every investigation of substantiated and unsubstantiated allegations of sexual abuse or staff-on-inmate sexual harassment.

Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there was one allegation of sexual abuse and seven allegations of sexual harassment.

The one sexual abuse allegation was inmate-on-inmate and was investigated administratively. After administrative investigation, it was deemed unsubstantiated. The case was referred for prosecutorial review and consideration. After review, it was referred for prosecution. The case remains in the prosecutorial process.

The Auditor reviewed one sexual abuse allegation record. The alleged victim was offered medical and mental health services. Retaliation monitoring was put into place as required. The inmate was notified in writing of the results of the investigation in a timely manner. The closed case had a sexual abuse incident team review within 30 days of the completion of the investigation.

The Auditor reviewed seven sexual harassment allegation records. Four allegations were inmate-on-inmate and were investigated administratively. After investigation all four were deemed unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined.

The remaining three were staff-on-inmate sexual harassment records. They were investigated administratively. After investigation one was deemed to be unfounded and the remaining two were unsubstantiated. The cases were referred for prosecutorial consideration. After review, prosecution was declined on one case, one was ongoing, and one was referred for prosecution. In the closed sexual harassment cases the inmates was notified in writing of the results of the investigation in a timely manner.

The PAQ indicated there was one forensic medical examination completed in the past twelve months. This examination was conducted by SANE personnel at Crisis Services of North Alabama #256-716-4052. A victim advocate was offered to the inmate who had a SANE examination. This was confirmed by the IPCM as well as SANE personnel.

Provision (b)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, H, 1, k, indicates that a review team,

including upper-level management officials, with input from line supervisors, investigators and medical and mental health practitioners, shall conduct an incident review within thirty days of the conclusion of every investigation of substantiated and unsubstantiated allegations of sexual abuse or staff-on-inmate sexual harassment.

See Provision (a) for the details of the Sexual Abuse Incident Reviews.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, H, 1, k, indicates that a review team, including upper-level management officials, with input from line supervisors, investigators and medical and mental health practitioners, shall conduct an incident review within thirty days of the conclusion of every investigation of substantiated and unsubstantiated allegations of sexual abuse or staff-on- inmate sexual harassment.

The multidisciplinary IRT consists of intermediate or higher-level facility managers, supervisors, investigators, as well as medical and mental health practitioners.

See Provision (a) for the details of the Sexual Abuse Incident Reviews.

Provision (d)

The Warden, IPCM as well as other members of the Incident Review Team were interviewed. Each team member reported the team considers the following criteria:

1. Consider whether the allegation or investigation indicates a need to change policy or practice.
2. Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI identification, gang affiliation, or war motivated by group dynamics.
3. Examination of area where incident occurred to assess need for enhancements.
4. Assess the adequacy of staffing levels in the area during the different shifts.
5. Review of the personnel file of any involved employees (background screening, training, etc.)
6. Assess whether additional monitoring technology should be employed, enhanced, etc.
7. Prepare a report of findings for submission to Monitor, DOJ, PREA Director and IPCM.

See Provision (a) for the details of the Sexual Abuse Incident Reviews.

Provision (e)

The facility implements recommendations for improvement or documents its reasons for not doing so.

Conclusion:

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| | Based upon the review and analysis of all the available evidence, and the corrective action taken by the facility, the Auditor has determined the agency/facility meets every provision of the standard regarding sexual abuse incident reviews. |
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| 115.87 | Data collection |
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| | <p>Auditor Overall Determination: Meets Standard</p> |
| | <p>Auditor Discussion</p> |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • Most Recent Survey of Sexual Victimization (Form SSV-2) • Most Recent Annual Data Report • Website Address for ADOC http://www.doc.state.al.us/PREA <p>Interview with the following:</p> <ul style="list-style-type: none"> • Agency Contract Administrator <p>During the interview process, the agency contract administrator confirmed all contracts to hold ADOC inmates, without exception, have the PREA requirement as part of the agreement. Likewise, the ADOC obtains incident-based and aggregated data from each facility.</p> <p>Provision (a)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 24, L, 1, dictates that the data collection requirement include:</p> <ol style="list-style-type: none"> 1. The procedure for data maintenance and collection for every allegation of sexual abuse and harassment 2. The sources for data collection include the data required by the US DOJ, which includes inmate polling, documentation of announced and unannounced rounds, grievances, reports, investigation files and incident reviews. 3. The instruments used to collect data: 4. The standardized definitions used. 5. The methodology employed to analyze data. 6. The quality control mechanisms to verify data accuracy Provision (b) <p>The ADOC aggregates all its data submitting all required items according to the US Department of Justice SSV-2 (Survey of Sexual Victimization) and submits all</p> |

information annually to the US department of Justice.

