PREA AUDIT REPORT ☐ Interim ☒ Final ADULT PRISONS & JAILS

Date of report: July 10, 2017

Auditor Information				
Auditor name: Walter Sipple				
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Email: waltersipple@comca	st.net			
Telephone number: 843-	323-8851			
Date of facility visit: June	e 13-14, 2017			
Facility Information				
Facility name: Hamilton W	Vork Release			
Facility physical address	s: 1826 Bexar Avenue East, Hamilton	, Alabama 3	5570	
Facility mailing address	: (if different from above) Same as A	Above.		
Facility telephone numb	oer: 205-921-9308			
The facility is:	☐ Federal	State		☐ County
	☐ Military	☐ Municip	oal	☐ Private for profit
	\square Private not for profit			
Facility type:	⊠ Prison	☐ Jail		
Name of facility's Chief	Executive Officer: Scarlotte Robi	inson		
Number of staff assigne	d to the facility in the last 12	months: 4	of 36 staff	
Designed facility capaci	ty: 278			
Current population of fa	cility: 230			
Facility security levels/i	nmate custody levels: Minimur	n Out / Mini	mum Community Custo	dy
Age range of the popula	ition: 21 - 75			
Name of PREA Complian	Name of PREA Compliance Manager: Josh Fleming Title: Institutional PREA Compliance Manager			
Email address: Joshua.fleming@doc.alabama.gov Telephone number: 205-921-9308				
Agency Information				
Name of agency: Alabam	a Department of Corrections			
Governing authority or	parent agency: (if applicable) St	ate of Alaba	ma	
Physical address: 301 Sou	uth Ripley Street, Montgomery, Alaba	ama 36301		
Mailing address: (if differ	rent from above) Same as above			
Telephone number: 334-353-3883				
Agency Chief Executive Officer				
Name: Jefferson Dunn Title: Commissioner				
Email address: Jefferson.dunn@doc.alabama.gov Telephone number: 334-353-3780				
Agency-Wide PREA Coordinator				
Name: Christy Vincent Title: PREA Director				
Email address: Christy.vincent@doc.alabama.gov Telephone number: 334-353-2501				

AUDITFINDINGS

NARRATIVE

The first cycle initial Prison Rape Elimination Act on-site audit of the Hamilton Work Release Center, located in Hamilton, Alabama, was completed on June 5-6, 2016. The Hamilton Work Release Center was confirmed fully compliant with the Prison Rape Elimination Act standards at that time, without any corrective actions, and in accordance with the reguired agency wide auditing process timeline and schedule. The second cycle on-site audit was conducted from June 13-14, 2017, to determine continued compliance with the Prison Rape Elimination Act standards of August 20, 2012. Please refer to the National Prison Rape Elimination Act Resource Center for further information at www.prearesourcecenter.org. The audit was conducted by Walter Sipple, United States Department of Justice Prison Rape Elimination Act certified adult facilities auditor, and no others, operating as an independent contractor with no conflict of interest. The Hamilton Work Release Center is a male only facility and part of the State of Alabama Department of Corrections. The facility operates under the jurisdiction of the State of Alabama and is classified as a security level 1 and 2 minimum out and minimum community custody facility. It consists of six housing units called dormitories. The inmate's living area is considered open bay style in design. The facility has no segregation or holding cells. The facility's maximum capacity is 278 inmates.

The audit process consists of a review of the Alabama Department of Corrections as well as the Hamilton Work Release Center. Specifically, pre-audit preparation included a thorough review of all documentation and material submitted by the agency and facility along with data included in the completed Pre-Audit Questionnaire. The auditor received primary documentation which consists of policy and secondary documentation which consists of procedure on a flash drive for review prior to the on-site phase of the audit process. The documentation reviewed consisted of agency and facility policies, procedures, forms, education materials, training curriculum, organization charts, posters, brochures, quarterly reports, inmate population reports, memorandums of agreement, signed training rosters, community-based contact information, facility schematic, and other Prison Rape Elimination Act related materials that were provided to demonstrate compliance with the Prison Rape Elimination Act standards. This review prompted a series of questions that were reduced to writing and submitted to the Prison Rape Elimination Act Coordinator and Prison Rape Elimination Act Compliance Manager for review. Answers to the questions were submitted by the agency Prison Rape Elimination Act Coordinator and facility Prison Rape Elimination Act Compliance Manager and reviewed by the auditor prior to the on-site phase of the audit process. The agency defines the Prison Rape Elimination Act Coordinator as the Prison Rape Elimination Act Director and each facility has a designated primary and secondary Prison Rape Elimination Act Compliance Manager referred as the Institutional Prison Rape Elimination Act Compliance Manager.

During the on-site visit portion of the audit process, an entrance meeting was held with the Hamilton Work Release Center facility lieutenant, facility level Prison Rape Elimination Act compliance manager, and the auditor. The auditor was allowed access to the agency and facility in order to conduct the audit. Following the entrance meeting, the auditor toured and observed operations at the facility. The auditor contact information was posted throughout the facility prior to the on-site phase of the audit. The facility staff was fully cooperative with the auditor and audit process. A schematic layout of the facility was provided by the staff which consisted of the inmate housing areas. A list of staff, volunteers, and contractors to include assignments and roles was provided to the auditor along with listings by dormitory for a random and objective selection of inmates for interviews.

The auditor reviewed compliance with the Prison Rape Elimination Act standards based on a review of agency policy, procedure, practice, daily activities, documentation, observation, and interviews with staff and inmates. Interviews were conducted with various outside agencies, to include but not limited to, the County Sheriff's Department; local Hamilton agencies,; Rape, Abuse, and Incest National Network; Prison Rape Elimination Act Resource Center; Just Detention International; and the local rape crisis center, Shoals Crisis Center of Florence, Alabama (256) 767-1100 and Shoals Hospital; Lighthouse Counseling Center in Montgomery; Lifelines Counseling Services 24 hour hotline at (251) 473-7273, Alabama Department of Economic and Community Affairs (ADECA), and Alabama Coalition Against Rape at (334) 264-0123. The agency has a memorandum of agreement with an outside agency victim advocacy service available at no cost and confidential for the inmates at 1-800-639-4357.

Inmates were interviewed using the recommended Department of Justice protocols that question their knowledge of a variety of Prison Rape Elimination Act protections generally and specifically their knowledge of reporting mechanisms available to inmates to report abuse or harassment. Staff were questioned using the Department of Justice protocols that question their Prison Rape Elimination Act training and overall knowledge of the agency's and facility's zero tolerance policy, reporting mechanisms available to inmates and staff, the response protocols when an inmate alleges abuse, and first responder duties. An objective random sampling of staff, volunteer, inmate, and contractor interviews was selected from a series of lists presented to the auditor by the facility. Last names were randomly selected by the auditor from an alphabetically ordered list. A total of 11 agency and facility staff were interviewed per random sampling from the auditor. A total of 28 inmates were interviewed per random sampling from the auditor, along with special category inmates and a sampling identified during the in-take screening process. The auditor also conducted an after-normal-hours visit on June 13, 2017, to observe evening operations and interview night section staff. An exit interview was conducted at the end of the on-site visit by the auditor with the facility warden, facility Prison Rape Elimination Act compliance manager, and facility captain. The facility reported no allegations of sexual abuse or sexual harassment in the past 12 months.

DESCRIPTION OF FACILITY CHARACTERISTICS

The mission statement for the Alabama Department of Corrections is, as follows: "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". The Hamilton Work Release Center operates under the same mission.

The Hamilton Work Release Center is located in a rural area of northern Alabama, at 1826 Bexar Avenue East, in Hamilton, Alabama. The facility is located on the outskirts of the small rural community of Hamilton, Alabama. It is a small rural community close to the Alabama and Mississippi State line. The facility has a partial fence behind the inmate dormitories, but otherwise is considered an open concept facility. The agency, per regulation 454, defines youthful inmates as any inmate housed in an adult facility whose age is under eighteen. The facility reported that no youthful inmates are confined at the facility. The facility reported that the age range of inmates is from age 21 up to age 75. A total of 206 inmates were reported confined at the facility on the pre-audit questionnaire. The number of inmates admitted to the facility during the past 12 months is 270.

Inmate custody classifications and security levels definitions: Minimum-out custody is for inmates that are not seen as a risk to themselves or others and can be assigned to work assignments away from Alabama Department of Corrections property without supervision by correctional officers. Most minimum-out custody inmates are housed at community work centers like the Hamilton Work Release Center; Minimum-community custody is for inmates that are not seen as a risk to themselves or others. Minimum-community custody inmates are allowed to work in the community and are housed in community based facilities when they are not working like the Hamilton Work Release Center; Level 1 is the security level for minimum-community custody inmates at community based centers and for those on supervised re-entry programs; and Level 2 is the security level for community work centers and is where most inmates in minimum-out custody are housed.

The facility was originally constructed in 1957 as a road camp for the Alabama Department of Transportation where inmates were utilized to clean trash and debris from the roadways located within the area. From 1981 to 1985, the facility was closed. In 1985, the facility was reopened under the Alabama Department of Corrections as the Hamilton Work Release Center. In 2004, the facility accepted security level 2 inmates and the inmate population increased to 224. In 2008, further renovations were completed which increased the facility capacity to 278 inmates.

The Hamilton Work Release Center consists of eleven buildings on the property. The administration building contains office space for the warden, captain, account clerk, staff training, and support personnel along with a staff break room and conference room. A separate building is used for inmate shakedowns utilized daily for inmate searches upon returning to the facility from work assignments. A nurse's station is utilized by medical staff for inmate medical care. The main building contains the inmate living areas, dormitory A, B, C, E, and F, inmate kitchen and dining hall, inmate television room, inmate restrooms and showers, laundry, and job placement office, as well as the staff shift commander's office, shift office and Prison Rape Elimination Act compliance manager's office. Dormitory D is a trailer for inmates that are classified minimum out custody. A maintenance tower is used for storage space and a maintenance building is used for grounds maintenance tool and equipment storage. A chapel is also used for inmate television viewing and other inmate programs as well as storage. An inmate canteen and canteen storage building is available to inmates to purchase food items. A separate inmate property storage building is also used as an inmate barber shop and utility building for storage. The auditor tested the inmate telephone system during the on-site visit portion of the audit process.

The Hamilton Work Release Center has a total of six inmate living areas called dormitories. The inmate dormitories are considered open bay style bunking. The facility work release inmates, or minimum community custody inmates are housed in dormitories A, B, C, E, and F, and community work center inmates are classified as minimum out custody inmates and housed in dormitory D. Work release inmates are allowed to work for the general public and work center inmates are allowed to work for local municipalities or other governmental agencies. Over thirty inmates are employed at a kitchen cabinent manufacturer; over thirty inmates are employed in three separate mobile home manufacturers; lumber company; automobile dealership; and government agencies. The auditor was impressed with the robust inmate work program that is popular with the inmates and fulfills the mission of the facility as a transition center.

The Hamilton Work Release Center offers inmates adult basic education programs to include preparation for completing the General Educational Development (GED) test. GED classes are available through Bevil State Community College on site. Inmate substance abuse meetings are conducted weekly as well as relapse courses on a quarterly basis. Some of the topics consist of addiction and recovery, job skills, financial management, communication skills, faith based character building, health education, family reintegration, and importance of continuing education. The job placement office provides employment and assists inmates with obtaining such items as birth certificates, social security cards, as well as a driver's license. The inmate religious services are provided by volunteers from the local community. The auditor was impressed with the inmate managed crops and garden on the facility property.

The facility has approximately 38 staff employed at the facility, 79 volunteers and contractors, and no interns. The Hamilton Work Release Center also benefits from the utilization of resources as well as medical and mental health care from the nearby Hamilton Aged and Infirmed Correctional Facility when needed.

SUMMARY OF AUDIT FINDINGS

The agency Prison Rape Elimination Act Coordinator designated the Hamilton Work Release Center as an adult prison in reference to Prison Rape Elimination Act standard compliance under the adult prisons and jails audit process. The audit preparation included a thorough review of all primary/policy and secondary/practice documentation and materials submitted by the agency and facility along with the data included in the completed Pre-Audit Questionnaire to demonstrate compliance with the standards. The auditor was impressed with the thoroughness of the documentation submitted. The facility Prison Rape Elimination Act compliance manager also provided the auditor with several hard copies of facility policy and instruction during the on-site phase of the audit process.

The auditor conducted a thorough facility-wide audit of the Hamilton Work Release Center. Zero sexual assault or sexual abuse harassment allegation cases were reported during the past 12 month period from the date of the audit. The auditor received one third-party request for an interview during the audit process from the auditor posted contact information. The auditor interviewed the inmate during the on-site visit phase of the audit process. The facility Prison Rape Elimination Act compliance manager was informed of the inmates concerns and the warden took immediate action to resolve the inmates concerns.

The interviews of inmates reflected that they were aware of and understood the Prison Rape Elimination Act protections and the agency's zero tolerance policy. Inmates receive written materials at intake that provide detailed information about Prison Rape Elimination Act protections, the multiple ways to report sexual abuse or sexual harassment and ways to protect themselves from abuse. Inmates were able to articulate to the auditor what they would do and who they would tell if they were sexually abused. All facility staff interviewed indicated they had received detailed Prison Rape Elimination Act training and could articulate the meaning of the agency's zero tolerance policy.

The Hamilton Work Release Center Prison Rape Elimination Act compliance manager showed the auditor what is considered an information board located in the staff break room. Essentially, the information board is mounted on the wall and consists of a randomly selected Prison Rape Elimination Act standard to show case for the week. The auditor commended the agency and facility for creating a unique training opportunity. The auditor also commended the facility for the doubling of its video monitoring system along with the creation of a recreation yard concrete pad for multi-purpose inmate use.

The auditor was impressed with the small town community of Hamilton, Alabama along with the somewhat rural location of the Hamilton Work Release Center. The auditor noted that the facility had several veteran staff that worked at the facility with extensive ties to the local community of Hamilton providing operational consistency and stability. Specifically, the Hamilton Work Release Center benefits from being a small facility in a small rural town with a small group of veteran staff that work well together as a team to accomplish the overall mission of the agency and facility as well as compliance with the Prison Rape Elimination Act standards. A number of inmates were complementary toward the facility, staff, and specifically the warden during the inmate interview process. The inmates and staff have a focus on a community-based transition mission and program with active employment opportunities in the local community. The work and transition program as well as the pass and leave program and supervised re-entry program is very popular with the inmates and keeps them primarily focused on eventual release. The Hamilton area offers the inmates a variety of different work opportunities. The staff and inmates were completely cooperative and helpful throughout the audit process. The agency and facility staff did a good job of providing the auditor with primary and secondary documentation to confirm compliance with the Prison Rape Elimination Act standards. The auditor was also impressed with the newly updated agency website at www.doc.alabama.gov. The Hamilton Work Release Center benefits from additional resources available to them from the Hamilton Aged and Infirmed Facility located within the community of Hamilton, Alabama.

