# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

☐ Interim				
	Date of Report	June 24, 2018		
	Auditor In	formation		
Name: John Barkley		Email: fiddlinwarden@y	ahoo.com	
Company Name: PREA A	uditors of America			
Mailing Address: 14506 L	akeside View Way	City, State, Zip: Cypress,	Texas 77429	
Telephone: 803 451 138	2	Date of Facility Visit: Marc	h 21-22, 2018	
	Agency In	formation		
Name of Agency: Governing Authority or Parent Agency (If Applicable):				
Alabama Department of Corrections State of Alabama				
Physical Address: 301 South Ripley Street City, State, Zip: Montgomery Alabama 36130				
Mailing Address: P.O. Box 301501 City, State, Zip: Montgomery, Alabama 36130-1501				
Telephone: 334 353 3883 Is Agency accredited by any organization? ☐ Yes ☒ No				
The Agency Is:	☐ Military	☐ Private for Profit	☐ Private not for Profit	
☐ Municipal	☐ County	⊠ State	☐ Federal	
Agency mission: The mission of the Alabama Department of Corrections is to confine, manage and provide rehabilitative programs for convicted felons in a safe, secure and humane environment, utilizing professionals who are committed to public safety and to the positive re-entry of offenders into society.				
Agency Website with PREA Information: WWW.doc.state.al.us/PREA				
Agency Chief Executive Officer				
Name: Jefferson S. Dur	n	Title: Commissioner		
Email: Jefferson.dunn@	doc.alabamab.gov	Telephone: 334-353-387	70	
Agency-Wide PREA Coordinator				

Name: Christy Vincent	Title: F	Title: PREA Director			
Email: Christy.vincent@do	Telephone	Telephone: 334-353-2501			
PREA Coordinator Reports to:			-	_	eport to the PREA
Anne Hill, Chief of Staff		Coordinate	or 20 Iuli iii	ne and 20	6 part time
	Facilit	ty Information	on		
Name of Facility: Fountain	n/J.O. Davis Corre	ctional Facility			
Physical Address: 9947 H	ghway 21 North A	Atmore, Alabar	na 36502		
Mailing Address (if different than	above): same as	above			
Telephone Number: 251 3	68 8122				
The Facility Is:	☐ Military	☐ Private for	profit	☐ Privat	e not for profit
☐ Municipal	☐ County	⊠ State		☐ Fede	eral
Facility Type:	☐ Ja	il	X	Prison	
Facility Mission: same as the agency mission statement					
Facility Website with PREA Information: www.doc.state.al.us					
Warden/Superintendent					
Name: Mary Cooks		Title: Warde	en		
Email: Mary.Cooks@doc.	Telephone: 2	51-368-8122			
Facility PREA Compliance Manager					
Name: Angelia Norman Title: Correctional Lieutenant					
Email: angelia.norman@c	Telephone:	251-368-8122	ext 602		
Facility Health Service Administrator					
Name: Katherine Gibson	Name: Katherine Gibson Title: Health Care Administrator				
Email: Katherine.gibson@	corizonhealth	Telephone: 2	51-368-8122 e	ext 403	
Facility Characteristics					
, , ,	318		on of Facility: 13	18	
Number of inmates admitted to facility during the past 12 months 658					

Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:				
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:				658
Number of inmates on date of audit who were admitted to fa	0			
Age Range of Population: Youthful Inmates Under 18: 0		Adults: 19	and up	
Are youthful inmates housed separately from the adult population	ulation?	☐ Yes	☐ No	⊠ NA
Number of youthful inmates housed at this facility during th	e past 12 month	ıs:		0
Average length of stay or time under supervision:				12 months
Facility security level/inmate custody levels:				Security level 4
Number of staff currently employed by the facility who may	have contact wi	th inmates:		160
Number of staff hired by the facility during the past 12 mont	<del>-</del>			4
Number of contracts in the past 12 months for services with inmates:	contractors wh	o may have cont	act with	None
Phys	sical Plant			
Number of Buildings: 6 Number of Single Cell Housing Units: 1				
Number of Multiple Occupancy Cell Housing Units: 16				
Number of Open Bay/Dorm Housing Units: 11				
Number of Segregation Cells (Administrative and Disciplinary: 64				
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):  A total of 62 cameras and 4 mirrors are throughout the instituion				
Medical				
Type of Medical Facility:	Infirmary	/		
Forensic sexual assault medical exams are conducted at:  USA Medical Center, Mobile and SART/SANE  Montgomery, Alabama			d SART/SANE of	
Other				
Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:				
Number of investigators the agency currently employs to investigate allegations of sexual abuse: 22				

### **Audit Findings**

### **Audit Narrative**

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

Fountain/J.O. Davis Correctional Facility provided the auditor the prea pre audit questionnaire in a timely manner allowing the auditor to review documentation, policies, procedures and layout of the facility prior to the on-site visit. The PCM had the announcement placed all around the prison announcing the audit and dates. While on site the auditor toured every area of the prison. With the assistance of an interviewer 47 inmates were interviewed (27 random inmates and 20 inmates from the specialized list) and 22 staff working at the facility and 3 staff working out of the Alabama DOC headquarters. Also interviewed, who are not staff of Fountain/J.O. Davs, were volunteers, those providing sexual trauma counseling and those who provide the sexual assault exam. The auditor and an interviewer spent two days on site for a total of 45 man hours. The random selection of inmates and staff was done with a random number system where the auditor counts names on the specific rosters provided to the auditor the first day of the audit. Both shifts working those days were represented in the random interviews. An informal email was sent to the PREA Coordinator to share the auditor's concerns/questions for specific standards. This information is shared in the corrective action portion of this interim audit.

### **Facility Characteristics**

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

Fountain Correctional Facility and the J.O. Davis work center are supervised and managed by the same correctional staff with posts located in both locations. All of the housing units are open bay dormitories resembling that of a barracks. Each living unit has a communal bathroom to include open showers and bathroom stalls with no dividers and there is a common day room where inmates can use to watch television or play card games. There are no cameras in the common dayroom. There are a total of 15 housing units to include RHU with a variety of bed number and configuration of the bunks. There is an open Recreation area that is monitored by staff and a chapel that has a camera. Feeding of the inmates in the cafeteria are by living units to reduce inmates from one living area being in close proximity to another inmate. This practice allows for any separations that might have occurred due to the PREA risk assessment on the inmates being adhered to. There is a faith based unit on the yard and that unit also houses the substance abuse unit. Fountain Correctional Facility is a long wide hallway with the living units on either side. The J.O. Davis work center is a separate building that is on the property but for ease of access requires a vehicle to transport from Fountain. J.O. Davis has 3 open bay dorms with one being shut down. The facility has its own cafeteria. The total count for the prison the days of the audit was 1252.

### **Summary of Audit Findings**

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

**Auditor Note:** No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of Standards Exceeded: 0 (zero)

Click or tap here to enter text.

Number of Standards Met: 45 (forty-five)

 $115.11,115.12,115.14,115.15,115.18,115.21,115.22,115.31,115.32,115.33,115.34,115.35,115.41,\\115.43,115.52,115.53,115.54,115.61,115.62,115.63,115.64,115.65,115.66,115.67,115.68,115.71,\\115.72,115.73,115.76,115.77,115.78,115.81,115.82,115.83,115.86,115.87,115.88,115.89,115.401,\\115.403$ 

Number of Standards Not Met: 0 (zero)

Click or tap here to enter text.

**Summary of Corrective Action (if any)** 

### PREVENTION PLANNING

### Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

■ Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?

□ No

•		he written policy outline the agency's approach to preventing, detecting, and responding all abuse and sexual harassment? $\boxtimes$ Yes $\square$ No		
115.11	(b)			
•	Has the	e agency employed or designated an agency-wide PREA Coordinator? ⊠ Yes □ No		
•	Is the F	PREA Coordinator position in the upper-level of the agency hierarchy? $\ oxdot$ Yes $\ oxdot$ No		
•	overse	he PREA Coordinator have sufficient time and authority to develop, implement, and e agency efforts to comply with the PREA standards in all of its facilities?		
115.11	(c)			
•		agency operates more than one facility, has each facility designated a PREA compliance er? (N/A if agency operates only one facility.) $\boxtimes$ Yes $\square$ No $\square$ NA		
•	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.) $\boxtimes$ Yes $\square$ No $\square$ NA			
Audito	or Overa	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

#### **Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Reviewing the policy that discusses the role of the PREA Coordinator and the established PREA Compliance managers who are Lieutenants within the prisons, interviews with the PREA Coordinator and the PREA Compliance Lieutenant for Fountain/J.O. Davis as well as viewing the organizational chart it is determined that they are in compliance. The PREA Coordinator has regularly scheduled meetings with the Lieutenants of all of the prisons within Alabama DOC as well as called special meetings with the PCM's regarding the services offered for victims of sexual abuse. The lines of

communication appear to be very open even when the proximity of the prison to headquarters is not close. For all of these reasons the facility is found to be in compliance with this standard.