The Auditor reviewed the most recent annual SSV-2.

Provision (c)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 24, L, 1, dictates that the data collection requirement include:

1. The procedure for data maintenance and collection for every allegation of sexual abuse and harassment
2. The sources for data collection include the data required by the US DOJ, which includes inmate polling, documentation of announced and unannounced rounds, grievances, reports, investigation files and incident reviews.
3. The instruments used to collect data:
4. The standardized definitions used.
5. The methodology employed to analyze data.
6. Quality control mechanisms to verify data accuracy.

PREA policy dictates 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. The Auditor was provided a copy of the most recent annual report, which addressed all questions, as required. This report can be located and reviewed on the ADOC website.

Provision (d)

PREA policy mandates the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. The Auditor was provided a copy of the most recent annual report, which contained relevant areas of concern and noted corrective action items.

Provision (e)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section D, states the ADOC general Counsel shall be responsible for ensuring that contracts for confinement of inmates include a provision indicating to the contracting entity its obligation to comply with the PREA standards and the ADOC's monitoring of such compliance.

The Alabama Therapeutic Education Facility (ATEF) is a community confinement facility owned and operated by the GEO Group, Inc. GEO contracts with the Alabama Department of Corrections (ADOC) to house their adult male and female offenders. ADOC Contract CD170051713 with GEO Group, 3.39 Prison Rape Elimination Act, states, "Vendor (GEO) shall comply with Alabama Code Section 14-11-31, as well as 28 C.F.R. Part 115, the Prison Rape Elimination Act ("PREA"). The ADOC has a Zero Tolerance Policy toward all forms of custodial sexual misconduct, sexual abuse, and

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| | <p>sexual harassment. See Administrative Regulation 454, Inmate Sexual Assault and Harassment Awareness (Prison Rape Elimination Act (PREA)). Any type of conduct - including suspected conduct - that falls within the context of custodial sexual misconduct/sexual abuse, as defined by either the State or Federal laws referenced above, shall be reported immediately to the Warden of Kilby Correctional Facility or his/her designee for conduct involving male Inmates, or the Warden of Tutwiler Correctional Facility or his/her designee for conduct involving female Inmates, as well as the ADOC's PREA Director or designated PREA Contract Monitor. Pursuant to 28 C.F.R. Part 115.12, the Vendor is obligated to adopt and comply with all PREA standards and the ADOC shall monitor the Vendor for compliance consistent with the compliance conditions set forth above. Vendor shall provide reasonable access to the PREA Contract Monitor; provide relevant documentation as requested; require and provide training of all its employees, agents, or contractors; and provide a Report from any PREA audit, which shall be performed by an independent, DOJ certified auditor."</p> <p>Provision (f)</p> <p>The ADOC aggregates all its data submitting all required items according to the US Department of Justice SSV-02 (Survey of Sexual Victimization) and submits all information on June 30 from the previous calendar year to the US Department of Justice.</p> <p>The Auditor reviewed the most recently submitted SSV-2, which reflected completion of all data fields within the required timeline.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding data collection.</p> |
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| 115.88 | Data review for corrective action |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • ADOC Administrative Regulation #454 • 2022 Survey of Sexual Victimization (Form SSV-2) • 2023 Annual Data Report • Website Address for ADOC http://www.doc.state.al.us/PREA <p>Interview with the following:</p> |

- PREA Director (PD)
- Warden

Through the interview process, the PREA Director (PD) indicated the agency reviews data collected pursuant to 115.87 and assesses the effectiveness of the sexual abuse prevention, detection and response policies, practices, and training. The agency prepares an annual report and posts the information on the website. The PREA Director continued by stating that the only information redacted from the agency report is personal identifying information. All other information is included in the annual report.

Through the interview process, the Warden indicated the facility PREA committee reviews each allegation, and that information is provided to the PREA Director for the annual review. Any issues identified during the Facility PREA committee are addressed at that time.

