

PREA Facility Audit Report: Final

Name of Facility: Julia Tutwiler Prison for Women

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/12/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.



Auditor Full Name as Signed: Darla P. OConnor

Date of Signature: 04/12/2025

AUDITOR INFORMATION

Auditor name: OConnor, Darla

Email: doconnor@strategicjusticesolutions.com

Start Date of On-Site Audit: 02/19/2025

End Date of On-Site Audit: 02/21/2025

FACILITY INFORMATION

Facility name: Julia Tutwiler Prison for Women

Facility physical address: 8966 U.S. 231 North, Wetumpka, Alabama - 36092

Facility mailing address: 8966 US Hwy 231 , WETUMPKA,

Primary Contact

Name:	APRIL JAMES
Email Address:	APRIL.JAMES@DOC.ALABAMA.GOV
Telephone Number:	3348500287

Warden/Jail Administrator/Sheriff/Director

Name:	Kenneth Drake
Email Address:	kenneth.drake@doc.alabama.gov
Telephone Number:	334-567-4369

Facility PREA Compliance Manager

Name:	April James
Email Address:	April.James@doc.alabama.gov
Telephone Number:	334-850-0287

Facility Health Service Administrator On-site

Name:	Constance Talley
Email Address:	constance.talley@yescarecorp.com
Telephone Number:	334-514-3102

Facility Characteristics

Designed facility capacity:	989
Current population of facility:	840
Average daily population for the past 12 months:	800
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Women/girls

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-93
Facility security levels/inmate custody levels:	medium/SL4, medium/SL5,Min-In/SL4, Min-Out/SL2, Closed/SL5, Community/SL1,
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	163
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	31
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	336

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

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

Agency-Wide PREA Coordinator Information			
Name:	Christy Slauson-Vincent	Email Address:	christy.vincent@doc.alabama.gov

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:

2025-02-19

2. End date of the onsite portion of the audit:

2025-02-21

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?

☒ Yes

☐ No

<p>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</p>	<p>Just Detention International was contacted and responded that their database did not reflect any contact from the facility or the residents.</p> <p>One Place Family Justice Center was contacted, and they confirmed they have an MOU with the facility. They provide a victim advocate when requested to accompany residents to forensic examinations. They provide a 24/7 crisis line for residents to call for emotional support regarding sexual abuse, past or present. They provide a 24/7 crisis line for residents to call to report sexual abuse while at the facility.</p> <p>One Place Family Justice Center confirmed that they conduct forensic examinations when requested by the facility. The inmate is brought to their location, and the forensic exam is conducted in the dedicated SANE space. A SANE nurse is always available to conduct forensic exams when needed.</p> <p>Alabama Coalition Against Rape (ACAR) - The agency has a MOU with Alabama Coalition Against Rape. ACAR has a service agreement with the Alabama Department of Corrections (ADOC) to provide SANE services to residents/inmates/detainees through the Rape Crisis Center in their area. The MOU includes provisions for victim advocates and emotional support for victims of sexual abuse, regardless of when or where the abuse occurred. It also covers the provision of a hotline for inmates to call for support.</p>
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AUDITED FACILITY INFORMATION

<p>14. Designated facility capacity:</p>	<p>989</p>
<p>15. Average daily population for the past 12 months:</p>	<p>800</p>
<p>16. Number of inmate/resident/detainee housing units:</p>	<p>16</p>

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	821
19. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
20. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	17
21. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	7
22. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	2

23. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2
24. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
25. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	90
26. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	27
27. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	180
28. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	266
29. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0

<p>30. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The institutional inmate count on the first day of the on-site audit was 82. For a facility with a population of 821, the PREA Auditor Handbook indicates that a minimum of fifteen targeted inmate interviews are required. Sixteen from the targeted groups were interviewed.</p> <p>At the beginning of each interview, the Auditor clarified to the inmate why she was at the facility, her role in the PREA process, and why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and, while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the appropriate protocol questions.</p> <p>The Auditor interviewed the following:</p> <ul style="list-style-type: none"> 2 - transgender inmates 2 - Physically disabled inmates. 2 - Cognitively disabled inmates. 1 - hearing impaired inmates. 1 - visually impaired 2 - Inmates who disclosed abuse in screening. 1 - LEP inmates 3 - Reported abuse 2 - gay or bisexual inmates 0 - Inmates in segregation housing for PREA 0 - youthful offenders
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>31. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>163</p>
<p>32. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>336</p>

33. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	31
34. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	<p>The facility reports that 336 volunteers and 31 contractors have been approved to enter the facility and have contact with inmates. Many volunteers and contractors have been approved to enter the facility, but they have not. There are approximately 20 volunteers who regularly enter the facility and have contact with the inmates. The volunteers and contractors are provided with specific PREA training related to volunteers and ADOC-specific PREA training.</p>
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
35. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
36. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input checked="" type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>

37. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>The institutional count on the first day of the on-site audit was 821. According to the Auditor Handbook, with a population of 821, the auditor shall interview a minimum of 15 random and 15 targeted inmates.</p> <p>Sixteen random inmates were interviewed. These were inmates who were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race.</p>
38. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

The institutional count on the first day of the on-site audit was 821. According to the Auditor Handbook, with a population of 821, the auditor shall interview a minimum of 15 random and 15 targeted inmates.

Sixteen random inmates were interviewed. These were inmates who were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race. During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information-gathering process.

A total of sixteen formal random inmate interviews were conducted.

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

All random inmates willingly participated in the interview process. All responses were typed onto the interview form.

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

Targeted Inmate/Resident/Detainee Interviews

40. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

16

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

41. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:

0

41. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:

☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees.

☐ The inmates/detainees in this targeted category declined to be interviewed.

41. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).

The facility reported there were not any inmates in this category assigned to the facility at the time of the on-site audit. During the facility tour, nothing was observed that contradicted this information. Therefore, no inmates from this category was interviewed.

42. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:

2

43. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
44. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
45. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
46. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
47. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
48. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2

49. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
50. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	1
51. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
51. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
51. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported there were not any inmates in this category assigned to the facility at the time of the on-site audit. During the facility tour, nothing was observed that contradicted this information. Therefore, no inmates from this category was interviewed.

52. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	<p>The institutional count the first day of the on-site audit was 821. According to the Auditor Handbook with a population of 821 the auditor shall interview a minimum of 15 targeted inmates.</p> <p>Sixteen targeted inmates were interviewed. The Auditor requested and received a roster of inmates who fell into the targeted categories. The Auditor randomly chose inmates from each applicable category to interview, ensuring diversity in age and race. Once selected each inmate was put on “call-out” with a time to report to the private space designated for interviews.</p>
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
53. Enter the total number of RANDOM STAFF who were interviewed:	16
54. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Length of tenure in the facility </div> <div> <input checked="" type="checkbox"/> Shift assignment </div> <div> <input checked="" type="checkbox"/> Work assignment </div> <div> <input checked="" type="checkbox"/> Rank (or equivalent) </div> <div> <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) </div> <div> <input type="checkbox"/> None </div>
55. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes </div> <div> <input type="radio"/> No </div>
56. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	<p>There were no problems in selecting random staff. Random staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a specialized staff.</p>

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

57. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):

18

58. Were you able to interview the Agency Head?

☒ Yes

☐ No

59. Were you able to interview the Warden/Facility Director/Superintendent or their designee?

☒ Yes

☐ No

60. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

61. Were you able to interview the PREA Compliance Manager?

☒ Yes

☐ No

☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
63. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
63. Enter the total number of VOLUNTEERS who were interviewed:	2
63. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
64. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Enter the total number of CONTRACTORS who were interviewed:	1
64. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

65. Provide any additional comments regarding selecting or interviewing specialized staff.	There were no problems in selecting specialized staff. Specialized staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a random staff member.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
<p>PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.</p>	
66. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
67. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
68. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
69. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

70. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

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

Julia Tutwiler Women's Prison (JTPW) opened in December 1942 in Wetumpka, Alabama. JTPW has a capacity of 975. The facility is named after Julia Tutwiler, an activist known as the "angel of the prisons" who pushed for progressive reforms in the Alabama DOC. She fought for the separation of minor offenders and hardened, adult criminals, and she also fought for the end of convict leasing. Tutwiler also pushed for medical and psychological treatment for inmates, drug rehab, and hospice care for dying inmates.

JTPW is the only major female facility that houses levels Minimum, Community, Minimum On-Property, Minimum - Road Crews, Medium - Inside, and Close Custody - Death Row / Life Without Parole (LWOP). The inmates are not separated by custody level or crime, except Death Row inmates. Because JTPW has a death row unit, it is classified as a close-custody facility.

JTPW is located on 268 acres of land, consisting of Dormitories A - M within the main facility and Dormitories N & O at Tutwiler's adjoining annex. Some of the security features of Tutwiler include an extensive security camera system, electronic detection at the annex, and is surrounded by reinforced fencing topped with razor wire, which also surrounds the main facility. The prison has two towers that are armed 24 hours a day with correctional officers, including an armed perimeter rover.

JTPW has twelve dormitories, segregation, a mental health unit, a medical infirmary, and units for inmates who are pregnant or aged and/or infirmed. Additionally, JTPW has a chapel, a dining hall, a substance abuse treatment space, educational classrooms, a visiting area, and classrooms for life skills. JTPW incorporates several different housing unit styles into the facility design. There are several housing areas that contain a total of thirty-four single cells, twelve dormitory-style housing units, twenty-two administrative and disciplinary cells, and two exceptionally large multiple occupancy housing units.

Most of the housing areas are designed in a dormitory setting, with one bathroom located at one end of the dormitory. The entrance to the bathroom area has a half/saloon type door at the entrance, with each bathroom having several toilets and several shower stalls.

Segregated housing cells contain toilets inside of the cells that are located at the far end of the cell, with a shower located outside the cell, on the tier, with a privacy curtain. All showers in the dorms or segregated housing have doors or curtains that protect against opposite gender viewing. The toilets have surrounds and are situated in a way that prevents opposite gender viewing.

The women housed at JTPW are fed three meals a day, except on holidays and Sundays. Wellness inmates received three meals a day every day. The inmates are allowed access to phones to facilitate contact with family and friends. They have access to books through the library, and inmates are provided access to computers and tablets that provide access to movies, games, and educational materials, allowing for letter writing and telephone calls with family.

While incarcerated in JTPW, the inmates are able to participate in a large variety of programs, which include, but are not limited to:

- Helping Women Recover
- Beyond Trauma
- Active Adult Relationships
- Beyond Violence
- Getting Ahead While Getting Out
- Moving ON
- Parenting Inside/Out
- Everyday Life Skills
- Mental Health
- Behavior Modification Group
- Chaplain – Spiritual Formation
- Journalism/Writing
- General Education Classes

Multiple PREA signage was posted throughout the facility. The signs were visible at the entrance point, in the food service area, the various dormitories, above the inmate

telephones area, etc. The auditor also observed boxes labeled "PREA" located throughout the facility. This box is used for inmates and staff to submit PREA related complaints/concerns.

Documentation Sampling

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

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

☒ Yes

☐ No

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

Personnel and Training Files:

The PAQ reflects 163 facility staff. Names were chosen randomly from the staff roster to select staff records for review. The records were selected by randomly choosing the records of new hires, newly promoted employees, and seasoned employees. All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable.

Inmate Records:

There were inmate names, chosen randomly from the master roster, with varying arrival dates to determine the records to be reviewed. Of the 45 records reviewed:

PREA Information at Intake - 30 were given PREA information on the day of arrival at the facility. This was confirmed through a signed PREA General Information Form, that they had received PREA information.

72-hour Risk Assessment - 30 had a risk assessment the day they arrived at the facility. This was confirmed by the risk assessment instrument.

30-day Comprehensive PREA Education - 30 comprehensive PREA Education were provided within 30 days of arrival. Signed Inmate Awareness Acknowledgement Form confirmed this.

PREA 30-day Re-Assessment - 30 reassessments were conducted within 30 days of arrival

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, the facility reported 206 allegations of sexual abuse and 34 allegations of sexual harassment in the past twelve months.

The Auditor reviewed 10 files for the first 20 files and then reviewed 10% of the remaining files for a total of 33 files.

The files were reviewed using the PREA audit investigative records review tool to record the following information relative to each

investigative report:

Case / ID

Date of Allegation

Date of Investigation

Staff-or-Inmate-on-Inmate

Sexual Abuse or Sexual Harassment

Final Disposition

Is Disposition Justified?

Investigating Officers

Notice Given to Inmate

Investigation Files:

The PAQ indicates there were 179 inmate-on-inmate sexual abuse or sexual assault cases. These allegations were investigated criminally. After the investigation, 130 allegations were deemed unfounded, 18 were unsubstantiated, and 29 were ongoing.

There were 27 cases of staff-on-inmate sexual abuse or sexual assault. These allegations were investigated criminally. After the investigation, 20 allegations were deemed unfounded, two were unsubstantiated, and five were ongoing. Prosecution was declined for all closed cases. In all sexual abuse cases, the alleged victim was offered medical and mental health services. Retaliation monitoring was conducted until the allegation was deemed unfounded, the victim was transferred, the victim was released, or the mandatory 90 days of monitoring had elapsed. All closed sexual abuse cases, except those deemed unfounded, underwent a sexual abuse incident team review within 30 days of the investigation's completion. In every closed case, the inmate was promptly notified in writing of the investigation results. In the past months, there were 48 allegations of sexual harassment. Of these, 28 involved inmate-on-inmate incidents and were investigated administratively. After the investigations, 20 were found to be unfounded, three were unsubstantiated, one was substantiated, and four are still ongoing. Twenty allegations of staff-on-inmate sexual harassment were investigated criminally. During the on-site audit following the criminal investigation, 12 were deemed unfounded,

five were found to be unsubstantiated, and three remained open.

In all resolved sexual harassment cases, the inmate received prompt written notification of the investigation results.