### Standard 115.12: Contracting with other entities for the confinement of inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

1 1 0 . 1 & \ \ \ \ \ \	1	1	5	.1	2	(a)
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•	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.) $\square$ Yes $\square$ No $\boxtimes$ NA

### 115.12 (b)

•	Does any new contract or contract renewal signed on or after August 20, 2012 provide for
	agency contract monitoring to ensure that the contractor is complying with the PREA standards?
	(N/A if the agency does not contract with private agencies or other entities for the confinement
	of inmates OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

### **Auditor Overall Compliance Determination**

	Exceeds Standard (Substantially exceeds requirement of standards)
$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

### **Instructions for Overall Compliance Determination Narrative**

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This standard is meet because the Alabama Department of Corrections does not contract with any other entity to house their inmates.

### Standard 115.13: Supervision and monitoring

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (	(a)
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•	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No $\square$ NA

• Does the agency ensure that each facility's staffing plan takes into consideration any applicable

	State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
•	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? $\boxtimes$ Yes $\square$ No
115.13	(b)
•	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.) $\boxtimes$ Yes $\square$ No $\square$ NA
115.13	(c)
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
115.13	(d)
•	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? $\boxtimes$ Yes $\square$ No
•	Is this policy and practice implemented for night shifts as well as day shifts? $oximes$ Yes $\oximin$ No
•	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? $\boxtimes$ Yes $\square$ No
Audito	or Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or a sions. The et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and an analysis. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
addres and tha the pro instituti camera	sed way at has b per nun ion has as to be	recommendations of the auditor during the corrective action period the prison has ys to overcome the staff shortage. The auditor was presented with a plan by the warden een published and given to shift commanders to ensure that all dorms are covered with other of staff to run a safe and secure prison that helps to prevent sexual assault. The requested additional cameras to be place in the living units and a method for those monitored by staff. It has been reiterated to shift commanders to use mandatory sure that all mandatory posts are covered on a shift.
Stand	dard 1	15.14: Youthful inmates
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.14	(a)	
•	sound,	ne facility place all youthful inmates in housing units that separate them from sight, and physical contact with any adult inmates through use of a shared dayroom or other on space, shower area, or sleeping quarters? (N/A if facility does not have youthful s [inmates <18 years old].) $\square$ Yes $\square$ No $\boxtimes$ NA
115.14	(b)	
•	youthfu	s outside of housing units does the agency maintain sight and sound separation between all inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 old].) $\square$ Yes $\square$ No $\boxtimes$ NA
•	inmate	s outside of housing units does the agency provide direct staff supervision when youthful s and adult inmates have sight, sound, or physical contact? (N/A if facility does not have all inmates [inmates <18 years old].) $\square$ Yes $\square$ No $\boxtimes$ NA
115.14	(c)	
•	with thi	ne agency make its best efforts to avoid placing youthful inmates in isolation to comply s provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  □ No □ 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/ $\ell$ if facility does not have youthful inmates [inmates <18 years old].) $\Box$ Yes $\Box$ No $\boxtimes$ NA	
•	possib	uthful inmates have access to other programs and work opportunities to the extent le? (N/A if facility does not have youthful inmates [inmates <18 years old].) $\Box$ No $\Box$ NA
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instrud	ctions f	for Overall Compliance Determination Narrative
complia conclus not me	ance or sions. T et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's this discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
This st old	andard	is met because Fountain/J.O. Davis does not house any male under the age of 18 years
_		
Stand	dard 1	115.15: Limits to cross-gender viewing and searches
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.15	(a)	
•	body c	he facility always refrain from conducting any cross-gender strip or cross-gender visual avity searches, except in exigent circumstances or by medical practitioners? $\ \square$ No
115.15	(b)	
•	inmate	he facility always refrain from conducting cross-gender pat-down searches of female is in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before t 20,2017.) $\square$ Yes $\square$ No $\boxtimes$ 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 here for facilities with less than 50 inmates before August 20, 2017.) $\square$ Yes $\square$ No $\boxtimes$ NA
115.15	5 (c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? $\boxtimes$ Yes $\square$ No
•	Does the facility document all cross-gender pat-down searches of female inmates? $\hfill \square$ Yes $\hfill \boxtimes$ No
115.15	i (d)
	(-)
•	Does the facility implement a policy and practice 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? $\boxtimes$ Yes $\square$ No
•	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? $\boxtimes$ Yes $\square$ No
115.15	5 (e)
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
115.15	5 (f)
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
Audito	or Overall Compliance Determination
	•
	Exceeds Standard (Substantially exceeds requirement of standards)

	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclu- not me	ance or sions. The et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
on site familia some i	observ r with he interviev	om interviews with staff, interviews with inmates, reviews of policies and procedures and ations it is determined that the prison is in compliance with this standard. Staff were ow the agency expected them to treat an inmate who identifies as a transgender but wed had not had the first-hand experience while working at Fountain/J.O. Davis with nmate who identified as a transgender female.
		115.16: Inmates with disabilities and inmates who are limited oficient
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.16	i (a)	
•	opport and re	he agency take appropriate steps to ensure that inmates with disabilities have an equal unity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, spond to sexual abuse and sexual harassment, including: inmates who are deaf or hard ring? $\boxtimes$ Yes $\square$ No
•	opport and re	he agency take appropriate steps to ensure that inmates with disabilities have an equal unity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, spond to sexual abuse and sexual harassment, including: inmates who are blind or have ion? $\boxtimes$ Yes $\square$ No

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

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 □ No

disabilities? ⊠ Yes □ No

■ 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 □ No
■ 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 □ No
■ Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? $\boxtimes$ Yes $\square$ No
■ 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 □ No
■ Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?   Yes □ No
■ 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 □ No
■ 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  No
115.16 (b)
■ 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 □ No
<ul> <li>Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?</li> <li>☑ Yes □ No</li> </ul>
115.16 (c)
■ 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?
Auditor Overall Compliance Determination

•

		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the mon-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and another the most be included in the Final Report, accompanied by specific corrective actions taken by the facility.
evalua	ting the	ntain uses Google translate which is a computer program via the internet. The agency is use of a live phone line interpretation service that is under contract with the state of will allow the use of a live interpreter via the telephone at all times.
Stan	dard 1	15.17: Hiring and promotion decisions
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.17	' (a)	
•	who ha	ne agency prohibit the hiring or promotion of anyone who may have contact with inmates as engaged in sexual abuse in a prison, jail, lockup, community confinement facility, as facility, or other institution (as defined in 42 U.S.C. 1997)?   Yes  No
•	who ha	the agency prohibit the hiring or promotion of anyone who may have contact with inmates as been convicted of engaging or attempting to engage in sexual activity in the community ed by force, overt or implied threats of force, or coercion, or if the victim did not consent unable to consent or refuse? $\boxtimes$ Yes $\square$ No
•	who ha	he agency prohibit the hiring or promotion of anyone who may have contact with inmates as been civilly or administratively adjudicated to have engaged in the activity described in estion immediately above? $\boxtimes$ Yes $\square$ No
•	with inr	ne agency prohibit the enlistment of services of any contractor who may have contact mates who has engaged in sexual abuse in a prison, jail, lockup, community confinement juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   Yes  No
	Does tl	ne 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? $\boxtimes$ Yes $\square$ No
•	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 question immediately above? $\boxtimes$ Yes $\square$ No
115.17	(b)
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? $\ \boxtimes$ Yes $\ \square$ No
115.17	(c)
•	Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
115.17	(d)
•	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? $\boxtimes$ Yes $\square$ No
115.17	' (e)
•	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? $\boxtimes$ Yes $\square$ No
115.17	<b>(f)</b>
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ⊠ Yes □ No

' (g)		
	he agency consider material omissions regarding such misconduct, or the provision of ally false information, grounds for termination? $\boxtimes$ Yes $\square$ No	
' (h)		
■ 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 □ No □ NA		
Auditor Overall Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)	
	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
П	Does Not Meet Standard (Requires Corrective Action)	
	materia (h)  Does t harass employ substa prohibi	

### Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Alabama Department of Corrections has a very thorough application process and all appropriate questions are asked as it relates to prior sexual abuse. The agency fully reviews applicants as well as those up for promotions. Where Fountain/J.O. Davis is not in compliance is that not 100 percent of their staff have had a criminal background check within the last 5 years. In an interview with the personnel director at Montgomery it was learned that not all staff who are assigned to Fountain/J.O. Davis have had the background check done. To be in compliant it is requested that all staff have a background check and the auditor be provided a copy showing that this has been completed. This should also include any staff who may come to Fountain/J.O. Davis to assist as overtime workers to cover posts when the prison staffing is low.

### Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

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.) □ Yes □ No ⋈ NA		
115.18 (b)		
• If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.) □ Yes □ No ⋈ NA		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		
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Through an interview with the Deputy Commissioner it was learned that there have been no physical improvements to Fountain/J.O. Davis.		
RESPONSIVE PLANNING		
Standard 115.21: Evidence protocol and forensic medical examinations		
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.21 (a)		

•	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.) $\boxtimes$ Yes $\;\square$ No $\;\square$ NA
115.21	(b)
•	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.) $\boxtimes$ Yes $\square$ No $\square$ NA
•	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.) $\boxtimes$ Yes $\square$ No $\square$ NA
115.21	(c)
•	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 evidentiary or medically appropriate? $\boxtimes$ Yes $\square$ No
•	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? $\boxtimes$ Yes $\square$ No
•	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)? $\boxtimes$ Yes $\square$ No
•	Has the agency documented its efforts to provide SAFEs or SANEs? $oximes$ Yes $\oximin$ No
115.21	(d)
•	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? $\boxtimes$ Yes $\ \square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Has the agency documented its efforts to secure services from rape crisis centers? $\  \   \boxtimes   Yes \  \   \Box   No$
115.21	(e)
	. ,

•	qualifie	uested by the victim, does the victim advocate, qualified agency staff member, or d community-based organization staff member accompany and support the victim the forensic medical examination process and investigatory interviews?   Yes  No	
•		uested by the victim, does this person provide emotional support, crisis intervention, ation, and referrals? $\boxtimes$ Yes $\ \square$ No	
115.21	(f)		
•	agency (e) of the	gency itself is not responsible for investigating allegations of sexual abuse, has the requested that the investigating entity follow the requirements of paragraphs (a) through his section? (N/A if the agency/facility is responsible for conducting criminal AND strative sexual abuse investigations.) $\square$ Yes $\square$ No $\boxtimes$ NA	
115.21	(g)		
•	Auditor	is not required to audit this provision.	
115.21	(h)		
•	• 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] □ Yes □ No ⋈ NA		
Audito	r Overa	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instruc	ctions f	or Overall Compliance Determination Narrative	

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Fountain/J.O. Davis is in compliance after reviewing the procedure in place if an inmate were to notify the prison if he was sexually assaulted. In the state of Alabama an ER doctor must perform the exam and collect the evidence if a SANE is not available. Mental health practitioners within the prison are afforded to the inmate and the prison works with the statewide coalition to provide a local sexual

assault center advocate to provide services to the inmate if the inmate requests. It is recommended that Fountain/J.O. Davis and the Alabama DOC investigate the feasibility of having a SANE come to the prison to perform an exam to prevent from taking two officers to transport the inmate. The SANE would not be an employee of the prison or DOC but would be under contract.

investigations		
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.22 (a)		
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?   ✓ Yes   ✓ No		
■ Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?   Yes □ No		
115.22 (b)		
■ 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 □ No		
■ Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  ✓ Yes No		
■ Does the agency document all such referrals? $\boxtimes$ Yes $\square$ No		
115.22 (c)		
■ If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] □ Yes □ No ⋈ NA		
115.22 (d)		
<ul> <li>Auditor is not required to audit this provision.</li> </ul>		
115.22 (e)		
<ul> <li>Auditor is not required to audit this provision.</li> </ul>		

PREA Audit Report

**Auditor Overall Compliance Determination** 

**Exceeds Standard** (Substantially exceeds requirement of standards)

$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructions f	or Overall Compliance Determination Narrative
compliance or conclusions. To not meet the sa	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
Fountain was auditor review thorough investigations those involving officers and thon inmate. The	ion policy was reviewed. An interview of the investigative agents who cover all activity at conducted to learn of the process for investigations and how they are documented. The ed random investigations to ensure that all measures were being taken to accomplish a stigation. The PCM works closely with the investigator for the region that covers all for Fountain/J.O. Davis. The investigation unit is called upon for multiple cases not just g sexual abuse or harassment. It would be beneficial to train other staff (i.e., the STG e Lieutenant who is the PCM) to perform the investigations of sexual harassment inmate his would allow the investigators to spend more time on the other cases that involve staff mate sexual abuse

## Standard 115.31: Employee training

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.

.31	(a)
•	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No

TRAINING AND EDUCATION

•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? $\boxtimes$ Yes $\square$ No	
•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? $\boxtimes$ Yes $\square$ No	
•	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? $\boxtimes$ Yes $\square$ No	
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? $\boxtimes$ Yes $\square$ No	
•	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? $\boxtimes$ Yes $\square$ No	
•	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? $\boxtimes$ Yes $\square$ No	
115.31	(b)	
•	Is such training tailored to the gender of the inmates at the employee's facility? $\square$ Yes $\ oxdot$ No	
•	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? $\square$ Yes $\square$ No	
115.31	(c)	
•	Have all current employees who may have contact with inmates received such training? $\ \boxtimes$ Yes $\ \square$ No	
•	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? $\boxtimes$ Yes $\square$ No	
•	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? $\boxtimes$ Yes $\square$ No	
115.31	(d)	
•	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? $\boxtimes$ Yes $\square$ No	
Auditor Overall Compliance Determination		
	☐ Exceeds Standard (Substantially exceeds requirement of standards)	

		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instru	ctions f	or Overall Compliance Determination Narrative		
complia conclu- not me	The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
The auditor reviewed the training provided by the agency to learn what topics have been discussed in the training. The auditor reviewed a sampling of verification proving that staff at Fountain/J.O. Davis had taken the training course. Through a series of random interviews of staff it was determined that staff had comprehended the information that was presented in the employee training.				
Stan	dard 1	115.32: Volunteer and contractor training		
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.32	? (a)			
•	been tr	e agency ensured that all volunteers and contractors who have contact with inmates have rained on their responsibilities under the agency's sexual abuse and sexual harassment tion, detection, and response policies and procedures? $\boxtimes$ Yes $\square$ No		
115.32	(b)			
•	agency how to contract	all volunteers and contractors who have contact with inmates been notified of the $\eta$ 's zero-tolerance policy regarding sexual abuse and sexual harassment and informed report such incidents (the level and type of training provided to volunteers and ctors shall be based on the services they provide and level of contact they have with s)? $\boxtimes$ Yes $\square$ No		
115.32	(c)			
•		he agency maintain documentation confirming that volunteers and contractors tand the training they have received? $\boxtimes$ Yes $\square$ No		
Auditor Overall Compliance Determination				
		Exceeds Standard (Substantially exceeds requirement of standards)		

		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. The st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does and and another the second panied by specific corrective actions taken by the facility.
verification volunte or hara	ation tha eers cor assment	viewed what is given and shared with volunteers for their orientation. The auditor saw the at they have been through the training/orientation and through random interviews with a strictly of their responsibilities to report any sexual abuse. The volunteers understood the seriousness of this part of their orientation and a zero tolerance stance taken by the Alabama DOC.
0.4		
Stan	dard 1	15.33: Inmate education
All Yes	s/No Qu	lestions Must Be Answered by the Auditor to Complete the Report
115.33	(a)	
•	_	intake, do inmates receive information explaining the agency's zero-tolerance policy ng sexual abuse and sexual harassment? $\boxtimes$ Yes $\square$ No
•		intake, do inmates receive information explaining how to report incidents or suspicions of abuse or sexual harassment? $\boxtimes$ Yes $\square$ No
115.33	(b)	
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Their rights to be free from sexual abuse and sexual ment? $\boxtimes$ Yes $\square$ No
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Their rights to be free from retaliation for reporting such ts? $\boxtimes$ Yes $\square$ No
•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Agency policies and procedures for responding to such ts? $\boxtimes$ Yes $\square$ No
115.33	(c)	

•	Have a	all inmates received such education? 🗵 Yes 🗀 No
•	and pr	nates receive education upon transfer to a different facility to the extent that the policies rocedures of the inmate's new facility differ from those of the previous facility? $\Box$ No
115.33	3 (d)	
•		the agency provide inmate education in formats accessible to all inmates including those re limited English proficient? $\boxtimes$ Yes $\square$ No
•		the agency provide inmate education in formats accessible to all inmates including those re deaf? $\boxtimes$ Yes $\ \square$ No
•		the agency provide inmate education in formats accessible to all inmates including those re visually impaired? $\boxtimes$ Yes $\square$ No
•		the agency provide inmate education in formats accessible to all inmates including those re otherwise disabled? $\boxtimes$ Yes $\ \square$ No
•		the agency provide inmate education in formats accessible to all inmates including those ave limited reading skills? $\boxtimes$ Yes $\square$ No
115.33	8 (e)	
•		the agency maintain documentation of inmate participation in these education sessions? $\Box$ No
115.33	3 (f)	
•	continu	ition to providing such education, does the agency ensure that key information is uously and readily available or visible to inmates through posters, inmate handbooks, or written formats? $\boxtimes$ Yes $\square$ No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
	otiono	for Overall Compliance Determination Negrative

### **Instructions for Overall Compliance Determination Narrative**

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conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor viewed the video tape that is watched by the inmates. This is done first thing when they are transferred to Fountain/J.O. Davis. It is done in conjunction with the inmate orientation discussing all aspects of inmate life at the prison. The video contains the Commissioner of the DOC discussing the seriousness of the zero tolerance and how he wants inmates to be able to report any and all behavior. The message is heard loud and clear coming from the Commissioner. The auditor saw where the inmates had signed that they received and understood the information they received about sexual abuse and harassment. The auditor saw the information and the inmate handbook that is given to the inmates when they arrive.

### Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

	agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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).) $\boxtimes$ Yes $\square$ No $\square$ NA
15.34	l (b)
•	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).] $\boxtimes$ Yes $\square$ No $\square$ NA
•	Does this specialized training include proper use of Miranda and Garrity warnings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] $\boxtimes$ Yes $\square$ No $\square$ NA
•	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).] $\boxtimes$ Yes $\square$ No $\square$ NA
•	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).] $\boxtimes$ Yes $\square$ No $\square$ NA

In addition to the general training provided to all ampleyons pursuant to \$115.31, does the

115.34 (c)

r r	es the agency maintain documentation that agency investigators have completed the uired specialized training in conducting sexual abuse investigations? [N/A if the agency does conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes $\Box$ No $\Box$ NA	
115.34 (		
• <i>A</i>	ditor is not required to audit this provision.	
Auditor	verall Compliance Determination	
[	Exceeds Standard (Substantially exceeds requirement of standards)	
[	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
[	Does Not Meet Standard (Requires Corrective Action)	
Instruct	ns for Overall Compliance Determination Narrative	
compliar conclusion not meet	we below must include a comprehensive discussion of all the evidence relied upon in making the or non-compliance determination, the auditor's analysis and reasoning, and the auditor's s. This discussion must also include corrective action recommendations where the facility does be standard. These recommendations must be included in the Final Report, accompanied by on specific corrective actions taken by the facility.	
The auditor was shown verification that the investigators have taken the NIC course offered on line The auditor confirmed with the investigators what they had learned from the online courses and other training they had received from the Police Academy. Before the final report is written the auditor recommends that the investigators take the second course offered by NIC for investigating within a confined setting.		
Stand	d 115.35: Specialized training: Medical and mental health care	
All Yes/	Questions Must Be Answered by the Auditor to Complete the Report	
115.35 (		
V	es the agency ensure that all full- and part-time medical and mental health care practitioners of work regularly in its facilities have been trained in how to detect and assess signs of sexual use and sexual harassment? $\boxtimes$ Yes $\square$ No	

•	who we	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to preserve physical evidence of abuse? $\boxtimes$ Yes $\square$ No
•	who we	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how to respond effectively and sionally to victims of sexual abuse and sexual harassment? $\boxtimes$ Yes $\square$ No
•	who we	he agency ensure that all full- and part-time medical and mental health care practitioners ork regularly in its facilities have been trained in how and to whom to report allegations or ions of sexual abuse and sexual harassment? $\boxtimes$ Yes $\square$ No
115.35	(b)	
•	receive	ical staff employed by the agency conduct forensic examinations, do such medical staff e appropriate training to conduct such examinations? (N/A if agency medical staff at the do not conduct forensic exams.) $\boxtimes$ Yes $\square$ No $\square$ NA
115.35	(c)	
•	receive	he agency maintain documentation that medical and mental health practitioners have ed the training referenced in this standard either from the agency or elsewhere? $\Box$ No
115.35	(d)	
•		dical and mental health care practitioners employed by the agency also receive training ated for employees by §115.31? $\Box$ Yes $\Box$ No
•		dical and mental health care practitioners contracted by and volunteering for the agency ceive training mandated for contractors and volunteers by §115.32?   Yes  No
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor reviewed training files and interviewed medical staff who are employed by a medical contractor. The training that the contractor provides all of their staff in prisons across the country is excellent information and the staff at Fountain/J.O. Davis also take the same PREA courses required of all staff. The medical staff were clear of their responsibilities and how to handle an allegation of sexual abuse when it was brought to any of their attention. The medical and mental health staff have a very close relationship and when medical staff feel an inmate needs to be seen by mental health staff they make it happen immediately by emailing and calling to get the inmate on a person's caseload. There is a very close working relationship between the two.

# SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

### Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41	(a)
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? $\boxtimes$ Yes $\square$ No 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? $\boxtimes$ Yes $\square$ No
115.41	(b)
•	Do intake screenings ordinarily take place within 72 hours of arrival at the facility? $\hfill \boxtimes$ Yes $\hfill \square$ No
115.41	(c)
•	Are all PREA screening assessments conducted using an objective screening instrument? $\boxtimes$ Yes $\ \square$ No
115.41	(d)
	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

Does the intake screening consider, at a minimum, the following criteria to assess inmates for

disability? ⊠ Yes □ No

risk of sexual victimization: (2) The age of the inmate?  $\boxtimes$  Yes  $\square$  No

•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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)? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? $\boxtimes$ Yes $\square$ No
115.41	(e)
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? $\boxtimes$ Yes $\square$ No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? $\boxtimes$ Yes $\square$ No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? $\boxtimes$ Yes $\square$ No

115.41	(f)	
•	facility	a set time period not more than 30 days from the inmate's arrival at the facility, does the reassess the inmate's risk of victimization or abusiveness based upon any additional, at information received by the facility since the intake screening? $\boxtimes$ Yes $\square$ No
115.41	(g)	
•		he facility reassess an inmate's risk level when warranted due to a: Referral? $\hfill\Box$ No
•		he facility reassess an inmate's risk level when warranted due to a: Request? $\hfill\Box$ No
•		he facility reassess an inmate's risk level when warranted due to a: Incident of sexual ? $\boxtimes$ Yes $\ \square$ No
•	informa	he facility reassess an inmate's risk level when warranted due to a: Receipt of additional ation that bears on the inmate's risk of sexual victimization or abusiveness? $\Box$ No
115.41	(h)	
•	Is it the	e case that inmates are not ever disciplined for refusing to answer, or for not disclosing ete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), or (d)(9) of this section? $\boxtimes$ Yes $\square$ No
115.41	(i)	
•	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? ⊠ Yes □ No	
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor reviewed the PREA Risk assessment. The auditor interviewed those who perform the screenings and witnessed where the screenings are held. Once the screenings are completed if the inmate answers certain questions in the affirmative the inmate name is referred to the Psych Associate who reviews the inmates file and interviews the inmate to determine if they should be considered as a potential victim or perpetrator. This information is then turned over to the IPCM (institutional prea compliance manager) and the information has limited accessibility to include the wardens and captains. The auditor reviewed the spread sheet that has the inmates on the yard designated as potential victim or perpetrator. The risk assessment process that is being used is in compliance with the standard.

### Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

•	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 □ No

- 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 
  No
- 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 □ No
- 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 
  No
- 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 □ No

### 115.42 (b)

115.42 (a)

■ Does the agency make individualized determinations about how to ensure the safety of each inmate? 

☑ Yes □ No

#### 115.42 (c)

•	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)? $\boxtimes$ Yes $\square$ No
•	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? $\boxtimes$ Yes $\square$ No
115.42	? (d)
•	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? $\boxtimes$ Yes $\square$ No
115.42	? (e)
•	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? $\boxtimes$ Yes $\square$ No
115.42	2 (f)
•	Are transgender and intersex inmates given the opportunity to shower separately from other inmates? $\boxtimes$ Yes $\ \square$ No
115.42	? (g)
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No

	Exceeds Standard (Substantially exceeds requirement of standards)					
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)					
	Does Not Meet Standard (Requires Corrective Action)					
Instructions for Overall Compliance Determination Narrative						
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During the corrective action period the auditor was provided the updated policy that addresses transgender inmates housed at Fountain. This policy addresses treatment and management of transgender inmates to ensure that they are treated safely and humanely in a correctional environment and to be sensitive to their unique adjustment needs. The auditor was also shown the new program that will allow inmates who have been designated as potential predators or victims to be seen by select staff within the prison. The psychology associates are very involved in the process and use of the PREA risk screening.						
Standa	ard 115.43: Protective Custody					
All Yes/I	No Questions Must Be Answered by the Auditor to Complete the Report					
115.43 (	a)					
ir m	Does the facility always refrain from placing inmates at high risk for sexual victimization in a hydronylambde problem in the facility always refrain from placing inmates at high risk for sexual victimization in hydronylambde and segmentation and a determination has been made that there is no available alternative means of eparation from likely abusers? $\boxtimes$ Yes $\square$ No					
ir	a facility cannot conduct such an assessment immediately, does the facility hold the inmate in a hold unitary segregated housing for less than 24 hours while completing the assessment? Yes $\square$ No					
115.43 (	b)					
	To inmates who are placed in segregated housing because they are at high risk of sexual ictimization have access to: Programs to the extent possible? $\boxtimes$ Yes $\square$ No					
	To inmates who are placed in segregated housing because they are at high risk of sexual ictimization have access to: Privileges to the extent possible? $\boxtimes$ Yes $\square$ No					