The auditor recently attended the annual Compliance and Accreditation Managers' Association Conference, from May 20-23, 2017, in Murfreesboro, Tenessee, and was informed by the Prison Rape Elimination Act representatives to expect a more robust auditing process in future auditing cycles. This final report is reflective of and in accordance with that guidance. The auditor determined that the facility is 100% compliant with the Prison Rape Elimination Act standards for this relevant review period. In addition, the auditor determined that the facility exceeds standard 115.11 by the creation of agency regulation 454 and facility policy 454-1; exceeds standard 115.18 due in part to the facility camera and video monitoring system; exceeds standard 115.31 due to the extensive agency and facility training plan; exceeds standard 115.53 in part by creating various informative posters and various outside the agency support services; exceeds standard 115.65 by creating a detailed and easy to follow coordinated response protocol for the facility staff (facility policy 454-01.1); exceeds standard 115.89 due in part to the user friendly and well organized agency website related to the fields of the Prison Rape Elimination Act. The auditor determined that standard 115.14 and 115.52 is not applicable.

Number of standards exceeded: 6 (115.11, 115.18, 115.31, 115.53, 115.65, and 115.89)

Number of standards met: 35

Number of standards not met: 0

Number of standards not applicable: 2 (115.14 and 115.52)

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

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

Auditor comments: The Hamilton Work Release Center standard operating procedure (facility policy 454-1) on inmate sexual abuse and harassment awareness specifically states, "The purpose of the standard operating procedure is to develop policies and procedures to prohibit, prevent, detect, and respond to inmate sexual offenses, sexual harassment, and custodial sexual misconduct. The procedure is essential to implement the Alabama Department of Correction's zero tolerance policy on inmate sexual offenses, sexual harassment, and custodial sexual misconduct".

The Hamilton Work Release Center Prison Rape Elimination Act Compliance Manager is designated as a Correctional Sergeant. He monitors inmates identified as being sexual aggressors, potential sexual aggressors, victims of sexual abuse, and potential victims of sexual abuse. He reviews, monitors, and maintains records of all Prison Rape Elimination Act related incidents, forms and documents in order to ensure compliance with the agency and facility regulation and the Federal Prison Rape Elimination Act Standards. The records consist of, but not limited to, incident reports, hotline reports, reporting envelope allegations, grievances, staffing information, screening forms, retaliation forms, and staff logs. He recommends placement and/or transfer of inmates involved in Prison Rape Elimination Act related incidents with the approval of the Warden. He conducts inmate orientation. He assists the facility Warden in developing and updating the institutional Standard Operating Procedures and action plan related to the Prison Rape Elimination Act. He ensures inmates and employees in Prison Rape Elimination Act related incidents receive all services required and submits appropriate reports. He completed training related to his duties from the National Institute of Corrections; Rape Response for Law Enforcement Training from Bevill State Community College; and Investigatinve Sexual Assault Law Enforcement Training from the Shoals Crisis Center.

The auditor thoroughly reviewed the Alabama Department of Corrections written policy toward sexual abuse and sexual harassment and it specifically outlines the agency's approach to preventing, detecting, and responding to such conduct. The agency employs an agency-wide Prison Rape Elimination Act coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the Prison Rape Elimination Act standards. The Prison Rape Elimination Act coordinator, defined as Prison Rape Elimination Act director in the agency regulation, reports to the General Counsel of the Alabama Department of Corrections as reflected on the agency organizational chart. The auditor was impressed that the agency Prison Rape Elimination Act Coordinator is also a certified Prison Rape Elimination Act auditor with many years of experience and did an excellent job providing primary/policy and secondary/practice documentation to confirm compliance with the standards. The agency General Counsel is experienced with the Prison Rape Elimination Act and actively involved with agency and individual facility compliance with the standards. The Prison Rape Elimination Act compliance manager is an experienced staff member and reports directly to the facility warden as reflected in the facility organizational chart. The facility Prison Rape Elimination Compliance Manager represented the facility and agency in a professional and compentent manner during the audit process.

The Alabama Department of Corrections Administrative Regulation (454) establishes the responsibilities, policies, and procedures to implement a zero-tolerance policy for prohibiting, preventing, detecting, responding to and investigating the sexual abuse and sexual harassment of inmates under Alabama Department of Corrections care and control. Specifically, the agency Prison Rape Elimination Act regulation (454) states: "It is the policy of the Alabama Department of Corrections to maintain a zero-tolerance policy against inmate sexual abuse and harassment and custodial misconduct. Any sexual conduct, whether inmate-on-inmate or employee-on-inmate, and whether consensual or forced, is strictly prohibited". As defined in Alabama Code of Laws Section 14-11-31: "It shall be unlawful for any employee to engage in sexual conduct with a person who is in the custody of the Department of Corrections, the Department of Youth Services, a sheriff, a county, or a municipality". Any person violating the subsection shall, upon conviction, be guilty of custodial sexual misconduct which is a Class C felony. Alabama Code of Laws Section 13A-6-65.1 also defines other specific areas of the law such as sexual torture which is a Class A felony.

Specifically, the agency regulation and facility policy (454-01) mandates a zero tolerance policy and an implementation plan is in place outlining how the agency and facility will implement the zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The agency and facility has an easy to understand organizational chart and the auditor was provided a copy during

the pre-audit phase of the audit. The facility staff acknowledged an understanding of the zero tolerance policy. Per agency regulation 454 dated January 4, 2016, "The Prison Rape Elimination Director is an individual designated by the Commissioner with the authority to coordinate and develop procedures to identify, monitor, and track sexual abuse rape and sexual harassment in the Alabama Department of Corrections; maintain statistics; and, conduct practice audits to ensure compliance with Department policy and the Prison Rape Elimination Act of 2003 and Prison Rape Elimination Act National Standards (Code of Federal Regulation, Title 28, Part 115)." The Institutional Prison Rape Elimincation Act Compliance Manager is defined as, "the designated person at the facility with the time and authority to coordinate the facility's efforts to comply with the Prison Rape Elimination Act Standards."

The agency regulation and facility policy mandates a zero tolerance policy and an implementation plan is in place outlining how the agency and facility will implement the zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The agency and facility has an easy to understand organizational chart and the auditor was provided a copy during the pre-audit phase of the audit. The facility staff acknowledged an understanding of the zero tolerance policy.

The auditor reviewed the Alabama Code of Laws, agency regulation, and facility policies and procedures (Alabama Code of Laws 13A-6-60 through 13A-6-70 (1975), 14-11-30 through 14-11-32, Administrative Regulation 454: Inmate Sexual Abuse and Harassment, facility Standard Operating Procedure 454-1); observed facility practices; reviewed data provided by the facility staff; and interviewed residents and staff during an on-site visit and tour of the facility. The auditor was impressed with the level of commitment that the agency commissioner, associate commissioner, agency general counsel, agency level director/coordinator, facility warden, and facility level compliance manager had toward compliance with the standards. The auditor was impressed with the facility's compliance with all of the standards. It was evident throughout the on-site phase of the audit process that all staff and residents have a thorough understanding of the agency policy and specifically the agency's zero tolerance policy. The regulation and policy forms the foundation and contains necessary definitions, sanctions and descriptions of the agency strategies and responses to sexual abuse and sexual harassment. The agency has a fulltime Prison Rape Elimination Act compliance manager and alternate assigned to each individual facility throughout the State of Alabama. Based on the listed information, the auditor determination is that the agency and facility exceeds the standard for the relevant review period due in part to the well organized Prison Rape Elimination Act specific policy and procedure along with staff training. The auditor received confirmation of agency level robust training. Specifically, the facility Compliance Manager received not only training on his specific duties as compliance manager but also completed intestigator training conducted by the Bevill State Community College and Investigatinve Sexual Assault Law Enforcement Training from the Shoals Crisis Center. The auditor commended the agency and facility for maintaining a robust staff training program, Prison Rape Elimination Act information boards, secure facility vulnerability assessments, and site visits.

Auditor note: The auditor recently attended the Compliance and Accreditation Managers' Association Conference which is a national affiliate of the American Correctional Association, from May 20-23, 2017, in Murfreesboro, Tennessee. The Prison Rape Elimination Act Resource Center and affiliated organizations stressed that compliance is not a linear path in that compliance must be sustained and maintained regardless of audit schedule or timing. Agencies and facilities should expect audits to get more thorough as the Department of Justice is refining its expectations for the process and clarifying what is required for continued compliance into the next audit cycles. This final report is reflective of those expectations and in accordance with the most up-to-date auditor/auditing guidance.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Administrative Regulation Number 002: Organization and Objectives dated February 7, 2012.
- Hamilton Work Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Alabama Department of Corrections Organizational Chart.
- Interviews with agency Associate Commissioner of Operations, Prison Rape Elimination Act Coordinator and facility Compliance Manager and documentation of training and credentials.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Alabama Code of Laws 13A-6-60 through 13A-6-70 (1975) and 14-11-30 through 14-11-32.
- Alabama Department of Corrections Regulation Number 318.
- Training and Experience Documentation from the agency and facility Prison Rape Eliminmation Act Coordinator/Director and Compliance Manager.
- Memorandum from Warden, dated March 11, 2016, confirming a back-up Institutional PREA Compliance Manager.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:			
PI-2 Institutio	REA Director- Designation and Qualifications n Compliance Manager- Designation and Qualifications om Warden – Designating the IPCM back-up personnel		
Standard 11	5.12 Contracting with other entities for the confinement of inmates		
	Exceeds Standard (substantially exceeds requirement of standard)		
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
	Does Not Meet Standard (requires corrective action)		
dete must reco	tor discussion, including the evidence relied upon in making the compliance or non-compliance rmination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These remembers must be included in the Final Report, accompanied by information on specific ective actions taken by the facility.		
Auditor comments: The auditor interviewed the agency Prison Rape Elimination Act coordinator as well as contracting officials. The auditor received confirmation of non-agency confinement of agency inmates in accordance with agency regulation (454). The General Counsel for the Alabama Department of Corrections is responsible for any contractual compliance with the Prison Rape Elimination Act standards. Specific contract documentation was received in reference to an agreement with the Talladega County Sheriff's Jail and the Alabama Department of Corrections dated July 9, 2015.			
The agency and facility is in compliance with the standard for the relevant rating period. The auditor also received confirmation memorandums from the facility and agency dated March 7, 2017 and March 8, 2017, that the standard only applies to the Tutwiler Facility and Talladega Counties. The agency and facility meet the standard for the relevant review period.			
Policy, Materials, Interviews and Other Evidence Reviewed:			
• Alaba 4, 201	ma Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January		
	orandum of Agreement with the Talladega County Sheriff's Department and Alabama Department of Corrections dated July		
• Interv	iews with agency Prison Rape Elimination Act Coordinator and facility Compliance Manager and documentation of training redentials.		
• Alaba	ma Department of Corrections submitted Pre-Audit Questionnaire.		
Alabama Department of Corrections Compliance Evidence Provided to Auditor:			
Protocols:			
P-1 AR 454			
Process Indicators:			
PI-1 Contract	Receipt of PREA/MOU (only applies to Tutwiler/Talladega Co.)		

PREA Audit Report

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Standard 115.13 Supervision and monitoring

Meets Standard (substantial compliance; complies in all material ways with the standard for the

Exceeds Standard (substantially exceeds requirement of standard)

relevant review period)

□ Does Not Meet Standard (requires corrective action)

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

Auditor comments: The auditor interviewed the agency associate commissioner of operations and the Hamilton Work Release Center staff and verified that the staff develops, implements, and documents a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse. The Hamilton Work Release Center's policy (454-01.2) ensures a post is filled when a deviation from the staffing plan is necessary and notated in the deviation log. Specifically, per agency regulation 454, the Prison Rape Elimination Act cooridinator shall meet with the Warden annually to assess and document if any adjustments are needed to the staffing plan, video monitoring systems and other monitoring technologies. Facilities will document the review utilizing Form 454-J: Annual Prison Rape Elimination Act Staffing Plan Review. The facility takes the following into consideration per the standard:

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

In circumstances where the staffing plan is not complied with, the agency shall document and justify all deviations from the plan. Whenever necessary, but no less frequently than once each year, the agency shall assess, determine, and document whether adjustments are needed to:

- 1) The staffing plan established pursuant to the standard;
- 2) Prevailing staffing patterns;
- 3) The facility's deployment of video monitoring systems and other monitoring technologies; and
- 4) The resources the facility has available to commit to ensure adequate staffing levels.

Specifically, the Hamilton Work Release Center standard operating procedure details a step-by-step procedure on conducting unannounced rounds with documentation on facility form (454-G) logging such rounds for confirmation of compliance. The rounds and logs also include procedures for conducting video surveillance checks. The Hamilton Work Release Center standard operating procedure (454-1) dated February 5, 2016, "The purpose of this policy is to implement a staffing plan that shall effectively maintain the Alabama Department of Corrections zero tolerance policy on inmate sexual offenses, sexual harassment, and custodial sexual misconduct. The policy also establishes mandatory posts that are critical to the operations of the facility and closing order of non-mandatory posts." The auditor was provided with quarterly staff work schedules, inmate population data, risk/vulnerability assessment, schematic of facility, cost estimate for additional cameras and storage capacity, site visit and report from agency Prison Rape Elimination Act Coordinator/Director, and annual report.