Provision (a)

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 24, L, 1, c, indicates the PREA Director shall review data collected to assess and improve the effectiveness of appropriate ADOC policies and procedures. The PREA Director shall prepare a report on each institution for the Commissioner identifying problem areas, suggesting corrective action, and providing comparison from the previous year's data reports.

Provision (b)

The Auditor reviewed the most recent annual report from 2022 and found it to follow the PREA standards, including a comparison to the findings in previous reports to assess progress in addressing sexual abuse. This annual report can be located at <http://www.doc.state.al.us/PREA>.

Provision (c)

As required by standard, the ADOC places all annual reports on its website, accessible for public view. <http://www.doc.state.al.us/PREA> allows access to the ADOC PREA webpage, which contains each annual report since 2013.

Provision (d)

The PREA Director indicated that the agency reviews data collected pursuant to 115.87 while only redacting personal identifying information. All other information is included in the annual report.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding data review for corrective action.

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documentation Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
- Alabama Department of Corrections publicly accessible website <http://www.doc.state.al.us/PREA>

Interview with the following:

- PREA Director (PD)

During an interview with the PREA Director, the Auditor was advised there are several locations where the ADOC retains data. At the local level, data is retained within a local Risk Management System and access to the system is limited to those staff with a need to know. Additional data is retained at the Agency level as required for completion of the SSV-2, and within the ADOC website for public access.

During an interview with the PREA Director, the Auditor was made aware the agency reviews data collected pursuant to 115.87, and that the only information redacted from the agency report is personal identifying information.

Provision (a)

Per the PAQ, the agency ensures that incident-based and aggregate data are securely retained.

Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website. <http://www.doc.state.al.us/PREA>

Provision (b)

According to the PAQ, the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.

The ADOC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at <http://www.doc.state.al.us/PREA>

Provision (c)

According to the PAQ the agency:

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| | <p>Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p>maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p>Provision (d)</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 26, L, 1, d & e, indicates data shall be retained securely for ten years and criminal and administrative investigation records shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years. The Auditor reviewed data from August 20, 2012, as required by the PREA compliance standard.</p> <p>According to the PAQ, the agency maintains 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.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding data storage, publication, and destruction.</p> |
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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <ul style="list-style-type: none"> • Alabama Department of Corrections publicly accessible website http://www.doc.state.al.us/PREA <p>Interview with the following</p> <ul style="list-style-type: none"> • Agency Head or designee • PREA Director (PD) <p>Through the interview process the Agency Head designee advised each facility within the ADOC had been audited within the previous three (3) year audit cycle. Copies of all audit reports are on the ADOC website for public information and review.</p> <p>During the interview process the PREA Director advised this audit was in the second</p> |

year of the fourth, three-year audit cycle.

Provision (a)

Through the interview process the Agency Head designee advised each facility within the ADOC had been audited within the previous three (3) year audit cycle. Copies of all audit reports are on the ADOC website for public information and review. ADOC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at <http://www.doc.state.al.us/PREA>

Provision (b)

ADOC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at <http://www.doc.state.al.us/PREA>

Provision (c)

N/A

Provision (d)

N/A

Provision (e)

N/A

Provision (f)

N/A

Provision (g)

N/A

Provision (h)

During the on-site portion of the audit, the Auditor had complete, unimpeded access to every area of the facility. Throughout the on-site portion of the audit, the IPCM was available to accompany the auditor and give her complete access to any part of the facility she requested to see.

Provision (i)

At all times throughout the audit process, the ADOC and the facility provided the Auditor with all requested information in a timely and complete manner.

Provision (j)

N/A

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| | <p>Provision (k)</p> <p>N/A</p> <p>Provision (l)</p> <p>N/A</p> <p>Provision (m)</p> <p>The Auditor was provided a secure, private space to conduct all interviews during the on-site portion of the audit.</p> <p>Provision (n)</p> <p>During inmate interviews, all inmates reported they were provided the opportunity to send out confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Provision (o)</p> <p>N/A</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding frequency and scope of audits.</p> |
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| 115.403 | Audit contents and findings |
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| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Documentation Reviewed:</p> <p>Alabama Department of Corrections publicly accessible website - http://www.doc.state.al.us/PREA</p> <p>Provision (a)</p> <p>N/A</p> <p>Provision (b)</p> <p>N/A</p> <p>Provision (c)</p> <p>N/A</p> |