•	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? $\boxtimes$ Yes $\square$ No						
•	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? $\boxtimes$ Yes $\square$ No						
•	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? $\boxtimes$ Yes $\square$ No						
•	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? $\boxtimes$ Yes $\square$ No						
•		acility restricts access to programs, privileges, education, or work opportunities, does the document: The reasons for such limitations? $\boxtimes$ Yes $\square$ No					
115.43 (c)							
•	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? $\boxtimes$ Yes $\square$ No						
•	Does	such an assignment not ordinarily exceed a period of 30 days? ⊠ Yes □ No					
115.43	3 (d)						
•	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? $\boxtimes$ Yes $\square$ No						
•	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? $\boxtimes$ Yes $\square$ No						
115.43	(e)						
•	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 □ No						
Audito	Auditor Overall Compliance Determination						
		Exceeds Standard (Substantially exceeds requirement of standards)					
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)					
		Does Not Meet Standard (Requires Corrective Action)					

### **Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The auditor, when reviewing files, found no time when restrictive housing was used for the sole purpose of separating an inmate who had brought forth an allegation of sexual abuse. In the interview with the acting warden at Fountain/J.O. Davis it was conveyed to the auditor that he is committed to not in any manner punish the inmate who comes forward with an allegation of sexual assault. If separation is needed he will put the inmate into another open bay living unit. When interviewing staff they knew that RHU was not the place to put an alleged victim.

REPORTING			
Standard 115.51: Inmate reporting			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.51 (a)			
■ Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ⊠ Yes □ No			
■ 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 □ No			
■ 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 □ No			
115.51 (b)			
■ 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 □ No			
Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?   ⊠ Yes □ No			
<ul> <li>Does that private entity or office allow the inmate to remain anonymous upon request?</li> <li>         ∑ Yes □ No     </li> </ul>			

<ul> <li>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? ☐ Yes ☒ No</li> </ul>		
115.51 (c)		
■ Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   ✓ Yes   ✓ No		
<ul> <li>■ Does staff promptly document any verbal reports of sexual abuse and sexual harassment?</li> <li>☑ Yes □ No</li> </ul>		
115.51 (d)		
<ul> <li>Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?</li></ul>		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
□ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
During the corrective action period Fountain issued information to the inmate population to explain to them the difference in the reporting line and the line to use if they wanted to discuss being sexual abused in their past. The prison has issued information to the inmates explaining that the reporting goes to the Alabama Department of Economic and Community Affairs. This agency has no direct relationship with the Alabama DOC. This meets the standard and now the inmates at Fountai have been clearly told the purpose of the third party reporting line.		
Standard 115.52: Exhaustion of administrative remedies		
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.52 (a)		

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 ☐ No ☐ NA
115.52 (b)
■ 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 ☐ No ☒ NA
■ Does the agency always refrain from requiring an inmate to use any informal grievance process or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)   ☐ Yes ☐ No ☒ NA
115.52 (c)
■ Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)   ☐ Yes ☐ No ☒ NA
■ Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) □ Yes □ No □ NA
115.52 (d)
■ 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 □ No ☒ NA
• If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) □ Yes □ No ⋈ NA
At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exemp from this standard.) □ Yes □ No ☒ NA
115.52 (e)

<ul> <li>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.)</li> <li>☐ Yes</li> <li>☐ No</li> <li>☒ NA</li> </ul>
• 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 □ No ⋈ NA
If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) □ Yes □ No ☒ NA
115.52 (f)
■ 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 ☐ No ☒ NA
• After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). □ Yes □ No ⋈ NA
■ After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) □ Yes □ No □ NA
<ul> <li>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.)</li> <li>□ Yes □ No ☒ NA</li> </ul>
■ 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 ☐ No ☒ NA
■ Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) □ Yes □ No ☒ NA
■ Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) □ Yes □ No ☒ NA
115.52 (g)
· ·

•	do so	agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? agency is exempt from this standard.) $\square$ Yes $\square$ No $\boxtimes$ NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions	for Overall Compliance Determination Narrative
compli conclu not me	ance or sions. T eet the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
grieval a case this wa the inv	nce forre and invas an investigati	re not used for sexual assault or sexual harassment claims. If the inmate were to use a in that information and the grievance would be sent to the IPCM who would then open up volve investigations. During the initial interview with the inmate he would be informed that vestigation and not a grievance and the inmate would be given in writing the outcome of on once it was complete. This standard is in compliance and the focus from the prison is investigation once they receive the information.
Stan	dard '	115.53: Inmate access to outside confidential support services
		uestions Must Be Answered by the Auditor to Complete the Report
115.53	3 (a)	
•	service includi	the facility provide inmates with access to outside victim advocates for emotional support es related to sexual abuse by giving inmates mailing addresses and telephone numbers, ng toll-free hotline numbers where available, of local, State, or national victim advocacy or risis organizations? $\boxtimes$ Yes $\square$ No
•	addres	the facility provide persons detained solely for civil immigration purposes mailing sses and telephone numbers, including toll-free hotline numbers where available of local, or national immigrant services agencies? $\boxtimes$ Yes $\square$ No
•		the facility enable reasonable communication between inmates and these organizations gencies, in as confidential a manner as possible? $\boxtimes$ Yes $\square$ No

115.53 (b)			
■ 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 □ No			
115.53 (c)			
■ 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  ☐ No			
<ul> <li>Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☐ Yes ☒ No</li> </ul>			
Auditor Overall Compliance Determination			
Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative			
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
Fountain /J.O. Davis is in compliance with this standard because the Alabama DOC has an agreement with the Alabama Coalition Against Rape (ACAR). This statewide coalition provides services for all of the Alabama state prisons and connects Fountain/J.O. Davis with local victim advocates. This is also who is manning the phones when inmates call.			
Standard 115.54: Third-party reporting			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.54 (a)			
■ Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?   ✓ Yes   ✓ No			

■ Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?   ✓ Yes   ✓ No				
Audito	or Over	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instru	ctions f	or Overall Compliance Determination Narrative		
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harass	On brochures, posters and websites it is publicized that someone can make a report of sexual harassment or abuse on behalf of an inmate. This reporting can occur in numerous ways which provides different avenues for those making the report.			
	OFF	ICIAL RESPONSE FOLLOWING AN INMATE REPORT		
Cton	مامیما د	IAE CA. Ctaff and against reporting duties		
Stan	aara	115.61: Staff and agency reporting duties		
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.61	(a)			
•	knowle	he agency require all staff to report immediately and according to agency policy any edge, suspicion, or information regarding an incident of sexual abuse or sexual ment that occurred in a facility, whether or not it is part of the agency? $\boxtimes$ Yes $\square$ No		
•	knowle	he agency require all staff to report immediately and according to agency policy any edge, suspicion, or information regarding retaliation against inmates or staff who reported dent of sexual abuse or sexual harassment? $\boxtimes$ Yes $\square$ No		
•	knowle that ma	he agency require all staff to report immediately and according to agency policy any edge, suspicion, or information regarding any staff neglect or violation of responsibilities ay have contributed to an incident of sexual abuse or sexual harassment or retaliation?		

	(~)	
•	revealing necess	rom reporting to designated supervisors or officials, does staff always refrain from ng any information related to a sexual abuse report to anyone other than to the extent ary, as specified in agency policy, to make treatment, investigation, and other security anagement decisions? ⊠ Yes □ No
115.61	(c)	
•	practition	otherwise precluded by Federal, State, or local law, are medical and mental health oners required to report sexual abuse pursuant to paragraph (a) of this section?
•		edical and mental health practitioners required to inform inmates of the practitioner's duty rt, and the limitations of confidentiality, at the initiation of services? $\boxtimes$ Yes $\square$ No
115.61	(d)	
•	local vu	lleged victim is under the age of 18 or considered a vulnerable adult under a State or ulnerable persons statute, does the agency report the allegation to the designated State I services agency under applicable mandatory reporting laws? $\boxtimes$ Yes $\square$ No
115.61	(e)	
•		he facility report all allegations of sexual abuse and sexual harassment, including thirdnd anonymous reports, to the facility's designated investigators? $\boxtimes$ Yes $\square$ No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative

Reviewing the policy and procedure, through interviews with random staff with mental health staff and with inmates, it was determined that this standard is being applied and staff are aware of their responsibilities. There are no inmates housed under the age of 18 so the question asked of the auditor is not applicable in that regard. Mental health provides their informed consent language to the inmate at

115 61 (b)

the beginning of any session. Staff at Fountain/J.O. Davis are fully aware of the importance of immediately reporting and keeping the information they report confidential.