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

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	179	179	0	0
Staff-on-inmate sexual abuse	27	0	0	27
Total	206	179	0	27

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	28	0	28	0
Staff-on-inmate sexual harassment	20	20	0	0
Total	48	20	28	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	29	0	0	0	0
Staff-on-inmate sexual abuse	5	0	0	0	0
Total	34	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	130	18	0
Staff-on-inmate sexual abuse	0	20	2	0
Total	0	150	20	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	4	20	3	1
Staff-on-inmate sexual harassment	3	12	5	0
Total	7	32	8	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

80. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

25

81. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
82. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	20
83. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
84. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
85. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
86. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

87. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
88. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	8
89. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
90. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
91. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
92. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

93. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

4

94. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

95. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

96. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

97. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☒ No

Non-certified Support Staff

98. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☒ Yes

☐ No

98. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

99. Who paid you to conduct this audit?

☐ The audited facility or its parent agency

☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

☒ A third-party auditing entity (e.g., accreditation body, consulting firm)

☐ Other

Identify the name of the third-party auditing entity

Correctional Consulting Services

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> Exceeds Standard (Substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION</u></p> <ol style="list-style-type: none"> Pre-Audit Questionnaire (PAQ) and supporting documentation provided. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 ADOC Pamphlet, Inmate Awareness in English, and Spanish ADOC Female Inmate Handbook, dated September 25, 2017 ADOC Organizational Chart ADOC, PREA Director Qualifications ADOC, PREA Compliance Manager Qualifications and Training Standard Operating Procedure (SOP) #454-1 <p><u>INTERVIEWS</u></p> <p>Institution PREA Compliance Manager (IPCM)</p>

During the interview process, the IPCM confirmed that there was ample time available to fulfill the required PREA responsibilities.

Agency PREA Director (PD)

During the interview process, the agency's PREA Director (PD) confirmed having adequate time and authority to develop, implement, and oversee the agency's efforts to ensure compliance with PREA standards across all facilities.

During the interview process, the agency's PD confirmed that the PCM has no responsibilities beyond ensuring the institution's compliance with PREA standards and holds the authority to implement any necessary changes to address PREA-related issues

PROVISIONS

Provision (a)

The facility, as indicated on the Pre-Audit Questionnaire (PAQ), has a comprehensive written policy in place that enforces a zero-tolerance stance toward all forms of sexual abuse and sexual harassment within the facilities it operates, both directly and under contract. The policy clearly outlines the procedures for implementing the agency's approach to preventing, detecting, and responding to incidents of sexual abuse and sexual harassment.

In its response on the PAQ, the facility reported that the policy includes clear definitions of prohibited behaviors related to sexual abuse and sexual harassment. Furthermore, the policy stipulates specific sanctions for individuals found to have engaged in these prohibited behaviors. The facility has also reported that their policy outlines agency strategies and responses designed to reduce and prevent occurrences of sexual abuse and sexual harassment among inmates.

The policies which address this provision are:

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

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

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

Provision (b)

The facility reported on the PAQ that the agency has an agency-wide PREA Director (PD). The PD is positioned within the agency's hierarchy under the General Counsel, as confirmed by the agency organizational chart..

The policy which address this provision are:

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

The ADOC PD is classified at the Director level as confirmed through a review of the agency organization chart. The PD has regular contact with the facilities throughout the state through site visits, emails, and direct conversations with the twenty-six assigned Institutional PREA Compliance Managers (IPCM) who are assigned to various locations, as well as the twenty-six back-up IPCM's. These additional managers ensure the PD has sufficient coverage at each ADOC facility and allows her sufficient time to fulfill her varied responsibilities and ensure PREA compliance.

Provision (c)

The facility has reported on the PAQ that it has a designated PREA Compliance Manager (PCM). In all matters related to the Prison Rape Elimination Act (PREA), the PCM reports directly to the PREA Coordinator. Additionally, within the facility's organizational structure, the PCM reports to the Warden/Superintendent.

The policy which address this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, establishes, identifies, and outlines the roles and responsibilities of the IPCM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the IPCM to coordinate the institutions efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards and outlines the agency's approach to sexual safety.

CONCLUSION

Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses zero tolerance of sexual abuse and sexual harassment: PREA coordinator.

Auditor Overall Determination: Meets Standard

Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
3. ADOC Contract with Alabama Therapeutic Education Facility (ATEF)

INTERVIEWS:

Agency Contract Administrator

During the interview process, the Agency Contract Administrator clarified that the contracts are with both private and county facilities. These contracts include specific language outlining the vendor's obligation to comply with PREA (Prison Rape Elimination Act) standards prior to entering into an agreement with the agency. If the entity is not PREA-compliant, the contract will not be executed

PROVISIONS

Provision (a)

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

The facility reported that the Alabama Department of Corrections (GDC) mandates that all entities contracting for the confinement of inmates adhere to the Prison Rape Elimination Act (PREA) standards. As part of this requirement, all contracts for inmate confinement include PREA-specific language, expectations, and compliance requirements.

The facility does not independently contract for the confinement of inmates. Rather, the relevant guidelines are contained in the ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section D, states the ADOC general Counsel shall be responsible for ensuring that contracts for confinement of inmates include a provision indicating to the contracting entity its obligation to comply with the PREA standards and the ADOC's monitoring of such compliance.

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

ADOC Contract with Alabama Therapeutic Education Facility (ATEF), states, "Vendor (ATEF) shall comply with Alabama Code Section 14-11-31, as well as 28 C.F.R. Part

	<p>115, the Prison Rape Elimination Act (“PREA”). The ADOC has a Zero Tolerance Policy toward all forms of custodial sexual misconduct, sexual abuse, and sexual harassment. See Administrative Regulation 454, Inmate Sexual Assault and Harassment Awareness (Prison Rape Elimination Act (PREA)). Any type of conduct – including suspected conduct – that falls within the context of custodial sexual misconduct/sexual abuse, as defined by either the State or Federal laws referenced above, shall be reported immediately to the Warden of Kilby Correctional Facility or his/her designee for conduct involving male Inmates, or the Warden of Tutwiler Correctional Facility or his/her designee for conduct involving female Inmates, as well as the ADOC’s PREA Director or designated PREA Contract Monitor. Pursuant to 28 C.F.R. Part 115.12, Vendor is obligated to adopt and comply with all PREA standards, and the ADOC shall monitor Vendor for compliance consistent with the compliance conditions set forth above. Vendor shall provide reasonable access to the PREA Contract Monitor; provide relevant documentation as requested; require and provide training of all of its employees, agents, or contractors; and provide a Report from any PREA audit, which shall be performed by an independent, DOJ certified auditor.”</p> <p>Provision (b)</p> <p>The facility reported on the PAQ that all contracts related to the confinement of inmates include a requirement for the agency to monitor the contractor’s compliance with PREA standards. Additionally, the facility reported that there are zero contracts, as referenced in 115.12(a)-3, that do not require the agency to monitor the contractor’s compliance with PREA standards.</p> <p>According to the Agency Contract Administrator, the policies and procedures of each contractor are reviewed to ensure appropriate adherence to national standards. Each contractor is contractually obligated to notify the Alabama Department of Corrections (ADOC) of any PREA-related allegation and to forward a copy of the allegation, investigation, and findings to the agency’s PREA Director for review.</p> <p><u>CONCLUSION</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses contracting with other entities for the confinement of inmates</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <p>1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided.</p>

2. ADOC Administrative Regulation #454
3. ADOC Form 454-J, Annual PREA Staffing Plan Review
4. ADOC Form 454-G, Log of Unannounced Rounds
5. Copies of Deviation Log
6. Facility Blueprint/Layout
7. Facility Vulnerability Assessment Form
8. Facility Staffing Plan Checklist
9. Facility Staffing Plan, approved January 1, 2025

OBSERVATIONS

The Auditor conducted a random review of unit logbooks and observed instances where intermediate- or higher-level staff made entries to document unannounced rounds."