Per the Hamilton Work Release Center Staffing Plan, "This staffing plan is designed to effectively maintain the Alabama Department of Corrections zero tolerance policy in regard to the Prison Rape Elimination Act (PREA). This staffing plan of Hamilton Community Based Facility/Community Work Center identifies staff and electronic monitoring crucial in prohibiting, preventing, detecting and responding to inmate sexual harassment, sexual assault and custodial sexual misconduct". The current security staff of the facility consists of two (2) administrative staff and twenty-eight (28) uniformed security staff as outlined below:

- (1). Administrative Security Staff:
 - a. Warden 1 (one)
 - b. Captain (one)
- (2). Uniformed Security Staff divided among three 8 hour shifts:
 - a. Lieutenant (two)

- b. Sergeant (four)
- c. Officer (twenty-two)

The facility is composed of the following support staff: Classification Specialist; Licensed Practical Nurse; Medical Doctor; Administrative Support Assistants; Staff Accountant/Business Manager; Account Clerk; Canteen Vendors; and a Maintenance Supervisor. Other augmented staffing and support staff are provided by volunteers and assistance from the Hamilton Aged and Infirmed Facility located within the community of Hamilton. The facility operates on acritical staffing plan, requiring a minimum of one (1) security supervisor and three (3) security staff. Shift Commanders have a plan of action for any staffing deviations.

Per agency regulation 454, "Unannounced Rounds: Each facility shall implement a practice of having intermediate and higher-level staffconduct and document unannounced rounds to identifl, and deter sexual abuse and harassment. These shall be implemented on day shifts as well as night shifts. There must be a prohibition on alerting others of the rounds occurring and practices in place that disallow staff from alerting other staffor the rounds unless there is a legitimate operational need to do so, The Warden will assist in the development and documentation of the facility staffing plan and will make his/her best effort to comply with the staffing plan. The plan will provide for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. The PREA Director shall meet with the Warden annually to assess and document if adjustments are needed to the staffing plan, video monitoring systems and other monitoring technologies. Facilities will document the review utilizing ADOC Form 454-J, Annual PREA Stafing Plan Review".

The agency and facility is in the second cycle auditing process. The auditor reviewed agency regulation and policy (regulation 454 and facility policy 454-1). The agency and facility meets the standard and complies with the standard for the relevant review period. The auditor specifically interviewed the facility director and confirmed the required elements of the staffing plan along with documentation to support compliance. The auditor stressed and emphasized the importance of having and maintaining a thoroughly documented facility staffing plan and the facility warden acknowledged the importance. The auditor recommended a webinar for future reference and training resource opportunities titled, "Developing and Implementing a Prison Rape Elimination Act Compliant Staffing Plan", from the National Prison Rape Elimination Act Resource Center at www.prearesourcecenter.org.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Administrative Regulation Form 454-J: Annual Prison Rape Elimination Act Staffing Plan Review
- Hamilton Work Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016 and Deviation Log 454-01.2.
- Interviews with agency Associate Commissioner of Operations, Prison Rape Elimination Act Coordinator, facility Compliance Manager, and facility Captain.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Hamilton Work Release Center memorandum from Warden appointing a back-up PREA Compliance Manager.
- Staffing rosters, inmate population data, staff work schedules, vulnerability/risk assessment, schematic of facility, annual report.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

- P-1 AR 454
- P-2 Staffing Plan SOP

Process Indicators:

- PI-1 Complete Facility Staff Work Schedules
- PI-2 Daily Population Report
- PI-3 Facility Blueprint/Layout
- PI-4 Facility Staff Duty Roster
- PI-5 Annual Survey on Sexual Violence
- PI-6 Security Count Log
- PI-7 Supervisory Monitoring Log
- PI-8 Vulnerable Assessment Form

Standard 115.14 Youthful inmates

		Exceeds Standard (substantially exceeds requirement of standard)
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
	$\Box X$	Not Applicable
Release	e Center to	s: The Alabama Department of Corrections has an agency regulation (454). Per memorandum from the Hamilton Work the auditor, they do not confine youthful (inmates under age 18 as defined by agency regulation) inmates. Draper lity is listed as a possible confinement location if needed. This standard is considered not applicable for this rating review.
Policy,	Materials	Interviews and Other Evidence Reviewed:
•	Alabama 4, 2016.	a Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January
•	Hamilto Interviev	n Work Center Memorandum to the Auditor dated January 29, 2016. ws with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Warden. a Department of Corrections submitted Pre-Audit Questionnaire.
Alaban	na Departr	nent of Corrections Compliance Evidence Provided to Auditor:
Protoco	ols:	
P-2 Y		nmate SOP/Draper CF & Tutwiler CF in Warden/Directive from Operations and Women Services
Process	s Indicator	S:
PI-2 S		Log y Monitor Log amate Schedule (only applies to Tutwiler & Draper)
Stand	lard 115.	.15 Limits to cross-gender viewing and searches

 \boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)

Exceeds Standard (substantially exceeds requirement of standard)

Does Not Meet Standard (requires corrective action)

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

Auditor comments: The Alabama Department of Corrections and Hamilton Work Release Center has a written regulation and policy (AR 454, 336, 302, and facility policy 454-1) that prohibits any cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The Hamilton Work Release Center reported zero cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or performed by non-medical staff within the past 12 months of the audit.

Specifically, the facility standard operating policy procedure (454-01 and 336-01) details cross-gender and transgender searching and viewing. Any incidents involving cross-gender strip searches are documented in accordance with agency administrative regulation 302. Per agency regulation 454, dated January 4, 2016: "The facility staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmates's genital status in unknown, it may be determined during conversation with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of the broader medical examination conducted in private by a medical practioner." In addition, "The agency shall train security staff on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs".

The auditor specifically received documentation of policy and procedures, logs, and staff training curriculum and signature sheets to confirm compliance with the standard. The agency and facility meet the standard for this relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Work Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016
- Alabama Department of Corrections Administrative Regulatin Number 336 dated February 8, 2016.
- Hamilton Facility Standard Operating Procedure.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Warden.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Staff Training Rosters on PREA/LGBTI dated July 2016.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:		
P-1	AR 454	
Proce	ess Indicators:	
PI-1	Training Records	

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
П	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The auditor interviewed a number of inmates with disabilities during the on-site phase of the Hamilton Work Release Center audit process. The agency and facility takes 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. The agency takes 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. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burden, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

Per agency regulation 454, dated January 4, 2016, "All inmates shall be given verbal and written, understandable information explaining the agency's zero tolerance Prison Rape Elimination Act policy including how to report sexual abuse and harassment upon their initial intake into an agency institution; Receive a comprehensive educational orientation by a facility compliance manager on the agency's zero tolerance Prison Rape Elimination Act policy and how to report sexual abuse and harassment within 30 days of their arrival into an agency institution; Be provided, by the facility compliance manager, accessible education formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service; and be given verbal, visual, and written information regarding the Prison Rape Elimination Act during orientation upon their transfer to any institution."

The auditor was able to confirm compliance with agency regulation (454), along with secondary documentation submitted by the agency and facility, observation, and interviews. The agency and facility has an agreement for services with the Alabama Institute for the Deaf and Blind. Specically, the Dothan Regional Center, 111 Medical Drive, Dothan, Alabama, (334) 677-6270. The auditor also received and reviewed materials in formats for what the agency terms "lower functioning" abilities. The agency and facility utilizes the Prison Rape Elimination Act inmate education video titled, "What You Need to Know", from the Prison Rape Elimination Act Resource Center and Just Detention International organizations. The agency utilizes Google Translation Services for inmates that are limited English proficient. The agency and facility is in compliance with the standard for the relevant rating period.

Auditor note: The National Center for Victims of Crime recently initiated and launched the Victim Connect Resource Center which is a resource for victims, to include but not limited to, providing critical, confidential assistance through phone, text, and chat along with interpreter services in over 200 languages. These services can be accessed at 1-855-4VICTIM or www.chat.victimconnect.org. The antisexual assault organization, RAINN, operates a national hotline at 1-800-656-4673 with access to a range of free services.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Institute for the Deaf and Blind, Dothan Regional Center, 111 Medical Drive, Dothan, Alabama, (334) 677-6270.
- Hamilton reported facility quarterly inmate data, inmate educational documentation, brochures, and signed acknowledged forms.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Programs Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

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P-1 AR 454

Process Indicators:

- PI-1 Inmate Receipt of PREA/Acknowledgment
- PI-2 Interpreter Contract/MOU
- PI-3 Lower Functioning Information/Materials Used

Standard 115.17 Hiring and promotion decisions

Ш	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

corrective actions taken by the facility.

Auditor comments: The Alabama Department of Corrections and Hamilton Work Release Center does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor who may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described.

The agency and facility considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The agency and facility performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates. A process is in place for criminal background checks at least every five years for current employees and contractors who may have contact with inmates.

Per agency regulation 454, dated January 4, 2016, "Departmental policy prohibits the hiring or promotion of an employee or contractor who may have contact with inmates who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or Has been civilly or administratively adjudicated to have engaged in the activity described above."

An interview with agency and facility staff confirmed compliance with the Prison Rape Elimination Act standard. Specifically, per agency regulation 454, the Alabama Department of Corrections Personnel Division is responsible for the completion of agency regulation 216, background investigations; form 216-B, Prison Rape Elimination Act compliance; and regulation 208, employee standards of conduct and discipline. Each new hire along with volunteers, Interns, and contractors receive a thorough background screening. This screening specifically includes criminal background checks through the National Crime Information Center. A sampling of new hires or promotions in the last 12 months not only revealed thorough background checks, but a quality recruiting program for new staff. The auditor noted several seasoned staff with many years of experience working with inmates and knowledgeable concerning agency policies and procedures.

The auditor specifically interviewed facility uniformed security section staff per random sampling and alternative shifts. The auditor reviewed the agency regulations, policies and procedures (agency regulation 454 and 216); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The auditor was impressed with the quality of staff hires for the facility. The agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Administrative Regulation Number 216: Background Investigations dated December 7, 2015.
- Alabama Department of Corrections Administrative Regulation Number 208: Standards of Conduct and Discipline.
- Alabama Department of Corrections Administrative Regulation Number Form 216-B: Prison Rape Elimination Act Compliance.
- Alabama Department of Corrections Human Resources Department, Montgomery, Alabama.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Human Resource Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Background Checks/Refer to HR in Montgomery for Personnel Records
- PI-2 Application/Pre-Employment Questionnaire

Standard 115.18 Upgrades to facilities and technologies

Exceeds Standard (substantially exceeds requirement of standard)

		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	deter must recor	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These nmendations must be included in the Final Report, accompanied by information on specific ctive actions taken by the facility.
reviev facilit inside provie	wed all 32 by at night the inmaded the au	nts: In 2015, the Hamilton Work Release Center upgraded its video monitoring system throughout the facility. The auditor cameras along with schematic placements during the on-site visit portion of the audit process. The auditor also viewed the and conducted a detailed review of the monitoring equipment. Specifically, the auditor was able to view camera coverage the dormitories at night with the lights off. The facility has several mirrors placed throughout the facility. The facility ditor with a copy of future camera and video capacity projections with estimates. The number of cameras will double from once the video monitoring system is fully operational.
of Op	erations a	alation 454, "The Prison Rape Elimination Act Director shall be responsible for consulting with the Associate Commissionend/or Deputy Commissioner and the facility Warden to provide input on the institutional staffing plans and surveillance ipment additions or changes as it relates to the Prison Rape Elimination Act."
safety technological placer review review auditor releva	vinto construction of case wed the against data as or determinant review.	erviewed the agency Associate Commissioner of Operations on June 2, 2016, and he confirmed that the agency takes inmate ideration in reference to any facility upgrades. The agency and facility considers a variety of factors when upgrading he facility including primarily sight lines, blind spots, and inaccessible areas. Interviews with facility staff indicate that ameras and mirrors are discussed frequently to keep enhancing safety and security for all inmates and staff. The auditor tency regulations and facility policies and procedures (regulation 454 and facility policy); observed facility practices; and documentation provided by the facility staff; and interviewed staff during an on-site visit and tour of the facility. The nation is that the Alabama Department of Corrections and the Hamilton Work Release Center exceeds the standard for the period. The auditor justification for exceeding the standard is based in part on the facility camera and video monitoring lly for a small facility, and commitment for future additions and upgrades.
Polic	y, Materia	ls, Interviews and Other Evidence Reviewed:
•	4, 201 Hamil Hamil Intervi Manaş	ma Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 6. ton Work Center Policy 454-1: Inmate Sexual Abuse and Harassment Awareness of February 5, 2016. ton Work Center video monitoring system schematic and estimates for future additions and upgrades. ews with agency Associate Commissioner of Operations, Prison Rape Elimination Act Coordinator, facility Compliance ger, and Facility Staff. ma Department of Corrections submitted Pre-Audit Questionnaire.
Alaba	ıma Depai	tment of Corrections Compliance Evidence Provided to Auditor:
Proto	cols:	
P-1 P-2	AR 454 Staffing	Plan SOP
Proce	ss Indicate	Drs:
PI-1	Surveill	ance System Schematic (Blueprint/Layout of Facility)
Stan	dard 11	5.21 Evidence protocol and forensic medical examinations
		Exceeds Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the

relevant review period)

☐ Does Not Meet Standard (requires corrective action)

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

Auditor comments: To the extent the agency is responsible for investigating allegations of sexual abuse; the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings, and criminal prosecution. The auditor reviewed agency regulation 454 to confirm compliance with the standard. The facility utilizes a multidisciplinary team investigation protocol for responding to abuse. The auditor confirmed with receipts of training certificates that the agency investigators completed the National Institute of Corrections investigations course which is a recognized compliance requirement to meet the standard as well as the evidence protocol from the United States Department of Justice, "A National Protocol for Sexual Assault Medical Forensic Examinations", dated April 2013. The crisis center for the facility is STAR (Standing Together Against Rape), 530 South Lawrence Street, Montgomery, Alabama, (334) 213-1227. STAR has a written agreement with Correctional Medical Services, Inc. which is the recognized medical provider for the Alabama Department of Corrections to provide crisis services in accordance with the response protocol. They maintain a 24 hour hotline for an on-call Sexual Assault Nurse Examiner (SANE), (334) 571-0999. The facility and agency reported no forensic medical exams conducted during the past 12 months and meets the standard.