# Standard 115.62: Agency protection duties

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

11	5.	.62	(a)

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 □ No

### **Auditor Overall Compliance Determination**

	Exceeds Standard (Substantially exceeds requirement of standards)
$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

### **Instructions for Overall Compliance Determination Narrative**

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This is mandated in the policy and through interviews with the warden, and shift commanders it was learned that this is the number one priority to prevent sexual assault. If there is any reason to believe an inmate is not housed in an appropriate housing unit they will place the inmate in one that will be more suitable. This might require a call to Headquarters if it is determined the inmate would do better in a cell environment rather than an open bay living unit.

# Standard 115.63: Reporting to other confinement facilities

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.63 (a)

■ 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 □ No

115.63 (b)
Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?   ⊠ Yes □ No
115.63 (c)
■ Does the agency document that it has provided such notification? ⊠ Yes □ No
115.63 (d)
■ Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ⊠ Yes □ No
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.
If during the PREA risk assessment the inmate reports that he was sexually assaulted at another prison or detention center then the IPCM is immediately notified. A letter/email from the Warden to the appropriate head of the other prison would be sent. Through an interview with the Warden it was learned that if this was shared about an incident that happened at another Alabama DOC prison the warden would immediately call the warden there and then send the documentation. In the event it was not in the Alabama jurisdiction it would then be sent to the appropriate facility head. This practice and procedure is in place.
Standard 115.64: Staff first responder duties
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.64 (a)

Inetru	ctions f	or Overall Compliance Determination Narrative
		Does Not Meet Standard (Requires Corrective Action)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Exceeds Standard (Substantially exceeds requirement of standards)
Audito	or Overa	all Compliance Determination
•	that the	rst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify y staff? $\boxtimes$ Yes $\square$ No
115.64	(a)	
	member actions changi within a	er to respond to the report required to: Ensure that the alleged abuser does not take any stant could destroy physical evidence, including, as appropriate, washing, brushing teeth, ng clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence?   Yes  No
		earning of an allegation that an inmate was sexually abused, is the first security staff
•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Request that the alleged victim not take any that could destroy physical evidence, including, as appropriate, washing, brushing teeth, ng clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence?   Yes   No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staffer to respond to the report required to: Preserve and protect any crime scene until priate steps can be taken to collect any evidence? $\boxtimes$ Yes $\square$ No
•	membe	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Separate the alleged victim and abuser?

Through interviews with staff it was determined that all were aware of their role if they were the first on the scene or the first person to receive the information from the alleged victim. All security staff that would be working the living units were aware of all of the steps and the importance of protecting the potential evidence. In a large open dorm it will be difficult to preserve the evidence but all were aware of the process and the importance. They all knew to keep the victim with them at all times once they had informed the staff.

# Standard 115.65: Coordinated response

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.65 (a)

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

✓ Yes 

✓ No

### **Auditor Overall Compliance Determination**

	Does Not Meet Standard (Requires Corrective Action)
$\boxtimes$	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Exceeds Standard (Substantially exceeds requirement of standards)

### **Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Through review of documentation, interviews with the warden, the IPCM, medical and mental health staff it was evident that all knew their role when an allegation of a sexual assault was made. Correctional officers during random interviews knew the process and who should be notified. They were aware of each roll the other played in addressing the situation.

# Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.66 (a)

 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 limits the agency's ability to remove alleged staff sexual

	abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? $\boxtimes$ Yes $\square$ No			
115.66	6 (b)			
•	Audito	r is not required to audit this provision.		
Audito	or Overa	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		
Instru	ctions f	for Overall Compliance Determination Narrative		
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.				
Fountain/J.O. Davis and Alabama DOC do not have any unions representing any areas of work inside the prison. The IPCM is the individual responsible for monitoring retaliation against the inmate but the standard operating procedure would be to separate the staff from the inmates by placing the staff on a post where no contact is made with that inmate or if the investigation warranted the staff would be placed on leave without pay during the investigation.				
Stan	dard 1	l 15.67: Agency protection against retaliation		
All Ye	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report		
115.67	' (a)			
•	sexual	e agency established a policy to protect all inmates and staff who report sexual abuse or harassment or cooperate with sexual abuse or sexual harassment investigations from ion by other inmates or staff? $\boxtimes$ Yes $\square$ No		
•		e agency designated which staff members or departments are charged with monitoring ion? $oximes$ Yes $\oximin$ No		
115.67	' (b)			

•	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? $\boxtimes$ Yes $\square$ No
115.67	" (c)
•	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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
•	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? $\boxtimes$ Yes $\ \square$ No
115.67	' (d)
•	In the case of inmates, does such monitoring also include periodic status checks?  ☑ Yes □ No

115.67 (e)		
the	any other individual who cooperates with an investigation expresses a fear of retaliation, does agency take appropriate measures to protect that individual against retaliation? Yes $\square$ No	
115.67 (f)		
■ Au	ditor is not required to audit this provision.	
Auditor O	verall Compliance Determination	
	Exceeds Standard (Substantially exceeds requirement of standards)	
$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
	Does Not Meet Standard (Requires Corrective Action)	
Instructio	ns for Overall Compliance Determination Narrative	
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
The IPCM is the staff person at the prison responsible for monitoring retaliation and documenting this retaliation. The auditor reviewed the documentation that shows what is monitored. Through interviews with the IPCM it was verified the process that the IPCM takes to ensure there is no retaliation against the inmate. The IPCM will find a reason to talk to the inmate alone and ask how he is doing in the living unit. The IPCM will review any disciplinary infractions on the inmate and will monitor any bed moves.		
Standa	d 115.68: Post-allegation protective custody	
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.68 (a)		
	any and all use of segregated housing to protect an inmate who is alleged to have suffered kual abuse subject to the requirements of § 115.43? $oxdot$ Yes $\odot$ No	
Auditor Overall Compliance Determination		
PREA Audit Re	Exceeds Standard (Substantially exceeds requirement of standards)  Page 51 of 73  Facility Name – double click to change	

		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions	for Overall Compliance Determination Narrative	
complia conclu- not me	The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
from th want to	In the interview with the warden and in reviewing logs and files it is clear that there is a commitment from the staff to not use RHU to house an inmate who has alleged sexual assault. The warden does not want to appear to be retaliatory to the rest of the inmate population which might prompt others to not report if they fear they are going to be placed in RHU.		
		INVESTIGATIONS	
Stan	dard '	115.71: Criminal and administrative agency investigations	
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report	
115.71	(a)		
•	harass respor	the agency conducts its own investigations into allegations of sexual abuse and sexual sment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not asible for conducting any form of criminal OR administrative sexual abuse investigations. I5.21(a).] $\boxtimes$ Yes $\square$ No $\square$ NA	
•	anony	he agency conduct such investigations for all allegations, including third party and mous reports? [N/A if the agency/facility is not responsible for conducting any form of al OR administrative sexual abuse investigations. See 115.21(a).] $\boxtimes$ Yes $\square$ No $\square$ NA	
115.71	(b)		
•		sexual abuse is alleged, does the agency use investigators who have received lized training in sexual abuse investigations as required by 115.34? $\boxtimes$ Yes $\square$ No	
115.71	(c)		
•		estigators gather and preserve direct and circumstantial evidence, including any available al and DNA evidence and any available electronic monitoring data? $\boxtimes$ Yes $\square$ No	

•	Do investigators interview alleged victims, suspected perpetrators, and witnesses? $\  \  \  \  \  \  \  \  \  \  \  \  \ $
•	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? $\boxtimes$ Yes $\ \square$ No
115.71	(d)
•	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? $\boxtimes$ Yes $\square$ No
115.71	(e)
•	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? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? $\boxtimes$ Yes $\square$ No
•	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? $\boxtimes$ Yes $\square$ No
115.71	(g)
•	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? $\boxtimes$ Yes $\square$ No
115.71	(h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? $\boxtimes$ Yes $\square$ No
115.71	(i)
•	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? $\boxtimes$ Yes $\square$ No
115.71	(i)

or con	the agency ensure that the departure of an alleged abuser or victim from the employment trol of the agency does not provide a basis for terminating an investigation? $\Box$ No		
115.71 (k)			
	r is not required to audit this provision.		
115.71 (I)			
investi an out	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) ☐ Yes ☐ No ☒ NA		
<b>Auditor Over</b>	all Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)		
$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	Does Not Meet Standard (Requires Corrective Action)		
Instructions	for Overall Compliance Determination Narrative		
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
Through reviewing investigation files, reviewing training records for investigators, interviewing of the investigators and the IPCM it was determined that investigations are done in the manner dictated by the standards. The investigators have received specialized training for sexual assault within a confined setting. The investigative unit works closely with the IPCM to investigate all allegations.			
Standard '	115.72: Evidentiary standard for administrative investigations		
All Yes/No Q	uestions Must Be Answered by the Auditor to Complete the Report		
115.72 (a)			
eviden	he that the agency does not impose a standard higher than a preponderance of the ce in determining whether allegations of sexual abuse or sexual harassment are intiated? $\boxtimes$ Yes $\square$ No		

Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
nstru	ctions	for Overall Compliance Determination Narrative
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		is clearly conveyed in their training. It was verified with the auditor during the interview tigators.
Stan	dard 1	115.73: Reporting to inmates
All Ye	s/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.73	3 (a)	
•	agenc	ing an investigation into an inmate's allegation that he or she suffered sexual abuse in an y facility, does the agency inform the inmate as to whether the allegation has been nined to be substantiated, unsubstantiated, or unfounded? $\boxtimes$ Yes $\square$ No
115.73	3 (b)	
•	agency in orde	igency did not conduct the investigation into an inmate's allegation of sexual abuse in an y facility, does the agency request the relevant information from the investigative agency or to inform the inmate? (N/A if the agency/facility is responsible for conducting strative and criminal investigations.) $\square$ Yes $\square$ No $\boxtimes$ NA
115.73 (c)		
•	reside reside	ing an inmate's allegation that a staff member has committed sexual abuse against the nt, unless the agency has determined that the allegation is unfounded, or unless the nt has been released from custody, does the agency subsequently inform the resident ver: The staff member is no longer posted within the inmate's unit? $\boxtimes$ Yes $\square$ No
•		ing an inmate's allegation that a staff member has committed sexual abuse against the nt, unless the agency has determined that the allegation is unfounded, or unless the

		It has been released from custody, does the agency subsequently inform the resident ver: The staff member is no longer employed at the facility? $\boxtimes$ Yes $\square$ No
•	resider resider whene	ng an inmate's allegation that a staff member has committed sexual abuse against the at, unless the agency has determined that the allegation is unfounded, or unless the at has been released from custody, does the agency subsequently inform the resident ver: The agency learns that the staff member has been indicted on a charge related to abuse in the facility? $\boxtimes$ Yes $\square$ No
•	resider resider whene	ng an inmate's allegation that a staff member has committed sexual abuse against the at, unless the agency has determined that the allegation is unfounded, or unless the at has been released from custody, does the agency subsequently inform the resident ver: The agency learns that the staff member has been convicted on a charge related to abuse within the facility? $\boxtimes$ Yes $\square$ No
115.73	(d)	
•	does that	ng an inmate's allegation that he or she has been sexually abused by another inmate, ne agency subsequently inform the alleged victim whenever: The agency learns that the labuser has been indicted on a charge related to sexual abuse within the facility?
•	does that	ng an inmate's allegation that he or she has been sexually abused by another inmate, ne agency subsequently inform the alleged victim whenever: The agency learns that the labuser has been convicted on a charge related to sexual abuse within the facility?
115.73	(e)	
•	Does to	ne agency document all such notifications or attempted notifications? $oximes$ Yes $\odots$ No
115.73	(f)	
•	Auditor	is not required to audit this provision.
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

### **Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Fountain/J.O. Davis notifies the inmate in writing the outcome of the investigation and if they are still at the prison the IPCM meets with the inmate to explain the outcome. The auditor witnessed the documentation that is used to notify the inmate that the case was closed and the outcome of the case. If the inmate has been transferred or been released the notification is sent to them or their last known address.

DISCIPLINE		
Standard 115.76: Disciplinary sanctions for staff		
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report		
115.76 (a)		
■ Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?   ✓ Yes   ✓ No		
115.76 (b)		
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?   ⊠ Yes □ No		
115.76 (c)		
■ 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 □ No		
115.76 (d)		
■ 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 □ No		
■ 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 □ No		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		

$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)
Instructions	for Overall Compliance Determination Narrative
compliance or conclusions. T not meet the s	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
to sexual hara higher standa attempts to re where the office licensing boar confirmed who	DOC and Fountan/J.O. Davis Correctional Facility take very seriously the zero tolerance assment and abuse as it relates to staff. It is the expectation of their staff to operate at a rd. Staff who are found to be guilty of sexual abuse will be prosecuted. If a staff person sign while under investigation the investigation continues. The criminal justice academy cer was trained is notified when they are terminated or resign due to sexual abuse. All rds are notified when an employee is terminated or arrested for sexual abuse. This was en talking the Personnel Director and the Health Service Authority when the auditor asked aff who had been fired due to sexual abuse on an inmate.
Standard <sup>2</sup>	115.77: Corrective action for contractors and volunteers
All Yes/No Q	uestions Must Be Answered by the Auditor to Complete the Report
115.77 (a)	
-	contractor or volunteer who engages in sexual abuse prohibited from contact with es? $\ oxdot$ Yes $\ oxdot$ No
	contractor or volunteer who engages in sexual abuse reported to: Law enforcement ies (unless the activity was clearly not criminal)? $\boxtimes$ Yes $\square$ No
•	contractor or volunteer who engages in sexual abuse reported to: Relevant licensing $\mathbb{R}^2 \times \mathbb{R}^2 \times \mathbb{R}^2 = \mathbb{R}^2$
115.77 (b)	
■ In the	case of any other violation of agency sexual abuse or sexual harassment policies by a

whether to prohibit further contact with inmates?  $\boxtimes$  Yes  $\ \square$  No

contractor or volunteer, does the facility take appropriate remedial measures, and consider

		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	or Overall Compliance Determination Narrative
complia conclus not me	ance or sions. Ti et the st	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
They a particular volunte volunte be inve	re clear larly as eer and eer were estigate would a	r or volunteer must adhere to the same rules and regulations that are placed on the staff. It told the rules and regulations regarding all things about Fountain/J.O. Davis but it relates to PREA. The Chaplain of the facility is the staff person who orientates the new informs them of the laws of Alabama. It is the practice of Fountain/J.O. Davis that if a e to violate any rules particularly those involving sexual harassment or abuse they would d and at the very least they would not be allowed to return to Fountain/J.O. Davis. Their lso be sent to Headquarters to prevent them from going into another Alabama DOC
Stand	dard 1	15.78: Disciplinary sanctions for inmates
All Yes	s/No Qu	uestions Must Be Answered by the Auditor to Complete the Report
115.78	(a)	
•	or follo	ing an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, wing a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to nary sanctions pursuant to a formal disciplinary process? $\boxtimes$ Yes $\square$ No
115.78	(b)	
•	inmate	nctions commensurate with the nature and circumstances of the abuse committed, the 's disciplinary history, and the sanctions imposed for comparable offenses by other s with similar histories? $\boxtimes$ Yes $\square$ No
115.78	(c)	
•	proces	determining what types of sanction, if any, should be imposed, does the disciplinary s consider whether an inmate's mental disabilities or mental illness contributed to his or navior? $\boxtimes$ Yes $\square$ No

\ - /		
underlyin the offen	ility offers therapy, counseling, or other interventions designed to address and correct agreesons or motivations for the abuse, does the facility consider whether to require ading inmate to participate in such interventions as a condition of access to ming and other benefits? $\square$ Yes $\square$ No	
115.78 (e)		
<ul><li>Does the</li></ul>	agency discipline an inmate for sexual contact with staff only upon a finding that the mber did not consent to such contact? $\boxtimes$ Yes $\square$ No	
115.78 (f)		
<ul> <li>For the p upon a re incident of</li> </ul>	ourpose of disciplinary action does a report of sexual abuse made in good faith based easonable belief that the alleged conduct occurred NOT constitute falsely reporting an or lying, even if an investigation does not establish evidence sufficient to substantiate ation? $\boxtimes$ Yes $\square$ No	
115.78 (g)		
	e agency always refrain from considering non-coercive sexual activity between inmates kual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) $\square$ No $\square$ NA	
Auditor Overall Compliance Determination		
□ <b>E</b>	exceeds Standard (Substantially exceeds requirement of standards)	
	leets Standard (Substantial compliance; complies in all material ways with the tandard for the relevant review period)	
	Ooes Not Meet Standard (Requires Corrective Action)	
Instructions for	r Overall Compliance Determination Narrative	

Review of the policy and practice it is determined that the Alabama DOC follows the standard by providing disciplinary sanctions for sexual harassment and abuse when an inmate is the perpetrator. Alabama DOC has disciplinary sanctions for non-coercive sexual activity between inmates and does not count it as sexual abuse.

115.78 (d)

# **MEDICAL AND MENTAL CARE**

# Standard 115.81: Medical and mental health screenings; history of sexual abuse

abuse
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.81 (a)
• 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 □ No □ NA
115.81 (b)
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 □ No □ NA
115.81 (c)
• If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☑ Yes □ No
115.81 (d)
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?