INTERVIEWS

Facility Head or Designee

During the interview process the Facility Head spoke about:

1. Examining how staffing levels affect inmate programming.
2. How changes or modifications in the video monitoring system can make the facility safer for staff and inmates.
3. The physical plant configuration,
4. Internal and external oversight bodies
5. Inmate composition
6. Placement of Supervisor staff
7. Needs of line staff
8. Staffing Plan Compliance and Staffing Plan Deviation

Institutional PREA Compliance Manager (IPCM)

During both the formal interview process and informal conversations, the IPCM highlighted the ongoing reviews of staffing levels and their impact on inmate programming and assignments. Additionally, the video monitoring system is regularly inspected and reviewed to ensure its proper functioning and coverage, with any necessary changes or modifications being promptly addressed.

Intermediate-or-Higher Level Facility Staff

During the interview process, intermediate- and higher-level staff acknowledged routinely making unannounced rounds and documenting them in the unit logbook. In random informal conversations with staff, it was confirmed that supervisors also conduct unannounced rounds without prior notice to the staff, and these rounds are consistently documented in the logbook. The Auditor was able to verify this practice through a random review of several logbooks during the facility tour

Random Staff

During the interview process, random staff members indicated that supervisors regularly tour their units throughout each shift. They engage with staff at all levels, as well as inmates, and consistently audit, review, and sign logbooks. During the Auditor's on-site visit, supervisors were observed actively walking through and performing various tasks throughout the facility.

Additionally, during the interview process, several staff members confirmed the policy prohibiting staff from alerting each other when supervisors are making their rounds

Random Inmates

During the interview process, inmates confirmed that the IPCM and other supervisory staff regularly walk around the institution, maintaining visibility and ensuring availability to all inmates.

PROVISIONS**Provision (a)**

The facility has submitted a staffing plan as part of the PAQ, which confirms that the plan addresses all thirteen elements outlined in Provision (a). Additionally, the staffing plan outlines the facility's policy to ensure that all relieved posts are appropriately staffed at the times specified. The PAQ also verifies that the average daily inmate population over the past 12 months has been 800, a figure that has been confirmed by the Facility Head.

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

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

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

a decision must be approved by the Warden or Captain.

The Auditor reviewed the most recent annual PREA staffing plan. The plan was comprehensive and addressed each of the bullet items required according to Provision (a). On an annual basis, quality assurance audits are conducted to ensure compliance with the established staffing model. The staffing plan was predicated upon an inmate population of 800. The average daily number of inmates since the last PREA audit is 800.

The policies which address this provision are:

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

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

Provision (b)

The facility has established a staffing plan, which is predicated on the daily average of 800 inmates. In the event a mandatory post is vacant, the post is filled with overtime staff or staff re-directed from non-mandatory posts. It is the watch commander's responsibility to document these instances.

The facility has reported staffing deviations in the past twelve months, as noted on the Post Assignment Questionnaire (PAQ). In cases where a mandatory post is vacant, the facility fills the position either through overtime or by redirecting staff, depending on the level of the post. The four most common reasons for staffing deviations identified by the facility are staff shortages, staff call-ins, hospital posts, and transport needs.

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

1. Sick calls
2. training,
3. FMLA,
4. military,
5. medical emergency transport,
6. facility emergency

The Auditor did not find any occurrence when inmate education was shut down due to limited staff coverage in the past twelve months. Education is provided by contract

workers.

Provision (c)

The facility reported on the PAQ that, at least annually, in collaboration with the PREA Coordinator, the staffing plan is reviewed to determine if adjustments are necessary in the following areas: (a) the staffing plan itself, (b) the deployment of monitoring technology, or (c) the allocation of facility/agency resources to support the staffing plan and ensure compliance. Any revised plans are forwarded to the PREA Coordinator for review and approval.

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

The annual review of the staffing plan involves management-level staff from the facility and department, including the PREA Coordinator and other institutional executive staff.

The Auditor reviewed shift rosters and was able to verify that all mandatory posts were covered by assigned staff members.

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

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

Provision (d)

On the PAQ, the facility reported that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. These rounds are documented in the unit logbook. Staff are prohibited from alerting one another about these rounds, and the rounds cover all shifts. The Auditor verified this practice by checking the unit logbooks during the facility tour.

	<p>The policies which address this provision are:</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, C, mandates that intermediate level or higher-level supervisors conduct and document unannounced rounds on all shifts. These rounds are documented on the Shift Report, including the date, time and person's name who made the rounds. In addition the ADOC Form 454-G, Log of Unannounced Rounds, is required to be completed for each shift and submitted to the IPCM. This report documents the required unannounced rounds and the PREA Hotline check conducted once per shift. The Auditor reviewed thirty days of these reports through the document review process. The Auditor also reviewed the Shift reports and noted consistent entries by supervisors on all shifts.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, C, indicates the staff are prohibited from alerting other staff when these rounds are occurring, barring legitimate operations of the facility.</p> <p><u>CONCLUSION</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility does meet every provision of the standard which addresses supervision and monitoring.</p>
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115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016. <p><u>OBSERVATIONS</u></p> <p>During the on-site tour, the Auditor did not visually observe any youthful inmates present</p> <p><u>INTERVIEW</u></p> <p>Facility Head</p> <p>Through both the interview process and informal discussions, the Facility Head</p>

confirmed that young inmates are housed at the facility on a case-by-case basis. However, currently, there are no young inmates in custody.

Institutional PREA Compliance Manager (IPCM)

Through the interview process and informal discussions, the IPCM confirmed that the facility occasionally houses young inmates. However, at this time, there are no young inmates in the facility.

Youthful Inmates

The facility accommodates youthful offenders; however, during the on-site audit, no youthful offenders were assigned to the facility, and therefore, no interviews were conducted for this category.

PROVISIONS

Provision (a)

In the PAQ, the facility reported that it houses youthful inmates on a case-by-case basis. However, at the on-site audit, no youthful offenders were assigned to the facility. To verify this, the Auditor reviewed the inmate roster and confirmed that no inmates had birthdates after 2006, confirming that the facility does not currently house youthful offenders.

Provision (b)

The PAQ reported that the facility maintains sight, sound, and physical separation between youthful and adult inmates in areas OUTSIDE HOUSING UNITS. Additionally, the agency always provides direct staff supervision in areas OUTSIDE HOUSING UNITS where youthful inmates have sight, sound, or physical contact with adult inmates.

Provision (c)

The facility documents the exigent circumstances for each instance in which youthful inmates were denied access to large-muscle exercise, legally required education services, and other programs and work opportunities.

In the past 12 months, there was one youthful inmate who was placed in isolation to separate them from adult inmates.