Specifically, the Hamilton Work Release Center Standard Operating Procedure (454-1) states, The coordinated response establishes to responsibilities, policies, and procedures to coordinate actions taken in response to an incident of sexual abuse among first responders, medical and mental health providers, investigators and facility leadership. The facility benefits from having services available from the Hamilton Aged and Infirmed Facility and well as emergency services from the North Mississippi Medical Center, both located together in the community of Hamilton, Alabama, as well as Shoals Crisis Center and Shoals Medical Hospital for forensice examinations. Auditor note for future training reference: The National Institute of Corrections developed a new online course with the goal of assisting agencies in meeting the requirements of the PREA standard. The course, Investigating Sexual Abuse in a Confinement Setting: "Advanced" Investigations, provides case studies that allow investigators to apply and practice their investigative skills to conduct appropriate investigations in accordance with PREA standards. The agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Administrative Regulation Number 306: Contraband and Evidence Management
- Alabama Department of Corrections Administrative Regulation Number 454-B: Prison Rape Elimination Act Investigation Checklist.
- Alabama Department of Corrections Administrative Regulation Number 302: Incident Reporting.
- Alabama Department of Corrections Administrative Regulation Number 327: Use of Force.
- Hamilton Work Release Center Standard Operating Procedure 454-1 dated February 5, 2016.
- Hamilton Aged and Infirmed Facility Medical Services, Lighthouse Counseling Center, North Mississippi Medical Center.
- National Institute of Corrections investigations course certificate completions and continuing education credits.
- A National Protocol for Sexual Assault Medical Forensic Examinations.
- Memorandum of Understanding between STAR and Correctional Medical Services, Inc.
- Rape Crisis Centers listing, Shoals Crisis Center and Shoals Medical Hospital.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

P-2 Evidence Protocol/Investigations/Medical

Process Indicators:

PI-1 Victim Advocacy MOU

PI-2 Specialized Training Records for Investigators

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

Auditor comments: The auditor interviewed the Associate Commissioner of Operations and he confirmed that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. The agency and facility refers all criminal investigations to the Alabama Department of Corrections Investigations and Intelligence Division and conducts administrative investigations at the facility level. The agency has a team of approximately 19-20 headquarters level staff investigators.

Per Alabama Code of Laws 13A-6-66 and 13A-6-67: Unlawful sexual relations with a person of the same or opposite sex, done forcibly and/or against the person's will or done with a person incapable of consenting as a result of being drugged, drunk, unconscious, mentally abnormal, physically helpless, or legally incapable of giving consent (13A-6-63/64/65 addresses sexual misconduct and sodomy). Alabama Code Section 14-11-31: "It shall be unlawful for any employee to engage in sexual conduct with a person who is in the custody of the Department of Corrections".

Per agency regulation 454, dated January 4, 2016, "The Investigations and Intelligence Director shall be responsible for: Ensuring that all allegations of sexual abuse and harassment are thoroughly investigated; Referring violations of law to the district attorney for prosecution; Reporting statistical data for Prison Rape Elimination Act related incidents; Conducting a criminal background records check, to include a review of any ongoing investigations, on anyone considered for promotion, hire or rehire; Informing the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded; and Informing the inmate of the following information when an inmate alleges that an employee/staff member committed sexual abuse against the inmate:

- 1. The employee/staff is no longer with the agency.
- 2. The employee/staff is no longer employed at the institution.
- 3. The employee/staff has been indicted on a charge related to the sexual abuse.
- 4. The employee/staff has been convicted on a charge related to sexual abuse.
- 5. The notification shall be documented."

Agency website information:

- 1. Go to www.doc.alabama.gov.
- 2. Click on "Contact ADOC" dropdown tab.
- 3. Click on "Contact Investigations".

The auditor reviewed the agency and facility regulations, policies and procedures (regulation 454 and 300); observed agency practices; reviewed data provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor confirmed the agency and facility investigators completion of specialized investigative training from the National Institute of Corrections. The agency and facility meets the standard for the relevant review period.

State Law, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Code of Laws 13 A-6-63/64/65/66/67 and Alabama Code Section 14-11-31.
- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- National Institute of Corrections investigations course certificate completions and continuing education credits.

- Alabama Department of Corrections Administrative Regulation Number 300: Investigations and Intelligence Division dated August 11, 2004.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Administrative or Criminal Investigation/Refer to Investigations
- PI-2 Website Publication
- PI-3 Referrals to Investigations/Incident Reports

Standard 115.31 Employee training

\boxtimes	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility performs Prison Rape Elimination Act pre-service and in-service training. Specifically, per agency regulation 454, employee instruction shall be accomplished during initial training, annual in-service training, specialized training, and additional training, as needed. Employee training shall be documented to denote employee understanding of material and verified through employee signature and refresher training shall be accomplished at least every two years. The agency trains all employees who have contact with inmates on the following:

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

Specifically, the Hamilton Work Release Center has a policy and procedure (454-1) detailing employee education and training in reference to the prevention, detection, response, and reporting of inmate sexual offenses, sexual harassment, and custodial sexual misconduct. The documentation of training is kept at a regional training center for confirmation of compliance.

The Alabama Department of Corrections has made great strides in conforming to both spirit and letter of the law. The agency Training Division and Investigations & Intelligence Division has been working and training together to proactively implement policies and procedures for the detection, elimination and prosecution of rape, sexual assault and all other forms of prisoner abuse. The following is a brief summary of PREA related training events the ADOC has participated in or conducted as of August 14, 2009:

- Calendar year 2003 all ADOC employees received a block on instruction on Professional Employee Conduct with Offenders (Staff Sexual Misconduct).
- March 2003 Wendy Williams [Director of Training], John Jacobs [Director of Research], and Roy Hightower [Regional Coordinator] attended the NIC Program, "Addressing Staff Sexual Misconduct with Inmates," in Washington DC at American University.
- November 2003 all executive leadership of the ADOC attended a 2-day workshop on Staff Sexual Misconduct and PREA, provided thru technical support from NIC.
- Calendar Year 2004 All ADOC staff and volunteers attended a one hour PREA orientation class conducted by the Training Division.
- March 2004 Investigations & Intelligence representatives attended a 36-hour National Institute of Corrections (NIC) PREA Training Program in Washington DC.
- Calendar Year 2005 all ADOC employees attended a block of instruction on Undue Familiarity with Offenders (Staff Sexual Misconduct / PREA).
- 2005 Investigations & Intelligence representatives attended a PREA Regional Meeting in New Orleans, LA to prepare for our implementation of PREA procedures and policies.
- November 8-10, 2005 Commissioners, Wardens, and Directors attended a two Day Seminar for Executive Leadership Technical assistance on PREA provided by National Institute of Corrections (NIC) in conjunction with the Moss Group
- 2006– Investigations & Intelligence representatives attended a PREA Regional Meeting in Austin, TX to prepare for our implementation of PREA procedures and policies.
- 2006 Investigations & Intelligence representatives attended a PREA Regional Meeting in Albany, NY to prepare for our implementation of PREA procedures and policies.
- January through April 2006 A two hour seminar on PREA was provided to all LE Staff, Support staff, Contract staff and vendors, Additional training was provided to the Alabama Department of Public Health at sites throughout the state
- October 2006 Training Director and Deputy Director attended a Training for Trainers presented by the National Institute of Corrections (NIC) in Portland OR in conjunction with the Moss Group.
- March 1st, 2007 Nine (9) Regional PREA Coordinators were appointed to coordinate regional response teams who respond to PREA related incident.
- March 19 23, 2007 Regional PREA Coordinators attended a 36-hour "Training for the Trainer" with resources provided by the National Institute of Corrections (NIC) in conjunction with the Moss Group.
- May 21 & 22, 2007 Investigations & Intelligence Division Director, Training Division Director, Investigators and PREA Coordinators attended a 24-hour joint training conducted by the Moss Group focusing on Sexual Assault Investigation within Prison Settings.
- Calendar Year 2007 A six hour block of PREA/Staff Custodial Sexual Misconduct Training was conducted for all LE Staff and all Support Staff. This training was conducted as part of annual In-Service Training.
- April 2007 PREA Female Offender Education classes began at Julia Tutwiler Prison for Women and the Birmingham Community Work Center.
- May 2007 PREA Male Offender Education classes began at Limestone Correctional Facility.
- June 2007 PREA Offender Education was conducted for ADOC inmates incarcerated in a contracted Louisiana facility
- May 13 16, 2008 Regional PREA Coordinators attended a 40-hour week long "Training for the Trainer" conducted by members of the ADOC Training Division with resources provided by the National Institute of Corrections (NIC) and the Moss Group

- November 2008 PREA Offender Education was completed for all ADOC facilities located throughout the state
- January through December 2009 A two hour PREA Update Seminar is being conducted for all ADOC LE Officers and all Support/Contract Staff. Also during this same period, a two hour PREA Supervisor Training Seminar is being conducted for all ADOC LE Supervisors and all Support/Contract Supervisors. This training is conducted as part of 2009 annual In-Service Training.
- July 13 16, 2009 Regional PREA Coordinators attended a 40-hour week long "Training for the Trainer" conducted by members of the ADOC Training Division with resources provided by the National Institute of Corrections (NIC) and the Moss Group
- January through December 2010 A two hour PREA Update Seminar was conducted for all ADOC LE Officers and all Support/Contract Staff. Also during that same period, a two hour PREA Supervisor Training Seminar was conducted for all ADOC LE Supervisor. This training was conducted as part of 2010 In-Service Training.
- Calendar Year 2011 Implemented a PREA Dashboard within the ADOC computer system which consisted of training through out the year.
- February 15-17, 2012 Regional PREA Coordinators begin Training and Development Classes offered at the University of Alabama. These classes will take place periodically through out the year of 2012.

In March 2014, the Alabama Department of Corrections partnered with The Moss Group, a consulting group with over 25 years of experience working with correctional management issues, to aid the agency in complying with the Prison Rape Elimination Act standards. The Moss Group assisted the agency with staffing and safety assessments, policy review and development, technical assistance and training on internal investigations and other issues affecting facilities, staff, and inmate safety.

The auditor reviewed the agency and facility regulations, policies, and procedures (regulation 454 and facility policy 454-1) along with secondary documentation (practice) submitted with the pre-audit questionnaire; observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor received copies of specific lesson plans and staff signed training events. The auditor received confirmation that the agency Prison Rape Elimination Act Director/Coordinator conducted a site visit of the facility on February 7, 2017 and provided a written assessment and report which included a new training iniative called Prison Rape Elimination Act Information Boards. The auditor commended the facility and agency for the creation of such a unique training opportunity which show cases the standards. The auditor determination is that the agency and facility exceeds the standard for this rating period. The auditor justification is based on the robust training program.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Work Release Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Staff In-service Training Curriculum and Test.
- Prison Rape Elimination Act pamphlet.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Prison Rape Elimination Act Information Boards training initiative.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Training Curricula
- PI-2 What Staff Should Know About Sexual Misconduct with Inmates Pamphlet
- PI-3 Annual Training Records
- PI-4 PREA Test

Standard 115.32 Volunteer and contractor training

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

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

Auditor comments: The auditor stressed the importance of volunteer and contractor training with the Hamilton Work Release Prison Rape Elimination Act compliance manager and captain during the on-site visit phase of the audit process. The auditor interviewed both volunteer and contractor staff assigned to the facility and confirmed receipt and understanding of specific Prison Rape Elimination Act training requirements. The auditor was impressed with the facility contract staff. The Hamilton Work Release provided the auditor with copies of signed volunteer and contractor Prison Rape Elimination Act and LGBTI training acknowledgement sheets from August, October, and November 2016.

Specifically, per agency regulation 454, dated January 4, 2016, "The Institutional Prison Rape Elimination Act Compliance Manager shall be responsible for: Ensuring all volunteers and contractors at their facility have been trained. Employees, contractors, and volunteers are responsible for adherence to agency policies and procedures relating to inmate sexual abuse, sexual harassment, and custodial sexual misconduct. This includes a continuing affirmative duty to disclose any such misconduct."

Specifically, the lesson plan for the contractor and volunteer training consists of the following introductory material, "This module is designed for newly-employed and existing staff, contract staff, vendors and volunteers of the Alabama Department of Corrections (ADOC) and serves as an introduction to the Prison Rape Elimination Act (PREA) standards and how they apply throughout the department. Course includes information on the federal Prison Rape Elimination Act Guidelines; a definition of PREA; its applicability to all ADOC staff; and definitions of offender sexual abuse. This program will cover details of the Prison Rape Elimination Act (PREA), ADOC policy regarding inmate-on-inmate sexual assault, and employee-on-inmate sexual relations. Alabama law pertaining to sexual assault will be explained and discussed, as well as methods of detecting, reducing, and ultimately preventing sexual assault and coercive sexual behavior in ADOC correctional facilities."

The following references are used in the contractor and volunteer lesson plan training material:

- 1. Prison Rape Elimination Act (PREA) of 2003
- 2. Code of Alabama, Title 14, Criminal Correctional and Detention Facilities. Chapter 11, Offenses Concerning Prisoners and Prisons. Article 2 Custodial Sexual Misconduct; Codes §14-11-30, §14-11-31, §14-11-32.
- 3. Code of Alabama, Title 13A, Criminal Code. Chapter 5, Punishments and Sentences. Article 1 Sentences of Imprisonment for Felonies; Code §13A-5-6, §13A-6-61, §13A-6-62, §13A-6-63, §13A-6-65, §13A-6-65, §13A-6-66.
- 4. National PREA Resource Center: "The National PREA Standards: Implications for Human Resource Practices in Correctional Settings" http://www.prearesourcecenter.org/ sites/default/files/library/humanresources webinar-final.pdf)
- 5. Department of Justice 28 CFR, Part 115

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454); observed agency and facility practices; reviewed data and documentation provided by the facility staff; and interviewed volunteers and contractors during an on-site visit and tour of the facility. The agency and facility meets the standard for this relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Contractor and Volunteer Training Curriculum and signed acknowledgement forms.

- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Contractors/Volunteers.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 MOU with Contractors
- PI-2 Contractor Training Records
- PI-3 Volunteer Training Records
- PI-4 Training Curricula

Standard 115.33 Inmate education

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The audito received a hard copy of the Hamilton Work Release Inmate Handbook during the on-site visit phase of the audit process. The Hamilton Work Release Center reports that 277 inmates have been admitted in the past 12 months and all have been provided comprehensive information within 30 days of intake. Prison Rape Elimination Act inmate education options were duplicative to include but not limited to postings on walls throughout the facility, brochures, handbook, pamphlet, and videos. During the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Each inmate receives additional written information in the form of an inmate handbook. The agency and facility provides a comprehensive education to inmates regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.

The Prison Rape Elimination Act compliance staff utilizes multiple training options. Various forms of training materials are also available in Spanish to include posters and pamphlets. The auditor confirmed Prison Rape Elimination Act related education and training within a very short period of arrival time. The auditor also interviewed intake staff.