Provision (d)

N/A

Provision (e)

N/A

Provision (f)

ADOC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Previous PREA reports, for all facilities can be accessed at <http://www.doc.state.al.us/PREA>

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding audit contents and findings.

| Appendix: Provision Findings | | |
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| 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.) | yes |
| 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 | yes |

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| | 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.) | |
| 115.13 (a) | Supervision and monitoring | |
| | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan 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 | yes |

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| | consideration: Any applicable State or local laws, regulations, or standards? | |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse? | yes |
| | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? | yes |
| 115.13 (b) | Supervision and monitoring | |
| | In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) | yes |
| 115.13 (c) | Supervision and monitoring | |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? | yes |
| | In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? | yes |
| 115.13 (d) | Supervision and monitoring | |
| | Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? | yes |
| | Is this policy and practice implemented for night shifts as well as day shifts? | yes |
| | Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? | yes |

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| 115.14 (a) | Youthful inmates | |
| | Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| 115.14 (b) | Youthful inmates | |
| | In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| 115.14 (c) | Youthful inmates | |
| | Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| | Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).) | na |
| 115.15 (a) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners? | yes |
| 115.15 (b) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.) | na |
| | Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the | na |

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| | facility does not have female inmates.) | |
| 115.15 (c) | Limits to cross-gender viewing and searches | |
| | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? | yes |
| | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)? | na |
| 115.15 (d) | Limits to cross-gender viewing and searches | |
| | Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? | yes |
| | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? | yes |
| 115.15 (e) | Limits to cross-gender viewing and searches | |
| | Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? | yes |
| | If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? | yes |
| 115.15 (f) | Limits to cross-gender viewing and searches | |
| | Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |
| | Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? | yes |

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient | |
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| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? | yes |
| | Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.) | yes |
| | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? | yes |
| | Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? | yes |
| | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication | yes |

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| | with inmates with disabilities including inmates who: Have intellectual disabilities? | |
| | 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 | yes |

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| | 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? | |
| | 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 |

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| 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 | |

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| | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) | na |
| 115.21 (a) | Evidence protocol and forensic medical examinations | |
| | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| 115.21 (b) | Evidence protocol and forensic medical examinations | |
| | Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |
| 115.21 (c) | Evidence protocol and forensic medical examinations | |
| | Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? | yes |
| | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? | yes |
| | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? | yes |

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| | Has the agency documented its efforts to provide SAFEs or SANEs? | yes |
| 115.21 (d) | Evidence protocol and forensic medical examinations | |
| | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? | yes |
| | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| | Has the agency documented its efforts to secure services from rape crisis centers? | yes |
| 115.21 (e) | Evidence protocol and forensic medical examinations | |
| | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? | yes |
| | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? | yes |
| 115.21 (f) | Evidence protocol and forensic medical examinations | |
| | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) | yes |
| 115.21 (h) | Evidence protocol and forensic medical examinations | |
| | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | yes |
| 115.22 (a) | Policies to ensure referrals of allegations for investigations | |

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| | 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 |

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| | 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 | |

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| | 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 |

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| | 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 | yes |

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| | Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) | |
| | 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 | yes |

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| | suspicious 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.) | |
| 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.) | yes |
| 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 | yes |

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| | screening instrument? | |
| 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) | no |

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| | Whether the inmate is detained solely for civil immigration purposes? | |
| 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 | yes |

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| | information is not exploited to the inmate's detriment by staff or other inmates? | |
| 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 | yes |

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| | present management or security problems? | |
| 115.42 (d) | Use of screening information | |
| | Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? | yes |
| 115.42 (e) | Use of screening information | |
| | Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? | yes |
| 115.42 (f) | Use of screening information | |
| | Are transgender and intersex inmates given the opportunity to shower separately from other inmates? | yes |
| 115.42 (g) | Use of screening information | |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) | yes |
| | Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing | yes |

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| | solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.) | |
| 115.43 (a) | Protective Custody | |
| | Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? | yes |
| | If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? | yes |
| 115.43 (b) | Protective Custody | |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? | yes |
| | Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? | yes |
| | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.) | yes |
| 115.43 (c) | Protective Custody | |

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| | 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 | yes |