CONCLUSION:

Based on the comprehensive review and analysis of all available evidence, the Auditor has determined that the agency/facility fully complies with the established standard concerning the management and treatment of youthful inmates.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Administrative Regulation #336 4. ADOC Form 302-A Incident Report 5. Training records for cross-gender and transgender searches 6. Transgender Inmate Search Preferences Form <p><u>OBSERVATIONS</u></p> <p>During the facility tour, when opposite-sex staff entered a housing unit, they were observed making an announcement to notify inmates of their presence.</p> <p>Additionally, during the tour, both cisgender female inmates and transgender male inmates were observed on facility property and within the facility itself.</p> <p><u>INTERVIEWS</u></p> <p>Non-Medical Staff Interview (involved in cross gender strip or visual searches)</p> <p>Through the interview process, non-medical staff confirmed that they do not conduct cross-gender strip searches or cross-gender visual body cavity searches. However, in the event of exigent circumstances, any such searches would require approval from the Facility Head, be conducted by medical staff, and be thoroughly documented.</p> <p>Random Staff</p> <p>Throughout the interview process, staff participated in both informal discussions and seventeen formal, randomly selected staff interviews. The following key points were noted from these interviews:</p> <ol style="list-style-type: none"> 1. Staff confirmed they completed training on cross-gender searches for exigent circumstances, which is covered on Day 1 of In-Service Training. 2. Cross-gender strip searches or cross-gender visual body cavity searches do not occur at the facility. 3. None of the staff interviewed had personally conducted or been involved in a cross-gender search. 4. There are sufficient female staff members available to conduct any necessary searches, and female staff would be reassigned if needed to ensure

appropriate search procedures are followed.

5. Male officers do not conduct strip searches or visual body cavity searches.
6. Search procedures for transgender and intersex inmates explicitly prohibit searches conducted for the sole purpose of identifying an inmate's genital status.
7. When asked whether transgender or intersex inmates would be able to shower privately, staff affirmed that they would.

Staff explained that most showers throughout the facility consist of individual stalls that provide privacy for each inmate. In areas without individual stalls, alternative shower times would be arranged.

Staff further indicated that transgender or intersex inmates would have the opportunity to provide input regarding alternative shower times, and their preferences would be given significant consideration in the decision-making process.

Random Inmates

Through the interview process, 100% of the inmates confirmed the following:

1. They have never been subjected to a cross-gender search.
2. They can dress without being observed by a member of the opposite sex.
3. They can shower without being viewed by a member of the opposite sex.
4. Opposite-sex staff members consistently announce their presence when entering housing units and bathroom areas.

Transgender Inmates

When interviewed, 100% of transgender inmates reported satisfaction with the facility's search practices. They also expressed satisfaction with the showering accommodation provided. Additionally, all transgender inmates confirmed they had never been searched for the sole purpose of determining their genital status.

PROVISIONS

Provision (a)

The facility reported on the PAQ that it does not conduct cross-gender strip or cross-gender visual body cavity searches of inmates. Subsequently, in the past 12 months, there were zero cross-gender strip or cross-gender visual body cavity searches of inmates. This was confirmed by random staff during the interview process.

During the onsite audit, two transgender inmates were interviewed, and each reported being satisfied with the search practices of the facility.

A review of the staff training sign-in sheets confirmed staff had been trained in cross gender and transgender searches.

During intake, transgender and intersex inmates are provided an Inmate Search Preferences Form to complete. This form provides the transgender or intersex inmate with an opportunity to designate if they prefer to be searched by male or female staff. Once completed this form is made part of the inmate's permanent record. Once this form is completed, the search preference will be used unless exigent circumstances exist.

The policies that address this provision are:

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

ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 4, Section F, Number 3, states staff shall not conduct cross gender unclothed searches or cross gender visual body searches except in exigent circumstance. The reviewed policy is consistent with the PREA standards.

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

Provision (b)

According to the PAQ, the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities to comply with this provision. Additionally, the PAQ reflected zero pat-down searches of female inmates that were conducted by male staff in the past 12 months.

During interviews, all inmates reported only being searched by female staff members.

Provision (c)

The facility reported on the PAQ that while they do not conduct cross gender strip searches and cross gender visual body cavity searches, if exigent circumstances were to arise unexpectedly, any cross-gender strip searches and cross-gender visual body cavity searches would be approved by the Facility Head, conducted by medical staff, and thoroughly documented. This was verified by non-medical staff (involved in cross gender strip or visual searches).

The policies that address this provision are:

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

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

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

Provision (d)

The facility reported on the PAQ, inmates shower, perform bodily functions, and change clothes without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine cell checks. Further, the PAQ indicated opposite gender staff are required to announce their presence when entering an inmate housing unit. The random inmates verified this during the interview process.

All random inmates (100%) interviewed confirmed they were able to shower and dress without being seen by a member of the opposite sex. In response to the question of whether opposite gender announcements are made on housing units, 100% of the random inmates interviewed reported female staff announce their presence when entering the housing unit.

When asked, all (100%) of transgender inmates interviewed reported being satisfied with the showering accommodations at the facility.

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

Provision (e)

The facility reported on the PAQ that it is prohibited for staff to search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.

All random staff interviewed confirmed it was against facility/agency policy to search a transgender or intersex inmate for the sole purpose of determining their genital status and that such a search is prohibited. Further, they reported they had been trained how to search a transgender or intersex inmate in a professional and non-intrusive way, but that the majority of the time, medical personnel conduct the strip searches.

During the interview process, random staff indicated absent exigent circumstance, female officers conduct the pat searches on transgender or intersex inmates. Additionally, absent exigent circumstances, medical personnel conduct strip searches and visual cavity searches on transgender and intersex inmates.

	<p>All (100%) transgender inmates reported they had never been searched for the sole purpose of determining their genital status. All (100%) transgender inmates also reported being satisfied with the search procedures at the institution.</p> <p>At the time of the on-site audit, there were two transgender inmates interviewed. They indicated that staff had not searched or physically examined them for the sole purpose of determining the inmates' genital status.</p> <p>The policies that address this provision are:</p> <p>ADOC Administrative Regulation #336, Operations, regarding Searches, dated February 8, 2016, p. 5, Number 6 indicates staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p.15, Section E, 4 indicates staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status.</p> <p>Provision (f)</p> <p>The Auditor reviewed the most recent PREA training documentation for facility staff. Training topics included appropriate search techniques, specifically cross-gender pat searches and searches of transgender and intersex inmates. The Auditor verified the list of staff receiving the training correlated to the existing facility staff listed on the staff roster. Participants signed an acknowledgment of training materials. Additional training documents provided directions to staff on proper documentation practices in the unlikely event cross-gender searches were conducted.</p> <p>Training topics included appropriate search techniques specific to cross-gender pat searches and searches of transgender and intersex inmates. Additional training documents provided directions to staff on proper documentation practices in the unlikely event when cross-general searches were conducted.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding limits to cross-gender viewing and searches.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation.
2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
3. ADOC MOU with Alabama Institute for the Deaf and Blind
4. Inmate Receipt of PREA/Acknowledgment (Disabled, low-Vision and Deaf Only)
5. Low-Functioning Information/Materials Used
6. Memo explaining Google Translate

OBSERVATIONS

During the facility tour, the Auditor observed PREA postings in English and Spanish displayed in housing units, work areas, hallways, visitation areas, and other areas throughout the facility. The auditor was provided with written documents, training materials, and PREA brochures, which are provided in English and Spanish to the inmate population. Additionally, the IPCM had created PREA bulletin boards throughout the facility, which were informative and educational.