Specifically, the facility policy and procedures (454-1) details inmate education and training in reference to written and verbal general intake information that explains the agency's zero tolerance policy regarding sexual abuse and harassment. The documentation of training is kept by the facility Prison Rape Elimination Act compliance manager for confirmation of compliance. Per agency regulation 454, upon completion of an inmate's Prison Rape Elimination Act orientation, the inmate shall sign an inmate awareness acknowledgement form.

Specifically (AR 454 dated January 4, 2016), "1. All inmates shall: a. Be given verbal and written, understandable information explaining the ADOC's zero tolerance PREA policy including how to report sexual abuse and harassment upon their initial intake into an ADOC institution; b. Receive a comprehensive educational orientation by an IPCM on the ADOC's zero tolerance PREA policy and how to report sexual abuse and harassment within 30 days of their arrival into an ADOC institution; c. Be provided, by the IPCM, accessible education formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service; and d. Be given verbal, visual, and written information regarding PREA during orientation upon their transfer to any ADOC institution. 2. Inmate PREA educational information shall include: a. Prevention of sexual abuse and harassment; b. Self-protection; c. Methods of reporting; and d. Treatment and counseling availability. 3. Upon completion of an inmate's PREA orientation, the

inmate shall sign ADOC Form 454-A, Inmate Awareness Acknowledgement. a. If the inmate refuses to sign, the witness shall indicate by writing 'Refused to Sign' and affix his / her signature. b. The completed ADOC Form 454-A shall be scanned into the inmate's records. c. The original of the ADOC Form 454-A shall be forwarded to the IPCM for entry into the PREA module'.

The interviews of inmates reflected that they were aware of and understood the Prison Rape Elimination Act protections and the agency's zero tolerance policy. The auditor also received inmate signed acknowledgement forms confirming the training. Inmates receive written material at intake that provides detailed information about Prison Rape Elimination Act protections and the multiple ways to report sexual abuse or harassment. The auditor reviewed the agency regulation and facility policies and procedures (regulation 454); observed facility practices; reviewed data and documentation provided by the facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meets the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Administrative Regulation Form 454-A: Inmate Awareness Acknowledgement.
- Hamilton Work Release Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Inmate Training Curriculum and signed acknowledgement forms.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and Facility Inmates.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Inmate Orientation on Sexual Assault
- PI-2 Inmate Handbook
- PI-3 Inmate Receipt of PREA/Acknowledgement
- PI-4 What You Should Know About Sexual Abuse and Assault Pamphlet
- PI-5 Access to Interpreters MOU
- PI-6 Posters and other Visual Aides/Spanish/Low Vision Reading Materials

Standard 115.34 Specialized training: Investigations

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

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

Auditor comments: The agency level investigators do a good job conducting facility level investigations. The agency maintains approximately 20 to 21 headquarters level investigators. The auditor confirmed that they received specialized training in accordance with the standard. Specifically, the investigative staff completed the National Institute of Corrections investigator training, "Prison Rape Elimination Act: Investigating Sexual Abuse in a Confinement Setting", which fully complies with the standard. Any cases that involve criminal investigations are referred to the Alabama Department of Corrections Investigation and Intelligence Division. Specialized training included such things as techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or

prosecution referral. The agency and facility training is in accordance with the Prison Rape Elimination Act standard.

Specifically, per agency regulation 454, "Specialized Training - Investigations. Investigators and other ADOC employees with PREA related responsibilities shall receive additional training related to their roles to include, but not limited to: interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, conducting sexual abuse investigations and the collection of evidence in a confinement setting, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral. Training shall be documented and verified through employee signature and forwarded to the Training Director for retention".

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and facility policy 454-1); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The National Institute of Corrections developed a new online course with the goal of assisting agencies in meeting the requirements of PREA standard. The course, Investigating Sexual Abuse in a Confinement Setting: "Advanced" Investigations, provides case studies that allow investigators to apply and practice their investigative skills to conduct appropriate investigations in accordance with PREA standards.

The agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- National Institute of Corrections training certificates for all agency investigators and other training credentials.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Specialized Training Curriculum

PI-2 Training Records for Investigators

Standard 115.35 Specialized training: Medical and mental health care

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

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

Auditor comments: The Hamilton Work Release Center benefits from the medical and mental health care offered in coordination with the Hamilton Aged and Infirmed Facility located within the community of Hamilton, Alabama. The auditor noted that the agency and facility has a written agreement between The Lighthouse Counseling Center "Standing Together Against Rape" (STAR) Program and Correctional Medical Services for inmate medical and mental health assistance in reference to sexual abuse and sexual harassment. The auditor verified specialized training completion for the facility medical and mental health care staff. The auditor interviewed the medical and mental health staff and was thoroughly impressed with her knowledge and expertise. The medical and mental health staff interviewed was knowledgeable in reference to the Prison Rape Elimination Act training. The agency and facility ensures that all full, part-time, and contract medical and mental health care practitioners who work regularly with inmates have been trained in:

- 1) How to detect and assess signs of sexual abuse and sexual harassment;
- 2) How to preserve physical evidence of sexual abuse;
- 3) How to respond effectively and professionally to victims of sexual abuse/harassment;
- 4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment;
- 5) Recognize the special medical and mental health needs of all inmates;
- 6) Factors to consider in an inmates' risk of sexual victimization; and
- 7) Training shall be documented to denote employee understanding of material and verified through employee signature.

Specifically, the facility standard operating policy and procedures (454-1) details specialized medical staff training. The documentation of training is kept at the regional training center for confirmation of compliance. Specifically, the facility standard operating policy and procedures (454-1) details specialized medical staff training. The documentation of training is kept at the regional training center for confirmation of compliance. The auditor received training rosters completed in September 2016 on LGBTI training along with specialty training such as, "PREA Sensitivity Training:

- . Acute Care & Assessment with Victims of Sexual Assault
- . Overview of PREA and the National Prison Rape Elimination Commission
- . Review PREA Standards . Crisis Intervention
- . Impact of Victimizatjon
- . Assessment of Impact .
- . Gender Differences
- . Treatment Interventions- Brief Overview"

The auditor reviewed the agency regulatoin and facility policies and procedures (regulation 454 and facility policy 454-1); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Work Release Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Medical and Mental Health Staff Training documentation with signatures.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, Nurse, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Training Records of Medical and Mental Health Practitioners
- PI-2 Specialized Training Curricula
- PI-3 Rape Crisis Centers/SANE Centers MOU

Standard 115.41 Screening for risk of victimization and abusiveness

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

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

Auditor comments: The auditor interviewed the agency Prison Rape Elimination Act Coordinator, and she confirmed having a secure computer-based system for inmate's risk assessments. The auditor completed a required webinar in April 2016 from the Prison Rape Elimination Act Resource Center in reference to the inmate intake process. Based on interviews with random inmates and intake staff, all inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Intake screening shall ordinarily take place within 72 hours of arrival and more often is completed within 24 to 48 hours of arrival. Such assessments shall be conducted using an objective screening instrument. The intake screening shall consider, at a minimum, the following criteria to assess inmate for risk of sexual victimization:

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

Any other specific information about individual inmates that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other inmates.

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. An inmate's risk level is reassessed from the inmate's arrival when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

The agency and facility implements appropriate controls on the dissemination within the agency of responses to questions asked pursuant to this standard or order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Only limited staff has access to the risk screening form (Alabama Department of Corrections Form 454-C) through a controlled access program. The auditor interviewed the facility staff responsible for inmate intake screening. The intake staff acknowledged the importance of the inmate intake screening process. The facility staff understood the process as well as the Prison Rape Elimination Act standard.

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and intake screening instrument Form 454-C); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Risk Factor Checklist Form 454-C and "Vault Procedures" for controlled access.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Intake Risk Assessment Checklist
- PI-2 Risk Reassessment Checklist
- PI-3 Explanation of Vault Procedures

Standard 115.42 Use of screening information

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

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

Auditor comments: The auditor recentlycompleted a required webinar in April 2016 from the Prison Rape Elimination Act Resource Center in reference to Standard 115.42. The auditor confirmed that agency regulation (454) specifically states, "A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration". The auditor observed and reviewed the agency's and facilities risk-based housing unit placement decisions and screening form. The agency and facility uses information from the risk screening to inform housing, cell, bed, work, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

Specifically, per agency regulation 454, dated January 4, 2016, "All information obtained during the screening process and Prison Rape Elimination Act Mental Health Assessment shall be used to assit in the initial classification and institutional assignment of the inmate as well as determine work, education, and programs, in accordance with the agency Classification Manual, regulation 433, Administrative Segregation and Housing for Close or Maximum Custody, and regulation 435, Protective Custody, with the goal of keeping separate those inmates at high-risk of being sexually victimized from those at high-risk of being sexually abusive."

The auditor reviewed the agency regulation and facility policies and procedures (agency regulation 454, 433, and 435, and facility policy 454-01.3); observed agency and facility practices; reviewed data and documentation provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Hamilton Work Release Center Policy Number 454-01.3: PREA Housing Assignment.
- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016; along with Regulation Number 433 and 435.
- Risk Factor Checklist Form 454-C and Housing Unit Placement documentation.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

- P-1 AR 454
- P-2 Housing Designation SOP

Process Indicators:

- PI-1 Housing Designation Spreadsheet
- PI-2 Intake Risk Assessment Checklist
- PI-3 Risk Reassessment Checklist

Standard 115.43 Protective custody

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

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

Auditor comments: The agency regulation (454 and Form 454-H: Post Allegation Protective Custody) mirrors the standard in that inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternatives available.

Per agency regulation 454, "Protective Custody: Inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternatives available (Form 454-H: Prison Rape Elimination Act Protective Custody)."

The Hamilton Work Release Center reports that it does not have a segregation unit or even a holding cell. It does have the option of utilizing a holding cell at the Hamilton Aged and Infirmed Facility located within the vinicity of the Hamilton Work Release Center. Any form of protective custody would consist among other alternatives to include the transfer of the inmate to another facility if necessary. The agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Risk Factor Checklist Form 454-H and Post Allegation Protective Custody.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

P-2 Memo from Warden

Process Indicators:

PI-1 Housing Unit Placement Form

PI-2 Segregation Log/Holding Cell/Crisis Cell

Standard 115.51 Inmate reporting

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

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

Auditor comments: The auditor tested the Hamilton Work Release Center inmate phone system on June 5, 2016, during the on-site visit phase of the audit process. The agency and facility has multiple ways for inmate reporting of sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. The auditor tested the inmate phone system to confirm agency and facility access for inmate reports of sexual abuse and sexual harassment to agency and facility officials. The auditor contacted the local rape crisis center, Shoals Crisis Center (256) 767-1100 of Florence, Alabama; Lighthouse Counseling Center in Montgomery; Lifelines Counseling Services 24 hour hotline at (251) 473-7273, Alabama Department of Economic and Community Affairs (ADECA), and Alabama Coalition Against Rape at (334) 264-0123., and they confirmed no calls were received from inmates within the last year. These are considered outside the agency organizations. The auditor also contacted Just Detention International, which is a national advocacy organization, and they stated that they have not fielded any calls or contacts related to the facility. The auditor interviewed inmates and they were well informed concerning the inmate reporting process for anything related to the Prison Rape Elimination Act. The facility reported having no male inmate grievances. The inmates can report to any facility staff member, Prison Rape Elimination Act compliance manager assigned to the facility, call the hotline number, or submit a report in the facility's Prison Rape Elimination Act drop box which is a secured receptacle located at each facility.

The agency has an internal reporting process written in the inmate handbook and self-address envelopes for the Alabama Department of Correction Investigations and Intelligence Division. The inmates are told to call on the inmate phone system which is recorded or correspond via mail to the Director, Investigations and Intelligence Division, P.O. Box 301501, Montgomery, Alabama 36130. The auditor reviewed the Alabama state law, agency regulation and facility policies and procedures (Alabama Code of Laws 14-11-30 through 14-11-32, Agency regulation 454, 318, and Inmate Handbook); observed agency and facility practices; reviewed data and documentation provided by the facility staff; interviewed outside organizations; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meets the standard.

Alabama State Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Code of Laws 14-11-30 through 14-11-32.
- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Inmate Handbook.
- Alabama Department of Corrections Hotline Number and written address to investigations.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Grievance Procedures

PI-2 Third Party Reporting MOU

PI-3 Alabama Hotline (ACAR & #66)

PI-4 I & I Envelopes

Standard 115.52 Exhaustion of administrative remedies

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the
relevant review period)

□ Does Not Meet Standard (requires corrective action)

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

 $\Box X$ Not Applicable

Auditor comments: An agency shall be exempt from this Prison Rape Elimination Act standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. The facility reported that it does not have an inmate grievance policy.

The auditor reviewed the agency regulation and facility policies and procedures (454); observed agency and facility practices; reviewed data provided by the agency and facility staff; reviewed the inmate handbook; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor requested and received a copy of the inmate handbook to confirm compliance with the standard. The agency and facility meets the standard for the relevant rating period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Hotline Number and written address to investigations.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Hamilton Work Release Center Memorandum from the Warden.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Standard 115.53 Inmate access to outside confidential support services

\boxtimes	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility has a documented memorandum of agreement with the Alabama Department of Economic and Community Affairs (ADECA) which is a third party public entity. The agency and facility also has a documented memorandum of agreement between Standing Together Against Rape (STAR) and the Correctional Medical Services (CMS). The Alabama Coalition Against Rape, (334) 264-0123 is the rape crisis outside agencies. The agency has a memorandum of agreement with an outside the agency victim advocacy service at 1-800-639-4357. The agency also maintains informational posters and hotline number access for inmates. The posters and other information is varied as well as Spanish versions for inmate accessibility. The auditor was provided with memorandum of agreements with outside agencies as well as contact information to the agencies.

The Hamilton Work Release Center benefits from outside emergency services from the Shoals Crisis Center of Florence, Alabama and the

North Mississippi Medical Center located in Hamilton, Alabama, if needed. The Shoals Crisis Center and Shoals Medical Hospital is also available if needed.

Auditor note: The National Center for Victims of Crime recently initiated and launched the Victim Connect Resource Center which is a resource for victims, to include but not limited to, providing critical, confidential assistance through phone, text, and chat along with interpreter services in over 200 languages. These services can be accessed at 1-855-4VICTIM or www.chat.victimconnect.org. The antisexual assault organization, RAINN, operates a national hotline at 1-800-656-4673 with access to a range of free services.