### 115.81 (e)

■ Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ⊠ Yes □ No

### **Auditor Overall Compliance Determination**

		Exceeds Standard (Substantially exceeds requirement of standards)	
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions f	for Overall Compliance Determination Narrative	
complia conclus not me	ance or sions. T et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.	
Through a review of the policy and interviews with medical and mental health staff it is determined that when in inmate discloses this information they are provided access to a mental health professional within the prison. It was also disclosed that the staff provide the informed consent statement anytime they speak with the inmate.			
Stan	dard 1	115.82: Access to emergency medical and mental health services	
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report	
115.82	? (a)		
•	treatme medica	nate victims of sexual abuse receive timely, unimpeded access to emergency medical ent and crisis intervention services, the nature and scope of which are determined by	
		al and mental health practitioners according to their professional judgment?	
115.82		· · · · · · · · · · · · · · · · · · ·	
115.82	If no que sexual	· · · · · · · · · · · · · · · · · · ·	
	If no que sexual victim of the property of the	ualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, do security staff first responders take preliminary steps to protect the	
•	If no que sexual victim po second practiti	ualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, do security staff first responders take preliminary steps to protect the pursuant to § 115.62? ⊠ Yes □ No curity staff first responders immediately notify the appropriate medical and mental health	

115.82 (d)
<ul> <li>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?</li> <li>☑ Yes □ No</li> </ul>
Auditor Overall Compliance Determination
Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
□ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.
Reviewing the process and with interviews with staff it was determined that an inmate is provided treatment following a sexual assault by being transported to the hospital for a sexual assault exam and provided services that would be afforded someone in the community. Interviews with security staff and with medical they were aware of their responsibilities.
Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.83 (a)
■ 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 □ No
115.83 (b)
■ 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 □ No

115.83 (c)

		he facility provide such victims with medical and mental health services consistent with mmunity level of care? ⊠ Yes □ No	
115.83	(d)		
		nate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy (N/A if all-male facility.) $\square$ Yes $\square$ No $\boxtimes$ NA	
115.83	(e)		
	receive	nancy results from the conduct described in paragraph § 115.83(d), do such victims timely and comprehensive information about and timely access to all lawful pregnancy-medical services? (N/A if all-male facility.) $\square$ Yes $\square$ No $\boxtimes$ NA	
115.83	(f)		
		nate victims of sexual abuse while incarcerated offered tests for sexually transmitted ons as medically appropriate? $oxtimes$ Yes $\oxtimes$ No	
115.83	(g)		
	the vict	atment services provided to the victim without financial cost and regardless of whether tim names the abuser or cooperates with any investigation arising out of the incident?	
115.83	(h)		
	• 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 □ No □ NA		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instruc	tions f	or Overall Compliance Determination Narrative	

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The Memo of Agreement between the Alabama DOC and ACAR provides services to inmates who have been sexually assaulted. The prison mental health staff are also a great resource for inmates who have been sexually assaulted.

# **DATA COLLECTION AND REVIEW**

### Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)	)
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■ 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 □ No
115.86 (b)

■ Does such review ordinarily occur within 30 days of the conclusion of the investigation?
 ☑ Yes □ No

### 115.86 (c)

■ Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ⊠ Yes □ No

### 115.86 (d)

- 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 

  No
- 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 

  ✓ No
- 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 

  ✓ No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?

  □ No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? 

  Yes 

  No

•	determ improv	he review team: Prepare a report of its findings, including but not necessarily limited to ninations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for rement and submit such report to the facility head and PREA compliance manager? $\square$ No
115.86	(e)	
•		he facility implement the recommendations for improvement, or document its reasons for ing so? $\boxtimes$ Yes $\ \square$ No
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instru	ctions f	for Overall Compliance Determination Narrative
complia conclus not me	ance or sions. T et the si	below must include a comprehensive discussion of all the evidence relied upon in making the non-compliance determination, the auditor's analysis and reasoning, and the auditor's his discussion must also include corrective action recommendations where the facility does tandard. These recommendations must be included in the Final Report, accompanied by specific corrective actions taken by the facility.
meetin	gs it is	views with staff who are on the incident review committee and by reading minutes of the determined that this standard is adhered to. All investigations following the outcome of on are reviewed at Fountain within the 30 day time frame.
Stand	dard 1	115.87: Data collection
All Yes	s/No Qı	uestions Must Be Answered by the Auditor to Complete the Report
115.87	(a)	
•		he agency collect accurate, uniform data for every allegation of sexual abuse at facilities its direct control using a standardized instrument and set of definitions? $\boxtimes$ Yes $\square$ No
115.87	(b)	
•		he agency aggregate the incident-based sexual abuse data at least annually? $\hfill\Box$ No

115.67	(C)	
	from the	he incident-based data include, at a minimum, the data necessary to answer all questions e most recent version of the Survey of Sexual Violence conducted by the Department of $? \boxtimes Yes \ \Box No$
115.87	(d)	
	docume	ne agency maintain, review, and collect data as needed from all available incident-based ents, including reports, investigation files, and sexual abuse incident reviews? $\Box$ No
115.87	(e)	
	which it	he agency also obtain incident-based and aggregated data from every private facility with t contracts for the confinement of its inmates? (N/A if agency does not contract for the ement of its inmates.) $\square$ Yes $\square$ No $\boxtimes$ NA
115.87	(f)	
	Departr	ne agency, upon request, provide all such data from the previous calendar year to the ment of Justice no later than June 30? (N/A if DOJ has not requested agency data.) $\Box$ No $\Box$ NA
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative
The nai	rrativa h	pelow must include a comprehensive discussion of all the evidence relied upon in making the

The annual report was reviewed that provides information on all aspects of the prison. The information regarding sexual assault allegations is part of this information.

# Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

445 07 (-)

115.88	(a)	
	and im	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Identifying problem areas? $\boxtimes$ Yes $\square$ No
	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Taking corrective action on an ongoing basis? $\Box$ No
	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Preparing an annual report of its findings and corrective of for each facility, as well as the agency as a whole? $\boxtimes$ Yes $\square$ No
115.88	(b)	
	actions	he agency's annual report include a comparison of the current year's data and corrective with those from prior years and provide an assessment of the agency's progress in sing sexual abuse $\boxtimes$ Yes $\square$ No
115.88	(c)	
		agency's annual report approved by the agency head and made readily available to the through its website or, if it does not have one, through other means? $\boxtimes$ Yes $\square$ No
115.88	(d)	
	from th	he agency indicate the nature of the material redacted where it redacts specific material be reports when publication would present a clear and specific threat to the safety and y of a facility? $\boxtimes$ Yes $\square$ No
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	tions f	or Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

In the interview with the Agency PREA Coordinator it was learned that information is gathered from all of the prisons and this is provided by the IPCM. In the interview with the PREA Compliance manager at Fountain/J.O. Davis the auditor was shown the information that is sent to the PREA Coordinator.

# Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.89 (a)			
<ul> <li>Does the agency ensure that data collected pursuant to § 115.87 are securely retained?</li> <li>☑ Yes □ No</li> </ul>			
115.89 (b)			
■ 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 □ No			
115.89 (c)			
■ Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ⊠ Yes □ No			
115.89 (d)			
■ 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   No			
Auditor Overall Compliance Determination			
Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
□ Does Not Meet Standard (Requires Corrective Action)			

### **Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

All data and information is stored and accessible for the PREA Coordinator and for the Deputy Commissioner to review. This was learned in the interview with both individuals. The information in number format is provided in the annual report.

# **AUDITING AND CORRECTIVE ACTION**

# Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.401 (a)			
■ During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.) ☑ Yes □ No □ NA			
115.401 (b)			
During each one-year period starting on August 20, 2013, 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? ⋈ Yes □ No			
115.401 (h)			
■ Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☑ Yes □ No			
115.401 (i)			
■ Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?   Yes □ No			
115.401 (m)			
<ul> <li>Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?</li> <li>☒ Yes ☐ No</li> </ul>			

115.401 (n)

•		nmates permitted to send confidential information or correspondence to the auditor in the manner as if they were communicating with legal counsel? $\boxtimes$ Yes $\square$ No			
Auditor Overall Compliance Determination					
		Exceeds Standard (Substantially exceeds requirement of standards)			
		<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
		Does Not Meet Standard (Requires Corrective Action)			
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The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.					
The auditor had access to all areas of the prison. The posting announcing the dates of the audit was still up when the auditor arrived. Inmates interviewed were aware of the auditor coming.					
Stan	dard 1	115.403: Audit contents and findings			
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report					
115.403 (f)					
•	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) ⊠ Yes □ No □ NA				
Auditor Overall Compliance Determination					
		Exceeds Standard (Substantially exceeds requirement of standards)			
	$\boxtimes$	<b>Meets Standard</b> (Substantial compliance; complies in all material ways with the standard for the relevant review period)			

	Does Not Meet Standard (Requires Corrective Action)			
Instructions for Overall Compliance Determination Narrative				

The auditor witnessed this before arriving to the facility and was able to read the previous audit.

# **AUDITOR CERTIFICATION**

Ī	certify	that
•	CCILIIY	uiai

- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

### **Auditor Instructions:**

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission. Auditors are not permitted to submit audit reports that have been scanned. See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

John Barkley	<u>June 24, 2018</u>
•	
Auditor Signature	Date

<sup>&</sup>lt;sup>1</sup> See additional instructions here: <a href="https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110">https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110</a>.

<sup>&</sup>lt;sup>2</sup> See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.