INTERVIEWS**Facility Head**

During the interview process, the Facility Head explained that the facility has established procedures to ensure that inmates with disabilities and those who are Limited English Proficient (LEP) have the opportunity to participate in the PREA reporting process. This is facilitated through various means, including staff interpreters, written correspondence, and other accessible avenues.

Random Staff

Interviews with randomly selected staff confirmed that the facility strictly prohibits the use of inmate interpreters, inmate readers, or other inmate assistants for inmates with disabilities or LEP inmates when making allegations of sexual abuse or sexual harassment. Additionally, 100% of staff reported they had never witnessed or been aware of any instance in which an inmate interpreter, reader, or assistant was used in connection with such allegations.

Inmates with Disabilities

Through the interview process, no inmates with disabilities or LEP inmates reported feeling vulnerable due to their disability. All interviewed inmates in these groups indicated that the facility provides information about sexual abuse and sexual harassment in a manner they can understand.

When asked, "Do you understand your rights related to sexual abuse and how to report sexual abuse or harassment?" 100% of respondents affirmed that they did. When asked, "Do you feel the facility does everything it can to assist you in feeling less vulnerable and safer in light of your disability?" 100% of respondents answered

affirmatively.

When asked, "Can you think of anything the facility could do to better assist you in light of your disability? " All respondents stated they felt the facility was effectively meeting their needs.

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency/facility has established procedures to provide disabled inmates and limited English proficient inmates with equal opportunity to participate in and benefit from all aspects of the agency's effort to prevent, detect, and respond to sexual abuse and sexual harassment. The Facility Head verified this.

As verified by the auditor, the ADOC has an existing Memorandum of Understanding (MOU) with the Alabama Institute for the Deaf and Blind for translation and assistance services for affected inmates.

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

The auditor was provided with written documents, training materials, and PREA brochures in English and Spanish for the inmate population.

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

Provision (b)

The facility reported on the PAQ that the agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Some of the resources include, but are not limited to:

MOU and collaborative relationship with the Alabama Institute for the Deaf and Blind for translation and assistance services for those affected inmates,

written materials in English and Spanish

PREA Video in English and Spanish with closed captions

Limited English-proficient residents are provided with information in Spanish. The Auditor reviewed the PREA information. Every piece of material available in English is also available in Spanish.

Hearing Impaired residents are provided information visually, through videos and written words.

Visually Impaired residents are provided information audibly, read by a staff member, or through sound in recorded messages or videos. Braille is also available.

Cognitively impaired residents are provided information audibly, read by a staff member, or through sound in recorded messages or videos.

Residents with limited reading skills are provided information audibly, read by a staff member, or through sound in recorded messages or videos.

The facility also employs an ADA Coordinator who coordinates training and educational materials for all ADA inmates.

The policies that address this provision are:

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, items a-d, denote numerous items relative to ensuring each inmate is given information in verbal and written form, and that the inmate understands all information regarding ADOC's PREA policy.

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

Provision (c)

The facility reported on the PAQ that zero instances of inmate interpreters, readers, or other types of inmate assistants have been used in the past twelve months. The Facility Head verified this.

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

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

CONCLUSION:

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

115.17	Hiring and promotion decisions
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 536 376"><u>DOCUMENTATION</u></p> <ol data-bbox="320 443 1433 768" style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Administrative Regulation #216 4. Personnel records review for current employees 5. Employee background checks 6. Application/Pre-Employment Questionnaire <p data-bbox="256 813 469 846"><u>INTERVIEWS:</u></p> <p data-bbox="256 880 903 913">Administrative (Human Resources) Staff</p> <p data-bbox="256 947 1433 1025">The auditor interviewed the HR director regarding the ADOC's hiring practices. The HR Director indicated:</p> <ol data-bbox="320 1093 1465 1843" style="list-style-type: none"> 1. The ADOC requires background checks on all new hires, promotions, and existing staff every five years. 2. The Divisional HR Department is responsible for tracking the due dates of all staff requiring their five-year criminal history check, ensuring they are completed as needed. 3. The ADOC has a centralized database that tracks the completion of all background checks and the five-year criminal history background check due dates. 4. Potential hires must fill out the personnel documents, requiring disclosing the necessary standard items. 5. The ADOC takes a highly active stance with the requirements of the PREA standards and has developed a very comprehensive system of tracking to ensure that all the required history checks are completed for pre-hires, promotions, and five-year reviews. 6. Any arrest activity must be reported through the respective employer reporting structure as a condition of staff employment. Additionally, any information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be provided upon request. <p data-bbox="256 1888 456 1921"><u>PROVISIONS</u></p> <p data-bbox="256 1955 464 1989">Provision (a)</p> <p data-bbox="256 2022 1449 2056">The PAQ indicated that the facility has 163 staff and 29 new hires in the past twelve</p>

months. Further, they reported thirty-one contractors and 336 volunteers in contact with inmates.

The Auditor reviewed a random sampling of staff records. Each document reviewed contained all items required by the standard, including documentation and Criminal History Check information. The Auditor verified all files reviewed containing all the items needed by the standard, including PREA documentation and verification of the completed criminal history checks.

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 12, V, A, 4, a, declares that ADOC agency policy prohibits the hiring or promotion of an employee or contractor who may have contact with inmates who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
2. Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Provision (b)

On the PAQ, the facility reported that any incidents of sexual harassment are considered in determining whether to hire or promote someone or to enlist the services of any contractor who may have contact with inmates. This was verified during the interview process with HR personnel.

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

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

Provision (c)

On the PAQ the facility reported that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Twenty-nine individuals were hired in the past twelve months. The HR personnel

verified this during the interview process.

According to the PAQ, twenty-nine persons were hired in the preceding twelve months who may have contact with inmates with criminal backgrounds. The Auditor reviewed the criminal history checks. These records contained all items required by the standard, including the PREA documentation and verification of the completed criminal history checks.

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

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

Provision (d)

The facility reported on the PAQ that before enlisting the services of any contractor who may have contact with inmates, a criminal background records check is completed for each contractor. The facility reported on the PAQ that there are 31 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. The ADOC performs a criminal background records check on each new contractor every five years thereafter.

The PAQ indicated 31 contracts for services in which criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. Documentation indicating that the contractors and volunteers have current criminal background history checks was provided to the auditor for review.

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

Provision (e)

The facility reported on the PAQ that criminal background record checks are conducted at least every five years for current employees and contractors who may

have contact with inmates. HR personnel verified this during the interview process.

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

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

Provision (f)

The facility reported on the PAQ that all applicants and employees who may have direct contact with inmates must answer questions about previous sexual misconduct on applications, in interviews, and in written self-evaluations. Additionally, there is a continuing affirmative duty to disclose any such misconduct. HR personnel verified this during the interview process.