The auditor reviewed the agency regulation and facility policies and procedures (454 and Form MH -008: Referral to Mental Health), observed agency and facility practices, reviewed data provided by the agency and facility staff, interviewed outside agencies, and interviewed inmates and staff during an on-site visit and tour of the facility. Posters are also in Spanish. Based on the listed and provided information, the auditor determination is that the agency and facility exceeds the standard for the relevant review period based in part on the creative and varied informative posters and various outside the agency support services.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Work Release Center Standard Operating Procedure Number 454-1 dated February 5, 2016.
- Form MH 008: Referral to Mental Health.
- Memorandum of Agreement: Department of Corrections and ADECA, STAR, CMS, and Alabama Coalition Against Rape.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 MOU with Rape Crisis Centers/SANE Centers
- PI-2 Examples of Posters
- PI-3 Alabama Advocacy Hotline
- PI-4 Advocacy/Outside Confidential Support Services MOUs
- PI-5 Advocacy Centers Contact Information

Standard 115.54 Third-party reporting

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

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

Auditor comments: The auditor tested the Hamilton Work Release Center inmate phone system, during the on-site visit phase of the audit process. The inmate phones are located outside of the main entry building with easy access to the inmates. The inmates press #66 on the phone system to reach the Prison Rape Elimination Act reporting line for third-party reporting. The auditor confirmed that the agency and facility has regulations, policies, and procedures, specifically agency regulation 454, that third-party reports will be accepted. The agency offers opportunities for third-party reporting on the agency website located at www.doc.alabama.gov. The reporting form on the website can also be submitted anonymously. The auditor verified through staff interviews that they are aware of and concur with reporting requirements

in accordance

with the agency regulation and Prison Rape Elimination Act standard.

The agency and facility also has a documented memorandum of agreement between Standing Together Against Rape (STAR) and the Correctional Medical Services (CMS). The Alabama Coalition Against Rape, (334) 264-0123 is the rape crisis outside agencies. The facility has additional emergency services access to the Shoals Crisis Center of Florence, Alabama or North Mississippi Medical Center of Hamilton, if needed.

Auditor note: The National Center for Victims of Crime recently initiated and launched the Victim Connect Resource Center which is a resource for victims, to include but not limited to, providing critical, confidential assistance through phone, text, and chat along with interpreter services in over 200 languages. These services can be accessed at 1-855-4VICTIM or www.chat.victimconnect.org. The antisexual assault organization, RAINN, operates a national hotline at 1-800-656-4673 with access to a range of free services.

The auditor reviewed the agency regulation and facility policies and procedures; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4 2016
- Facility Standard Operating Procedure Number 454-1 dated February 5, 2016.
- Alabama Department of Corrections website www.doc.alabama.gov.
- Alabama ADECA, STAR, CMS and Alabama Coalition Against Rape.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Website Publication
- PI-2 Alabama PREA Third Party Reporting Form
- PI-3 #66 PREA Third Party Reporting Hotline

Standard 115.61 Staff and agency reporting duties

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
П	Does Not Meet Standard (requires corrective action)

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

Auditor comments: Based on a review of agency regulation and facility policy, procedure, and practice along with staff interviews, the agency requires all staff to report "immediately" and according to agency regulation any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in any facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or

retaliation.

Other than reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency regulation, to make treatment, investigation, and other security and management decisions. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse, and inform inmates of the practitioner's duty to report, and the limits of confidentiality, at the initiation of services. The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the agency's designated investigators.

If the alleged victim is a vulnerable adult under a State or local vulnerable person's statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. Alabama Code of Law 38-9-8 is the mandatory reporting law for vulnerable adults. The Alabama Adult Protective Services Adult Abuse Hotline is 1-800-458-7214.

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454) along with Alabama Code of Law 38-9-8; observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Code of Law 38-9-8: Vulnerable Adult Protections and Mandatory Reporting.
- Alabama ADECA, STAR, CMS and/or Shoals Crisis Center if needed.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

- P-1 AR 454
- P-2 Mandatory Reporting Law

Process Indicators:

- PI-1 Incident Reports
- PI-2 Consent to Treatment
- PI-3 Refusal to Treatment

Standard 115.62 Agency protection duties

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

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

Auditor comments: The auditor confirmed through agency regulation and facility policies and procedures along with staff and inmate interviews that they will act immediately to any and all inmates in imminent danger or substantial risk of sexual abuse. When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The facility reported to the auditor of no inmates determined to be at risk of imminent sexual abuse within the past 12 months. The Hamilton

Work Release Center will transfer an inmate to the Hamilton Aged and Infirmed Facility, located within the same Hamilton community, if needed.

The agency regulation (454 and Form 454-H: Post Allegation Protective Custody) mirrors the standard. The auditor reviewed the agency regulation and facility policies and procedures (regulation 454); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016 and 454-H: Post Allegation Protective Custody.
- Alabama Code of Law 38-9-8: Vulnerable Adult Protections and Mandatory Reporting.
- Alabama ADECA, STAR, CMS and Alabama Coalition Against Rape.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Protective Custody/Voluntary Segregation (only applies to Limestone)
- PI-2 Transfer of Inmate due to Sexual Safety

Standard 115.63 Reporting to other confinement facilities

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

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

Auditor comments: Upon receiving an allegation that a inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The agency and facility document that it has provided such notification. The head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with the Prison Rape Elimination Act standard. The Alabama Department of Corrections regulation and policy mirrors the Prison Rape Elimination Act standard.

Auditor note: The auditor recently attended the Compliance and Accreditation Managers' Association Conference which is a national affiliate of the American Correctional Association, from May 20-23, 2017, in Murfreesboro, Tennessee. The Prison Rape Elimination Act Resource Center and affiliated organizations stressed that a recommended best pactice is that the head of the facility specifically communicate with any other confinement facility head in reference to a report and not delegate the task to other staff. Otherwise, the notification must, at a minimum, be: (1) Made at the direction of the facility head, and (2) Appear to a third party to have orginated with the facility head. For example, the facility head could instruct his or her administrative assistant to send the notification on the facility head's letterhead and with the facility head's signature, or to send the notification from the facility head's email address. By contrast, the facility's PREA Compliance Manager could not send the notification from his or her email address and merely copy the facility head. The intent of the standard is to ensure that the person receiving the report of sexual abuse at the prior facility understands the seriousness and gravity of

the allegation, and that the communication originated at the highest level of the reporting facility For more information about Standard 115.63(a) and who should receive the report of sexual abuse at the prior facility refer to the PREA Resource Center website at www.prearesourcecenter.org.

The auditor noted that the agency has a specific form, Alabama Department of Corrections Form 454-F, dated January 4, 2016, that specifically lists the warden's name and signature block confirming warden-to-warden notification. The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and specifically form 454-F); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Form 454-F: Reporting to other Confinement Facilities.
- Alabama ADECA, STAR, CMS and House of Ruth and Alabama Coalition Against Rape.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Reporting to Other Confinement Facilities Form

Standard 115.64 Staff first responder duties

Ш	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: Based on agency regulation and facility policy and procedures along with agency staff and inmate interviews during the on-site portion of the audit, upon learning of an allegation that a inmate was sexually abused, the first staff member to respond to the report shall: separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

If the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. The auditor reviewed an agency and facility generated check list for first responder use.

Specifically, the facility standard operating policy and procedure (454-1) details first responder duties. Any incident is documented in accordance with agency regulation 302 and incident reporting. Each facility staff member carries a wallet-sized first responder card that

details first responder duties if and when needed. The facility provided the auditor with a staff signed acknowledgement form confirming staff have been informed of first responder duties if and when needed.

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454, facility policy 454-1, and Form 302-A: Incident Report); agency and facility pocket size first responder card (specific reference to security and non-security staff on card); Agency Investigations Mapping protocol; observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Work Release Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016 and Alabama Department of Corrections Regulation Form 302-A: Incident Report.
- Alabama Department of Correction Investigations Mapping template and protocol.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Staff wallet-sized first responder cards detailing first responder duties if and when needed.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 First Responder Checklist Card

PI-2 Investigations Mapping

Standard 115.65 Coordinated response

\boxtimes	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility has a coordinated response to an incident of sexual abuse among staff first responders, medical, and mental health practitioners, investigators, and facility leadership. The auditor reviewed the agency regulations and facility policies and procedures (regulation 454 and 302 and policy 454-01.1).

Specifically, per facility Standard Operating Procedure 454-01.1, Coordinated Response, dated February 5, 2016, "The First Responder shall follow the steps outlined on the First Responder Card which outlines the following: a- Ensure the aggressor does not have firther physical contact with the victim and remain with the victim until the Shift Commander assumes custody. b- Request assistance. c-. Notify the Shift Commander. d- Ensure the crime scene is secure. e- Do not allow the victim or aggressor to bathe, brush teeth, eat, drink, smoke, urinate or defecate. f- Do not share information or reveal evidence to either the victim or aggressor, nor question either party. g- Draft an incident report (302-A). The Shift Commander shall: a- Ensure the crime scene is secured by an officer, if an officer was not the first responder. b- Assume custody of the victim. c- Notify the IPCM. d- Notify the Warden. e- Notify the facility's I&I investigator. f- Ensure evidence is collected according to AR 306. g- Ensure the Duty Officer Report is completed and e-mailed within 4 hours of notification. h-Follow instruction of the IPCM and I&I Investigator. i- Ensure photos are not taken unless requested by the IPCM or I&I Investigator;

unless force was neoessary and in that case follow AR 327-Use of Force. Photos of genitalia are prohibited. j- Ensure the victim is transported to HA&I Health Care Unit for a medica.l evaluation. Note: Medical staff will determine if a Sexual Assault Kit is needed. k- If a sexual assault kit is requested contact the Shoals Crisis Center (Office) or (24 Horne Crisis Line), advising the need for a SANE and completion of a sexual assault kit The counselor will direct you to a location in which to transport the victim to meet with the SANE and counselor. 3. The I&I Investigator shall: a- Investigate all sexual abuse allegations. b- Utilize and complete ADOC form. c- Refer cases for criminal prosecution when applicable. d- Contact the Warden upon completion of the investigation. e- Ensure the inmate who alleged sexual abuse is provided with the outcome of the investigation. a- Convene a sexual abuse incident review team (composed of Warden, Medical or Mental Health representative, I&I Investigator, IPCM and Shift Comrnander on duty when incident was reported) within 30 days of completion of investigation. b- Ensure the IPCM details notes utilizing the ADOC Form 454-E Sexual Assault Incident Review. c- Implement the recommendations of the committee or provide reason for noncompliance on Form 454-E. d- Submit Form 454E to the IPCM and PREA Director. 5. The Sexual Abuse Incident Review Team shall: a- Discuss and answer all questions outlined on the Sexual Abuse Incident Review - ADOC Form 454-E. b. Submit Form 454-E to the Warden, IPCM and PREA Director."

Per agency regulation 454, "Medical and Mental Health Care: a. Victims of sexual abuse at the facility shall be referred immediately to Medical. Victims shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The IPCM shall also refer an inmate victim immediately to an ADOC mental health professional for further treatment and counseling. A referral shall be made utilizing ADOC Form MH-008, Referral to Mental Health. b. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. c. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with an investigation arising out of the incident. d. Medical and mental health evaluations and treatment shall be offered to all inmates who have been victimized by sexual abuse. e. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary referrals for continued care following their transfer to, or placement in, other facilities, or upon their release from custody. f. Ongoing treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.g. An attempt shall be made to conduct a mental health evaluation of known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment".

The auditor reviewed the agency regulations and facility policies and procedures (regulation 454 and 302 and policy 454-01.1); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor was impressed with the facility coordinated response protocol and determines the facility not only meets the standard but exceeds the standard. Specific justification, the facility has a detailed policy and procedure on a coordinated response. The policy is detailed and easy to follow. Based on the listed information, the agency and facility not only met the standard but exceeds the standard for the revlevant review period. The auditor received and reviewed primary (policy) and secondary (practice) documentation from the facility as confirmation.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Form 302-A: Incident Report.
- Alabama Department of Corrections Investigations Mapping template and protocol..
- Alabama Department of Corrections 454-E: Sexual Abuse Incident Review Form.
- Facility Standard Operating Procedure 454-01.1: Coordinated Response dated February 5, 2016.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections 302-C: Duty Officer Report.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

P-2 Coordinated Response SOP

Process Indicators:

PI-1 First Responder Checklist Card

PI-2 Investigations Mapping

Standar	d 115.	66 Preservation of ability to protect inmates from contact with abusers
		Exceeds Standard (substantially exceeds requirement of standard)
[Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
r r	determ must a ecomr	discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific live actions taken by the facility.
into or ren	newed ar om cont	s: Neither the agency nor any other government entity responsible for collective bargaining on the agency's behalf entered by collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual act with any inmates pending the outcome of an investigation or of a determination of whether and to what extent anted.
The agency and facility has no collective bargaining as verified with the agency during the audit. The staff is fully aware that a violation of policy may more than likely result in termination. The auditor reviewed the agency regulation and facility policies and procedures (regulation 454); observed agency and facility practices; reviewed data provided by the agency and facility staff; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meet the standard and complies with the standard for the relevant review period.		
Policy, M	aterials,	Interviews and Other Evidence Reviewed:
	Alabama 4, 2016.	Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January
• A • I	Alabama Alabama nterviev	Department of Corrections Human Resources Department. Department of Correction Investigations Mapping template and protocol. We with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff. Department of Corrections submitted Pre-Audit Questionnaire.
Alabama l	Departn	nent of Corrections Compliance Evidence Provided to Auditor:
Protocols:	:	
P-1 Al	R 454	
Process In	ndicators	
PI-1 Re	efer to H	R for Personnel Records
Standar	d 115.	67 Agency protection against retaliation
		Exceeds Standard (substantially exceeds requirement of standard)
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)

PREA Audit Report

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

corrective actions taken by the facility.

Auditor comments: The facility reported zero incidents of retaliation reported, known or suspected within the past 12 months. The agency and facility protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The agency and facility shall employ multiple protection measures, such as housing unit or facility 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The agency regulation 454 mirrors the written language of the Prison Rape Elimination Act standard.