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| | anonymous upon request? | |
| | Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.) | na |
| 115.51 (c) | Inmate reporting | |
| | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? | yes |
| | Does staff promptly document any verbal reports of sexual abuse and sexual harassment? | yes |
| 115.51 (d) | Inmate reporting | |
| | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? | yes |
| 115.52 (a) | Exhaustion of administrative remedies | |
| | Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. | yes |
| 115.52 (b) | Exhaustion of administrative remedies | |
| | Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) | 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 | yes |

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| | this standard.) | |
| | 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 | |

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| | 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, | yes |

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| | 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.) | |
| | 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 | yes |

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| | abuse or sexual harassment or retaliation? | |
| 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 |

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| 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 | yes |

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| | response to an incident of sexual abuse? | |
| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers | |
| | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation | |
| | Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? | yes |
| | Has the agency designated which staff members or departments are charged with monitoring retaliation? | yes |
| 115.67 (b) | Agency protection against retaliation | |
| | Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? | yes |
| 115.67 (c) | Agency protection against retaliation | |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? | yes |
| | Except in instances where the agency determines that a report of | yes |

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| | 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? | |
| | 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 | yes |

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| | 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).) | |
| | Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
| 115.71 (b) | Criminal and administrative agency investigations | |
| | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? | yes |
| 115.71 (c) | Criminal and administrative agency investigations | |
| | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? | yes |
| | Do investigators interview alleged victims, suspected perpetrators, and witnesses? | yes |
| | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? | yes |
| 115.71 (d) | Criminal and administrative agency investigations | |
| | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |
| 115.71 (e) | Criminal and administrative agency investigations | |
| | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? | yes |
| | Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? | yes |
| 115.71 (f) | Criminal and administrative agency investigations | |
| | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? | yes |

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| | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? | yes |
| 115.71 (g) | Criminal and administrative agency investigations | |
| | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? | yes |
| 115.71 (h) | Criminal and administrative agency investigations | |
| | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? | yes |
| 115.71 (i) | Criminal and administrative agency investigations | |
| | Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? | yes |
| 115.71 (j) | Criminal and administrative agency investigations | |
| | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? | yes |
| 115.71 (l) | Criminal and administrative agency investigations | |
| | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) | na |
| 115.72 (a) | Evidentiary standard for administrative investigations | |
| | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? | yes |
| 115.73 (a) | Reporting to inmates | |
| | Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? | yes |

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| 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 | yes |

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| | 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? | |
| 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 |

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| | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? | yes |
| 115.77 (b) | Corrective action for contractors and volunteers | |
| | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? | yes |
| 115.78 (a) | Disciplinary sanctions for inmates | |
| | Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? | yes |
| 115.78 (b) | Disciplinary sanctions for inmates | |
| | Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? | yes |
| 115.78 (c) | Disciplinary sanctions for inmates | |
| | When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? | yes |
| 115.78 (d) | Disciplinary sanctions for inmates | |
| | If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? | yes |
| 115.78 (e) | Disciplinary sanctions for inmates | |
| | Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? | yes |
| 115.78 (f) | Disciplinary sanctions for inmates | |
| | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish | yes |

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| | evidence sufficient to substantiate the allegation? | |
| 115.78 (g) | Disciplinary sanctions for inmates | |
| | If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) | yes |
| 115.81 (a) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison). | yes |
| 115.81 (b) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) | yes |
| 115.81 (c) | Medical and mental health screenings; history of sexual abuse | |
| | If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail). | na |
| 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 | yes |

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| | sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? | |
| 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 | |

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| | victims and abusers | |
| | Does the facility provide such victims with medical and mental health services consistent with the community level of care? | yes |
| 115.83 (d) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na |
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na |
| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? | yes |
| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? | yes |
| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers | |
| | If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) | yes |

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| 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 |

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| 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.) | yes |
| 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 | yes |

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| | 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? | |
| 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 | |

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| | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) | yes |
| 115.401 (b) | Frequency and scope of audits | |
| | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.) | no |
| | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) | yes |
| | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | no |
| 115.401 (h) | Frequency and scope of audits | |
| | Did the auditor have access to, and the ability to observe, all areas of the audited facility? | yes |
| 115.401 (i) | Frequency and scope of audits | |
| | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? | yes |
| 115.401 (m) | Frequency and scope of audits | |
| | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? | yes |
| 115.401 (n) | Frequency and scope of audits | |
| | Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? | yes |
| 115.403 | Audit contents and findings | |

| (f) | | |
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| | 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 |