The Administrative Staff (HR) indicated that all applicants and employees who may have contact with inmates are directly asked about previous misconduct described in paragraph (a) of this section in written applications, self-evaluations, or interviews for hiring or promotions. Further, these questions are asked and answered in writing with employee signatures annually.

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

Provision (g)

The facility reported on the PAQ that material omissions regarding such misconduct or the provision of materially false information shall be grounds for termination. HR personnel verified this during the interview process.

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

Provision (h)

On the PAQ, the facility reported that unless prohibited by law, the agency will

	<p>provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied for work. HR personnel verified this during the interview process.</p> <p>The Administrative Staff (HR) acknowledged that, unless prohibited by law, all information on substantiated allegations of sexual abuse or sexual harassment involving a former employee would be shared upon request from an institutional employer for whom such employee has applied for work.</p> <p>Policy states that unless prohibited by law, the ADOC will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such an employee has applied to work. The HR Director confirmed this information.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding hiring and promotion decisions.</p>
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115.18	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided. 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. Facility Schematic (Blueprint/Layout of Facility) <p><u>OBSERVATIONS</u></p> <p>The Auditor conducted a comprehensive tour of the facility. Since the last audit there has not been any substantial expansions or additions to the facility.</p> <p>During the on-site facility tour, the Facility Head pointed out camera placement, as well as security mirrors. Camera coverage is a way to enhance the physical and sexual safety of the inmate and staff in the room.</p> <p><u>INTERVIEWS</u></p>

	<p>Agency Head or Designee</p> <p>During the interview process the Agency Head Designee indicated camera placement was designed to limit blind spots and provide adequate coverage for PREA protections while preventing cross gender viewing capabilities.</p> <p>Facility Head or Designee</p> <p>During the interview process the Facility Head indicated:</p> <ol style="list-style-type: none"> 1. The ultimate goal is to have camera coverage in all areas of the facility to ensure everyone's safety. 2. Before any camera expansion, areas of concern would be identified, and it is of the highest priority to address any areas identified. 3. Cameras are always available for video monitoring. <p><u>PROVISIONS</u></p> <p>Provision (a)</p> <p>The PAQ indicates the facility has not acquired any new facilities or made substantial expansions or modifications to the existing facility since the last PREA audit.</p> <p>Provision (b)</p> <p>The PAQ indicates the facility has installed or updated the video monitoring system, electronic surveillance system or other technology since the last PREA audit. Executive staff agreed that cameras effectively help in security, as well as assist in mitigating and preventing sexual abuse and sexual harassment.</p> <p>CONCLUSION:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding upgrades to facility and technology.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR)

#454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016

3. ADOC Administrative Regulation #300
4. Memorandum of Understanding Between ADOC and ACAR
5. Evidence Protocol/Investigations/Medical National Protocol for Sexual Assault Medical Forensic Examinations
6. Specialized Training Certificates for Investigators
7. SANE Centers/Rape Crisis Centers Regional List

INTERVIEWS

PREA Director (PD)

During the interview, the PREA Director (PD) confirmed that the agency adheres to the uniform evidence protocol. This protocol is designed to maximize the potential for obtaining usable physical evidence for both administrative proceedings and forensic medical exams. The protocol is developmentally appropriate for youth and ensures that all forensic procedures align with the standards for such cases. Additionally, the facility conducts both administrative and criminal investigations concerning allegations of sexual abuse.

Institutional PREA Compliance Manager (IPCM)

The IPCM shared the following key points:

1. **Advocacy Services:** Victim advocacy services are available through specially trained staff within the facility.
2. **Forensic Examination Agreement:** The Alabama Department of Corrections (ADOC) has a service agreement with the Alabama Coalition Against Rape (ACAR) for forensic examinations. This MOU establishes collaboration between the ADOC and twenty-eight rape crisis centers throughout the State of Alabama to provide confidential support services related to sexual abuse at ADOC facilities.
3. **Examination Location:** Forensic examinations are conducted at One Place Family Justice, which has a dedicated SANE examination space..
4. **Forensic Exams in the Past Year:** Over the past year, zero forensic examinations were performed.

SAFE/SANE Staff

The Sexual Assault Forensic Examiner (SAFE) and Sexual Assault Nurse Examiner (SANE) staff described the process as follows:

1. **Utilization of SART:** The facility utilizes the One Place Family Justice for forensic examinations.
2. **Service Agreement with ACAR:** ACAR has a service agreement with the Alabama Department of Corrections (ADOC) to provide SANE services to

- residents/inmates/detainees through the Rape Crisis Center in their area.
3. **SANE Call List:** SANE personnel are called from a designated contact list and report directly to the facility to perform forensic examinations.
 4. **No Financial Responsibility for Inmates:** Inmates are not financially responsible for the forensic examination.

Random Staff

The staff interviewed demonstrated a solid understanding of the process if an inmate reports alleged sexual abuse. Key points included:

1. **Preservation of Evidence:** 100% of staff interviewed were able to articulate the basic preservation of evidence for both the victim and the alleged abuser.
2. **Responsibility Transfer:** The Staff explained their responsibilities up to the point of transferring the case to investigative or medical staff.

Inmates Who Reported Sexual Abuse

Inmates who reported sexual abuse during the interviews provided the following feedback:

1. **Staff Responsiveness:** Inmates reported that facility staff were responsive to them when they made a report of sexual abuse.
2. **Forensic Examination Referral:** If appropriate, inmates were referred for forensic examinations immediately after reporting.
3. **Victim Advocate Assistance:** Those referred for forensic exams were offered a victim advocate, who accompanied them during the examination and helped them understand the process.
4. **No Financial Obligation:** Inmates reported that they were not asked to pay for any medical treatment related to the examination.
5. **No Polygraph Test:** All inmates reported that they were not required to take a polygraph test as part of the investigation.
6. **Financial Responsibility:** All inmates reported that the medical care related to sexual abuse was provided at no cost to them.
7. **Investigation Results Notification:** Inmates confirmed that they were notified in writing of the results of the investigation.

Rape Crisis Center

The personnel from the Rape Crisis Center provided the following information:

1. **Memorandum of Understanding (MOU):** ACAR has a service agreement with the Alabama Department of Corrections (ADOC) to provide SANE services to residents/inmates/detainees through the Rape Crisis Center in their area. The MOU includes provisions for victim advocates and emotional support for victims of sexual abuse, regardless of when or where the abuse occurred. It

also covers the provision of a hotline for inmates to call for support.

2. **Services:** Services are provided through One Place Family Justice Center, 530 S. Lawrence Street, Montgomery, AL 36104

PROVISIONS

Provision (a)

The PAQ indicated that the facility/agency is responsible for conducting administrative and criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct. The IPCM provides investigative assistance for inmate-on-inmate sexual harassment administrative cases.

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

Provision (b)

The facility reported on the PAQ that there were no youthful inmates. When reviewing the inmate roster, the Auditor did not see any inmates whose birth date was later than 2006. However, the facility reported that the protocol they use in investigations is developmentally appropriate for young people. The PC verified this.