For at least 90 days following a report of sexual abuse, the agency and facility monitors the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. The Prison Rape Elimination Act compliance manager monitors inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Monitoring continues beyond 90 days, consisting of 30 day continuations, if the initial monitoring indicates a continuing need. Monitoring also includes periodic status checks. Any other individuals who cooperate with an investigation expresses a fear of retaliation, the agency and facility takes appropriate measures to protect that individual against retaliation.

Per agency regulation 454, "Retaliation in any form for the reporting of, or cooperation with, sexual abuse or harassment allegations is strictly prohibited. The Warden and IPCM shall ensure inmates and staff who report sexual abuse, sexual harassment, or cooperate with a sexual abuse investigation are protected from retaliation by other inmates or staff. a. The IPCM will be chiefly responsible for this by monitoring the conduct and treatment of the inmate(s) or staff for at least 90 days after an incident is reported. That time will be extended in 30 day increments if there is a continuing need. b. The monitoring of inmates shall consider any disciplinary reports, housing or program changes and shall include periodic status checks. c. The monitoring of staff shall include negative performance reviews or reassignments. d. All appropriate measures shall be taken to protect any individual who cooperates with an investigation and expresses a fear of retaliation. e. The facility's obligation to monitor may terminate if the facility determines the allegation is unfounded. ADOC Form 454-D, Sexual Abuse/Harassment Retaliation Monitoring, shall be utilized for monitoring of staff and inmates".

The Prison Rape Elimination Act coordinator and compliance manager confirmed no incidents of retaliation during the past 12 month period from the date of the audit. The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and form 454-D: Sexual Abuse/Harassment Retaliation Monitoring); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period. Agencies must establish a policy for the protection of inmates and staff who report sexual abuse or sexual harassment, or cooperate with investigations of sexual abuse or sexual harassment. The policy shall designate staff members or departments within the agency that are responsible with monitoring any retaliation. Agencies must utilize multiple strategies to inhibit and prevent retaliation. The agency and facility meet the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016
- Alabama Department of Corrections Form 454-D: Sexual Abuse/Harassment Retaliation Monitoring.
- Alabama Department of Correction Investigations Mapping template and protocol.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Housing Unit Placement Form
- PI-2 Housing Designation Spreadsheet
- PI-3 Retaliation Form
- PI-4 Transfers of Inmates due to Sexual Safety

Standard 115.68 Post-allegation protective custody

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility has a protective custody policy and procedure. The auditor thoroughly reviewed agency regulation and policy (454) and it has several provisions for any form of protective custody in accordance with Prison Rape Elimination Act standard 115.43. Any use of segregated housing to protect a inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of protective custody policy and procedure. The facility compliance manager reported no inmates being placed in involuntary segregation in accordance with protective custody policy during the previous 12 months prior to the audit.

Per agency regulation 454, "Protective Custody: 1. Inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternatives available. (See ADOC Form 454-H, PREA Post Allegation Protective Custody) 2. In cases where segregated housing is the only means to protect such an inmate, the inmate shall have access to all programs, privileges, education and work opportunities, to the extent possible, and it shall only be until an alternative means of separation from likely abusers can be arranged, a time not ordinarily to exceed thirty (30) days. In these cases, the facility shall clearly document:
a. The basis for the facility's concern for the inmate's safety; and b. The reason why no alternative means of separation can be arranged.
3. Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population".

The auditor reviewed the agency regulation and facility policies and procedures (454 and form 454-H: Prison Rape Elimination Act Post Allegation Protective Custody); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Form 454-H: Prison Rape Elimination Act Post Allegation Protective Custody.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Housing Unit Placement Form

PI-2 Housing Designation Spreadsheet

PI-3 Retaliation Form

Standard 115.71 Criminal and administrative agency investigations

	Exceeds Standard	(substantially	exceeds	requirement	of standard)
DEA A				0.0	

Meets Standard (substantial compliance; complies in all material ways with the standard for relevant review period)	the
Does Not Meet Standard (requires corrective action)	

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

Auditor comments: The agency refers all substantiated criminal cases to the local District Attorney's office per agency regulation 454. The Investigations and Intelligence Division has numerous investigators assigned and is responsible for first responder investigative duties and facility administrative type of investigations. The agency Investigations and Intelligence Division is headquartered in Montgomery, Alabama, (334) 353-8916.

Per the standard, when an agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations involving juvenile victims pursuant to Prison Rape Elimination Act Standard 115.334. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and deoxyribonucleic acid (DNA) evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require a inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

The agency investigators are assigned to a division within the Alabama Department of Corrections. The agency has an acknowledgement and training form along with National Institute of Corrections Prison Rape Elimination Act investigator training certificates for staff specifically referencing the required Garrity warning.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal are referred for prosecution. The agency retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454, Form 302, and Form 454-I: Investigative Reports); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Form 454-I: Investigative Reports and 302: Incident Reporting.
- Alabama Department of Correction Investigations Mapping template and protocol.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

- P-1 AR 454
- P-2 Evidence Protocol (Investigations)

Process Indicators:

- PI-1 Investigative Outcome/Disposition
- PI-2 Investigative Review Team Meeting Minutes
- PI-3 Investigation Spreadsheet

Standard 115.72 Evidentiary standard for administrative investigations

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: Per agency regulation 300: The policy of the Alabama Department of Corrections is to conduct all investigations in a fair and impartial manner, maintain confidentiality in all investigations, and protect the constitutional rights of all individuals subject to investigation.

The agency has approximately 19-20 Prison Rape Elimination Act trained investigators assigned as administrative and criminal investigators for the statewide facilities. The agency and facility answered no on the audit questionnaire along with written in agency regulation 454 in reference to if the agency and facility imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

Per agency regulation 454, "Allegations of sexual abuse or sexual harassment will be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The I&I Division shall refer all substantiated criminal cases to the local District Attorney's office and will be available, as requested, to work with those authorities to support criminal prosecution of those cases. Each case shall be carefully evaluated on its merit, considering all evidence and circumstances and whether there is any possibility that the alleged incident could have occurred. Following the I&I investigation into an inmate's allegation that he or she suffered sexual abuse, the I&I Division shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded".

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and 300); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Form 454-I: Investigative Reports and 302: Incident Reporting.
- Alabama Department of Correction Investigations Mapping template and protocol.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Alabama Department of Corrections Regulation Number 300: Investigations and Intelligence Division.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Refer to HR for Administrative Dismissal

Standard 115.73 Reporting to inmates

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

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

Auditor comments: Per agency regulation 454, the Alabama Department of Correction Investigations and Intelligence Division is responsible for reporting back to any inmates in reference to any Prison Rape Elimination Act related incidents. The agency and facility informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Based on the agency's regulation, following an inmate's allegation that a staff member has committed sexual abuse against a inmate, the agency shall subsequently inform the inmate (exception being if the allegation is determined to be unfounded) whenever:

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

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

Specifically, per agency regulation 454, "The I&I Director shall be responsible for:

- 1. Ensuring that all allegations of sexual abuse and harassment are thoroughly investigated.
- 2. Referring violations of law to the district attorney for prosecution.
- 3. Reporting statistical data for PREA related incidents.
- 4. Conducting a criminal background records check, to include a review of any ongoing investigations, on anyone considered for promotion, hire or rehire.
- 5. Informing the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.
- 6. Informing the inmate of the following information when an inmate alleges that an employee/staff member committed sexual abuse against the inmate: 1) the employee/staff is no longer with the ADOC; 2) the employee/staff is no longer employed at the institution; 3) the employee/staff has been indicted on a charge related to the sexual abuse; or 4) the employee/staff has been convicted on a charge related to the sexual abuse. This notification shall be documented".

All such notifications or attempted notifications are documented and retained by the agency. The agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody. Per agency regulation and facility policies and procedures (regulation 454); observed agency and facility practices; reviews of data provided by the agency and facility staff; interviews with outside agencies; and interviews with inmates and staff during an on-site visit and tour of the facility, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Form 454-I: Investigative Reports and 302: Incident Reporting.
- Alabama Department of Correction Investigations Mapping template and protocol.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.
- Alabama Department of Corrections Regulation Number 300: Investigations and Intelligence Division.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Investigative Outcome
- PI-2 Notification of Investigative Outcome
- PI-3 Investigative Review Team Meeting
- PI-4 Investigation Spreadsheet

Standard 115.76 Disciplinary sanctions for staff

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: Per agency regulation 208 and 454, "Employees shall be subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies". Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment are 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.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. Specifically, the facility standard operating policy and procedure (454-1) details discipline for employees to include but not limited to termination for violating agency sexual abuse or sexual harassment policies.

Per agency regulation 454, "ADOC Hiring and Promotion: Departmental policy prohibits the hiring or promotion of an employee or contractor who may have contact with inmates who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; (2) Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph V.A.4.a.(2) above. b. Before hiring a new employee or contractor, the ADOC Personnel Division or designee shall: (1) Conduct a criminal background records check; (2) Make its best efforts to contact all prior institutional employers in regards to substantiated allegations of sexual abuse or any resignation during a period of sexual abuse investigation; (3) Ask potential employees and contractors about previous misconduct described in Paragraph V.A.4.a.above; (refer to AR 216, Background Investigations and ADOC Form 216-B, PREA Compliance; and (4) Apprise potential employees and contractors that false information or material omissions regarding such misconduct shall be grounds for termination and that they have a continuing duty to disclose such conduct. c. For all promotions and rehires, the I & I Director shall conduct a criminal background records check. d. If the employee has engaged in any conduct described in paragraph V.A.4.a. above, they shall be disqualified

for promotion. Employees shall be subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies, as detailed in AR 208, Employee Standards of Conduct and Discipline. e. The ADOC shall consider any incidents of sexual harassment in deciding whether to hire or promote any employee or contractor. f. The ADOC Personnel Director shall conduct a criminal background records check every five (5) years on all current employees and contractors ".

The auditor reviewed the Alabama Code of Laws, agency regulations and facility policies and procedures (Code of Alabama Title 14, 1975, as amended; Title 13A-6-65; Title 14-11-31: Sexual Misconduct; regulation 454; facility policy C-28; and regulation 208: Employee Standards of Conduct and Discipline); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Number 208: Employee Standards of Conduct and Discipline dated August 17, 2005.
- Code of Alabama Title 14, 1975, as amended; Title 13A-6-65; and Title 14-11-31 (sexual misconduct).
- Hamilton Work Release Center Standard Operating Procedure 454-1: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Disciplinary Sanctions for Sexual Misconduct

PI-2 Refer to HR for Letter of Dismissal

Standard 115.77 Corrective action for contractors and volunteers

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

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

Auditor comments: Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Appropriate steps are taken in reference to remedial measures, and consideration made whether to prohibit further contact with inmates, in the case of any other violation of agency and facility sexual abuse or sexual harassment policies by a contractor or volunteer. The agency and facility reported no incidents of sexual abuse by contractors or volunteers within the past 12 months of the audit.

Specifically, the facility standard operating policy and procedure (454-1) details contractor and volunteer corrective action to include but not limited to termination from facility and contact with inmates. Per agency regulation 454, "Once the I&I Investigator completes the investigation, the outcome will be submitted to the Assistant I&I Director. The Assistant I&I Director will submit the case to the appropriate

District Attorney's office, if applicable, for criminal prosecution".

The auditor reviewed the agency regulation and facility policies and procedures (regulation 454 and facility policy 454-1); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility does meet the standard and complies with the standard for the relevant review period.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Number 208: Employee Standards of Conduct and Discipline dated August 17, 2005.
- Code of Alabama Title 14, 1975, as amended; Title 13A-6-65; and Title 14-11-31 (sexual misconduct).
- Hamilton Work Release Center Standard Operating Procedure: Inmate Sexual Abuse and Harassment Awareness.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Training Records

PI-2 Terminate Contact with Inmates Memo

PI-3 Incident Reports

Standard 115.78 Disciplinary sanctions for inmates

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

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

Auditor comments: The auditor reviewed the agency and facility inmate handbook. The rules are clearly listed with definitions along with references to Alabama Code of Laws 13A-6-60 through 13A-6-70 (1975) and 14-11-30 through 14-11-32. Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The disciplinary process considers whether a inmate's mental disabilities or mental illness contributed to their behavior when determining what type of sanction, if any, should be imposed.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. The agency and facility prohibits all sexual activity between inmates and may discipline inmates for such activity. If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to offer the offending inmate participation in such interventions.

Specifically, the facility standard operating policy and procedure (454-1) details inmate disciplinary sanctions in accordance with agency administrative regulation 403 to confirm compliance with the standard.

The auditor reviewed the Alabama Code of Laws, agency regulations, and facility policies and procedures (403, 454 and 318 along with facility policy 454-1); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Number 318 and 403.
- Alabama Code of Laws 13A-6-60 through 13A-6-70 and 14-11-30 through 14-11-32.
- Hamilton Work Release Center Standard Operating Procedure C-28: Inmate Sexual Abuse and Harassment Awareness dated February 5, 2016.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Inmate Disciplinary Hearing Report
- PI-2 Inmate Handbook
- PI-3 Housing Unit Placement Form
- PI-4 Housing Designation Spreadsheet
- PI-5 Referral to Mental Health
- PI-6 Segregation Log

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

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

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

Auditor comments: Per agency regulation 454, 433, and 435 along with Prison Rape Elimination Act standard 115.41, if the medical and mental health screening indicates that a inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, agency staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. If the screening indicates that a inmate has previously perpetrated sexual abuse or sexual victimization, whether it occurred in an institutional setting or in the community, agency and facility staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process.

Alabama Code of Law 26-14-3, outlines mandatory reporting requirements. Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other agency staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, and program assignments, or as otherwise required by Federal, State, or local law. Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

Per agency regulation 454, "The Mental Health Professional shall meet with the inmate and review their screening information. If the screening indicates that the inmate has prior sexual victimization or sexual aggression in their history, the Mental Health Professional shall offer a follow-up meeting with Mental Health within 14 days of the intake screening. All inmates shall be reassessed for risk of sexual victimization and abusiveness within 30 days of intake. In addition, upon receipt of additional information that bears on an inmate's risk of sexual victimization or abusiveness, an additional screening will be conducted. During the time of any of these assessments, the ADOC shall take no formal or informal disciplinary action should an inmate refuse to participate or answer any screening questions. There will be appropriate controls on the dissemination of screening information so as to ensure each inmates' sensitive information is not exploited. PREA Mental Health Assessment: a. Inmates that have been identified as being at risk for potential sexual vulnerability or sexually aggressive behavior shall be referred to mental health staff utilizing ADOC Form 454-C, PREA Risk Factors. b. The mental health professional shall perform the mental health assessment and documented in the Mental Health section of the medical record. The assessment shall include, but not be limited to, a review of the inmate's PREA Risk Factors Checklist and history of sexual victimization or sexually aggressive behavior. Any updates of an inmate's history or risk of sexual aggression or victimization shall be noted by a mental health professional and notification shall be made to the IPCM, Classification Specialist, and Inmate Control Services (ICS). c. Any employee may make a mental health referral, utilizing ADOC Form MH-008, based on his/her observation of the inmate's behavior or at the inmate's request. This referral may be based on the concerns that the inmate has been a victim or is at risk of being a victim or sexual aggressor. d. Identification of sexual aggressors or victims information should be done discreetly".

The auditor interviewed the facility staff, counseling staff, and the inmate intake staff. The auditor reviewed the agency regulation and facility policies and procedures (454, 433, 435); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard.

Alabama Code of Laws, Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Alabama Department of Corrections Regulation Number 433 and 435.
- Alabama Code of Law 26-14-3: Mandatory Reporting.
- Interviews with agency Prison Rape Elimination Act Coordinator, Facility Compliance Manager, and facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Risk Assessment Checklist

PI-2 Risk Reassessment Form

PI-3 Mental Health Referral

PI-4 Medical Referral

Standard 115.82 Access to emergency medical and mental health services

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The Hamilton Work Release Center benefits from be located within close proximity to the Hamilton Aged and Infirmed Facility as well as the North Mississippi Medical Center, Shoals Crisis Center, and Shoals Medical Hospital for forensic examinations. The facility has access to emergency medical and mental health services. Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The auditor reviewed agency regulation 454 to confirm compliance with the standard. The facility utilizes a multidisciplinary team investigation protocol for responding to abuse. The auditor confirmed with receipts of training certificates that the agency investigators completed the National Institute of Corrections investigations course which is a recognized compliance requirement to meet the standard as well as the evidence protocol from the United States Department of Justice, "A National Protocol for Sexual Assault Medical Forensic Examinations", dated April 2013. The local crisis center for the facility is Shoals Crisis Center (256) 767-1100 of Florence, Alabama and STAR (Standing Together Against Rape), 530 South Lawrence Street, Montgomery, Alabama, (334) 213-1227. STAR has a written agreement with Correctional Medical Services, Inc. which is the recognized medical provider for the Alabama Department of Corrections to provide crisis services in accordance with the response protocol. They maintain a 24 hour hotline for an on-call Sexual Assault Nurse Examiner (SANE), (334) 571-0999. The agency has a memorandum of agreement with an outside the agency victim advocacy service, confidential and at no cost to the inmates, at 1-800-639-4357. The facility and agency reported no forensic medical exams conducted during the past 12 months and meets the standard.

Specifically, the Hamilton Work Release Center Standard Operating Procedure (454-1) states, victims shall receive timely access to emergency medical and mental health treatment and crisis intervention services at no cost to the victim. Specifically, per agency regulation 454, "Medical and Mental Health Care: a. Victims of sexual abuse at the facility shall be referred immediately to Medical. Victims shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The IPCM shall also refer an inmate victim immediately to an ADOC mental health professional for further treatment and counseling. A referral shall be made utilizing ADOC Form MH-008, Referral to Mental Health. b. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. c. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with an investigation arising out of the incident".

Auditor note: The National Center for Victims of Crime recently initiated and launched the Victim Connect Resource Center which is a resource for victims, to include but not limited to, providing critical, confidential assistance through phone, text, and chat along with interpreter services in over 200 languages. These services can be accessed at 1-855-4VICTIM or www.chat.victimconnect.org. The antisexual assault organization, RAINN, operates a national hotline at 1-800-656-4673 with access to a range of free services.

The auditor reviewed the agency regulation and facility policies and procedures (454 and Form MH-008: Referral to Mental Health); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The agency and facility meets and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016 and Form MH-008: Referral to Mental Health.
- Hamilton Work Release Standard Operating Procedure 454-1 dated February 5, 2016.
- Hamilton Aged and Infirmed Facility of Hamilton, Alabama and Shoals Crisis Center and Medical Hospital.
- National Institute of Corrections investigations course certificate completions and continuing education credits.
- A National Protocol for Sexual Assault Medical Forensic Examinations.
- Memorandum of Understanding between STAR and Correctional Medical Services, Inc.
- Rape Crisis Centers listing.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Rape Crisis Center/SANE Centers MOU
- PI-2 Refer to SANE Centers/Rape Crisis Centers/ER for Verification of Visit

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

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in the facility. 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. The agency and facility provides such victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Specifically, agency regulation 454 details ongoing medical and mental health care for sexual abuse victims and abusers along with documentation with Form MH-008: Referral to Mental Health to confirm compliance with the standard. Specifically, per agency regulation 454, "Medical and mental health evaluations and treatment shall be offered to all inmates who have been victimized by sexual abuse. e. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary referrals for continued care following their transfer to, or placement in, other facilities, or upon their release from custody. f. Ongoing treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. g. An attempt shall be made to conduct a mental health evaluation of known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment".

The auditor interviewed the facility staff during the on-site portion of the Prison Rape Elimination Act audit. The auditor reviewed the agency and facility policies and procedures (regulation 454, Form MH-008); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016 and Form MH-008: Referral to Mental Health.
- Hamilton Work Release Center Standard Operating Procedure 454-1 dated February 5, 2016.
- Hamilton Aged and Infirmed Facility of Hamilton, Alabama.
- A National Protocol for Sexual Assault Medical Forensic Examinations.
- Memorandum of Agreement between STAR and Correctional Medical Services, Inc.
- Rape Crisis Centers listing.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Rape Crisis Center/SANE Centers MOU
- PI-2 Refer to Rape Crisis Centers/SANE Centers/ER for Medical Information
- PI-3 Referral from Corizon Medical Staff to Transport Inmate to SANE/Rape Crisis Centers

Standard 115.86 Sexual abuse incident reviews

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The agency and facility conducts a sexual abuse incident review, per agency regulation 454, at the conclusion of every sexual abuse investigation, including where the allegation has not be substantiated, unless the allegation has been determined to be unfounded. This review ordinarily occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. The agency and facility review team considers the following:

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

Specifically, per agency regulation 454, "Within thirty (30) days of the conclusion of the I&I investigation, the Warden/ Director shall convene a sexual abuse incident review team to review all substantiated and unsubstantiated PREA allegations. (1) This team shall be composed of the Warden/designee, medical or mental health representative, investigator, supervisor present at time of the allegation, and IPCM. (2) The IPCM shall take detailed meeting minutes to include the agenda, participants, date, name and number of the investigation, type of investigation and findings, and all meeting content, utilizing ADOC Form 454-E, Sexual Abuse Incident Review. (3) The team shall: (a) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (b) Consider whether the incident or allegation was motivated by race, ethnicity, gender identity; LGBTI identification, status, or perceived status or gang affiliation; or was motivated or otherwise caused by other group dynamics; (c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (d) Assess the adequacy of the staffing levels in that area during different shifts; (e) Assess whether monitoring technology would be deployed or augmented to supplement supervision by staff; and (f) Prepare a report of its findings including, but not necessarily limited to, determinations made pursuant to the preceding paragraphs and any recommendations for improvement. Such report shall be submitted to the Warden, IPCM, and PREA Director in a timely manner. (4) The Warden/designee shall implement the recommendations for improvement, or shall document the reasons for not doing so. (5) The Warden/Director, upon completion of the recommended improvement or upon providing the reason the

improvement was not completed, shall submit ADOC Form 454-E, Sexual Abuse Incident Review, to the IPCM and PREA Director in a timely manner ".

Facility staff provided the auditor with secondary documentation confirming compliance with the standard. Specifically, agency form 454-E: Sexual Abuse Incident Review. The auditor reviewed the agency regulation and facility policies and procedures (454 and Form 454-E); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmates and staff during an on-site visit and tour of the facility. The auditor emphasized the importance of reviewing past incidents at the exit briefing during the on-site portion of the audit process for continued process improvements and staff training. Based on the listed information, the agency and facility meets the standard and complies with the standard for the relevant review period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Hamilton Standard Operating Procedure 454-1 dated February 5, 2016.
- Alabama Department of Corrections Form 454-E: Sexual Abuse Incident Review.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

- PI-1 Investigative Review Team Meeting Form
- PI-2 Investigation Spreadsheet

Standard 115.87 Data collection

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

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

Auditor comments: The auditor interviewed the agency Prison Rape Elimination Act Coordinator, and she confirmed the secure process of data collection in order to assess and improve the effectiveness of the agency's sexual abuse prevention, detection, and response policies, and training. The agency and facility is completing the first year audit. The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The agency aggregates the incident-based sexual abuse data at least annually. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Upon request, the agency shall provide all such data from the previous calendar year to the United States Department of Justice no later than June 30.

Specifically, per agency regulation 454, "Data Collection: a. For the purpose of data collection tracking, the ADOC Form 302-A, alleging sexual abuse or sexual harassment, shall be forwarded to the I&I Division within seventy-two (72) hours of notification of a PREA related incident. b. The PREA Director shall compile the records and data from the previous calendar year necessary to fill out the requested data in the DOJ's Survey of Sexual Violence (SSV) should it be requested. c. The PREA Director shall review data collected to assess and

improve the effectiveness of appropriate ADOC policies and procedures. The PREA Director shall prepare a report on each institution for the Commissioner identifying problem areas, suggesting corrective action, and providing comparison from the previous year's data and reports. d. The above referenced data shall be retained securely for ten (10) years. e. Criminal and administrative investigation records shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years''.

The agency utilizes a computer-based program to document and track agency wide data along with maintaining a website at www.doc.alabama.gov. The agency also tracks incidents at all of its facilities and maintains an annual report. The auditor reviewed the agency regulation and facility policies and procedures (454 and 302-A); observed agency and facility practices; reviewed data provided by the agency and facility staff; interviewed outside agencies; and interviewed inmate and staff during an on-site visit and tour of the facility. Based on the listed information, the agency and facility meets the standard.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Department of Justice Survey Forms.
- Alabama Department of Corrections 302-A.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 U.S. DOJ Form SSV-IJ Survey of Sexual Violence from 2015

PI-2 Annual Data Report

Standard 115.88 Data review for corrective action

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The Alabama Department of Corrections and the Hamilton Work Release Center reviews data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, by:

- 1) Identifying problem areas;
- 2) Taking corrective action on an ongoing basis; and
- 3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

Specifically, per agency regulation 454, "The PREA Director shall review data collected to assess and improve the effectiveness of appropriate ADOC policies and procedures. The PREA Director shall prepare a report on each institution for the Commissioner identifying problem areas, suggesting corrective action, and providing comparison from the previous year's data and reports. The ADOC shall publish the auditor's final report on the agency website to ensure it is available to the public".

The agency is in its second cycle audit review and will compare the current year's data and corrective action with those from next years and PREA Audit Report 52

shall provide an assessment of the agency's progress in addressing sexual abuse. The agency's report is reviewed by the agency leadership and makes certain reports readily available to the public through its website at www.doc.alabama.gov. The agency redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted. The auditor was impressed with the agency website. The agency and facility is in compliance with the standard for the relevant rating period.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
- Department of Justice Survey Forms.
- Alabama Department of Corrections website: www.doc.alabama.gov.
- Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility Staff.
- Alabama Department of Corrections submitted Pre-Audit Questionnaire.

Alabama Department of Corrections Compliance Evidence Provided to Auditor:

Protocols:

P-1 AR 454

Process Indicators:

PI-1 Website Publication

PI-2 Annual Data Report

PI-3 U.S. DOJ Form SSV-IJ Survey of Sexual Violence from 2014

PI-4 U.S. DOJ Form SSV-IJ Survey of Sexual Violence from 2015

Standard 115.89 Data storage, publication, and destruction

\boxtimes	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

Auditor comments: The Alabama Department of Corrections regulation (454), facility policy and procedure, and interviews with the agency Prison Rape Elimination Act coordinator, confirms that data is collected and securely retained. The agency makes all aggregated sexual abuse data, from facilities under its direct control, readily available to the public at least annually through its website. The auditor thoroughly reviewed the agency website and was impressed with the sections addressing the Prison Rape Elimination Act. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected for at least 10 years after the date of the initial collection.

Specifically, per agency regulation 454, "Data Collection: a. For the purpose of data collection tracking, the ADOC Form 302-A, alleging sexual abuse or sexual harassment, shall be forwarded to the I&I Division within seventy-two (72) hours of notification of a PREA related incident. b. The PREA Director shall compile the records and data from the previous calendar year necessary to fill out the requested data in the DOJ's Survey of Sexual Violence (SSV) should it be requested. c. The PREA Director shall review data collected to assess and improve the effectiveness of appropriate ADOC policies and procedures. The PREA Director shall prepare a report on each institution for the Commissioner identifying problem areas, suggesting corrective action, and providing comparison from the previous year's data and reports. d. The above referenced data shall be retained securely for ten (10) years. e. Criminal and administrative investigation records shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years".

The Alabama Department of Corrections actively maintains a website and secure system for data storage. The auditor determination is that the agency and facility exceeds the standard due in part to the well organized and user friendly agency website.

Policy, Materials, Interviews and Other Evidence Reviewed:

- Alabama Department of Corrections Administrative Regulation Number 454: Inmate Sexual Abuse and Harassment dated January 4, 2016.
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	ment of Justice Survey Forms.				
	na Department of Corrections website: www.doc.alabama.gov .				
	• Interviews with agency Prison Rape Elimination Act Coordinator, facility Compliance Manager, and Facility State				
Alabali	na Department of Corrections submitted Pre-Audit Questionnaire.				
Alabama Depart	ment of Corrections Compliance Evidence Provided to Auditor:				
Protocols:					
P-1 AR 454					
Process Indicators:					
AUDITOR CERTIFICATION					
I certify that:					
	The contents of this report are accurate to the best of my knowledge.				
	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, 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.				
Walter Sinnle	July 10, 2017				

Walter Sipple	July 10, 2017
Auditor Signature	Date