One Place Family Justice Center, 530 S. Lawrence Street, Montgomery, AL 36104, indicated they have a Sexual Assault Nurse Examiner facility offering exams 24 hours a day, 7 days a week. The SANE nurse performs the forensic examination, collects all evidence, and completes a physical examination. Medications are given to help prevent transmission of disease. The exams are free of charge and are paid through the Alabama Crime Victim Compensation Fund. Further each inmate who has a SANE exam is assigned a Rape Response Advocate upon arrival before the forensic examination taking place. The Auditor was advised that there were zero forensic examinations in the past twelve months. The IPCM confirmed this information.

Provision (c)

The facility reported on the PAQ that all inmates who experience sexual abuse have access to forensic medical examinations. All treatment services are provided to the victim without financial cost. Further, SANE personnel complete all forensic examinations. In the unlikely event, SAFE or SANE personnel are not available, an ER physician will be utilized. On the PAQ, the facility reported zero forensic examinations during the past twelve months. The IPCM verified this.

The Auditor spoke with personnel at One Place Family Justice Center, 530 S. Lawrence Street, Montgomery, AL 36104, #334-262-7378, who advised they have a dedicated area for all SAFE/SANE examinations. They have staff who conduct SAFE/SANE

examinations; if no one is on duty, they have staff on call who will report in to conduct SAFE/SANE examinations when needed. One Place Family Justice Center has a victim advocate built into the forensic examination process and available to the victim.

The advocate assists the victim before, during, and after the forensic examination to the extent the victim allows.

The Auditor was provided with a Memorandum of Understanding (MOU) between the ADOC and the Alabama Coalition Against Rape (ACAR). This MOU establishes collaboration between the ADOC and twenty-eight rape crisis centers throughout the State of Alabama to provide confidential support services related to sexual abuse at ADOC facilities. The

One Place Family Justice Center, located at 530 S. Lawrence Street, Montgomery, AL 36104, and accessible at 334-262-7378, offers treatment services to the facility's inmates. These include SAFE/SANE exams and victim advocacy services.

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

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

Provision (d)

Provision (c) states that a victim advocate is provided during the forensic medical examination. In addition, per the MOU with ACAR, the victim/inmate is also provided advocacy assistance through

Provision (e)

The facility reported on the PAQ that if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/ requested. The IPCM verified this.

Provision (f)

As reported in Provision (a), the facility/agency is responsible for conducting administrative and criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct.

Provision (g)

Auditors are not required to audit this provision.

Provision (h)

	<p>As reported in Provision (d), victim advocacy services are offered through contract and are built into the forensic exam process.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined that the agency/facility meets every standard provision regarding evidence protocol and forensic medical examinations.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Standard Operating Procedure Investigations & Intelligence #454 4. ADOC Administrative Regulations #300 5. ADOC Duty Officer Report 6. National Institute of Corrections Investigations course certificate completions and continuing education credits <p><u>INTERVIEWS</u></p> <p>Agency Head or Designee</p> <p>Through the interview process, the Agency Head Designee indicated that every allegation of sexual abuse or sexual harassment is taken very seriously. Every allegation, administrative and criminal, is investigated thoroughly and immediately. The GDC does not rely on outside sources to conduct investigations. The policy regarding allegations being referred for investigation is on the agency website. All referrals of allegations of sexual abuse or sexual harassment for criminal investigation are documented.</p> <p>Investigative Staff</p> <p>Throughout the interview process, investigative staff indicated that allegations were investigated. The agency/facility investigates both administrative and criminal allegations.</p> <p><u>PROVISIONS</u></p> <p>Provision (a)</p>

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

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

The PAQ reflects there were 264 allegations of sexual abuse or sexual harassment in the past twelve months.

The PAQ indicates that zero forensic exams were completed in the past twelve months. However, had there been a need for forensic examinations, they would have been conducted by SAFE/SANE personnel at One Place Family Justice Center, 530 S Lawrence Street, Montgomery, AL 36104; #334-262-7378.

Provision (b)

The facility reported on the PAQ that the agency has a policy and practice in place that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.

The agency employs trained peace officer staff who have the authority to conduct sexual abuse/sexual harassment investigations. The ADOC Law Enforcement Services Division manages all investigations. All LESD Investigators and staff officers are trained peace officers. All substantiated criminal investigations are referred to the district attorney for prosecution. LESD completes administrative investigations.

The facility documents all allegations in a Duty Officer Report (DOR), which are either followed up through the administrative or criminal investigation process. LESD investigates the criminals and then refers them to the local district attorney's office for prosecutorial consideration. The policy and processes are published on the agency website, as verified by the Auditor.

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 7, Section C, 5, LESD is responsible for notifying the inmate whether the allegation has been determined to be substantiated, unsubstantiated or unfounded.

Provision (c)

	<p>As stated in Provision (a), the agency/facility refers all investigations to the Alabama Department of Corrections (ADOC) Law Enforcement Services Division (LESD).</p> <p>Provision (d)</p> <p>An auditor is not required to audit this provision.</p> <p>Provision (e)</p> <p>An auditor is not required to audit this provision.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every standard provision that addresses policies to ensure referral of allegations for investigations.</p>
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115.31	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. Training Curricula 4. What Staff Should Know About Sexual Misconduct with Inmates Pamphlet 5. Annual Staff Training Records 6. PREA Test 7. PREA Information Board 8. IPCM Training 9. Staff Training Meetings, Signature Page <p>OBSERVATIONS</p> <p>During the on-site facility tour, the Auditor observed a bulletin board that depicted various aspects of the PREA standards. It contained multiple items regarding PREA, such as terminology, how to report, zero tolerance, the inmate's right to be free from sexual abuse and sexual harassment, and #6611 (which is the number the inmates dial to report any incident of sexual abuse).</p> <p>INTERVIEWS</p> <p>Random Staff</p> <p>Through the interview process, the facility staff recalled:</p>

1. Participating in initial PREA training when they were hired before they were allowed to have contact with inmates.
2. Participating in annual training, in-service PREA training, as well as additional shift turnout training.
3. Being trained in the ten elements of this standard.

PROVISIONS

Provision (a)

The facility has reported on the PAQ that all employees who may have contact with inmates receive training in the following areas:

1. Zero tolerance policy for sexual abuse and sexual harassment.
2. How to fulfill their responsibilities under the agency's policies and procedures for the prevention, detection, reporting, and response to sexual abuse and sexual harassment.
3. Inmates' right to be free from sexual abuse and harassment.
4. The right of both inmates and employees to be free from retaliation for reporting sexual abuse and harassment.
5. The dynamics of sexual abuse and sexual harassment within a confinement setting.
6. Common reactions of victims of sexual abuse and sexual harassment.
7. How to detect and respond to signs of threatened or actual sexual abuse.
8. How to avoid inappropriate relationships with inmates.
9. Effective and professional communication with inmates, including those who are lesbian, gay, bisexual, transgender, intersex, or gender nonconforming.
10. Compliance with relevant laws regarding the mandatory reporting of sexual abuse to outside authorities.

During interviews, all (100%) random staff acknowledged they had received training on the ten items listed in the ADOC policy for this standard.

On the PAQ, the facility reported that all employees who may have contact with inmates are trained on the ten items listed in their policy.

The Auditor reviewed the PREA curriculum and training materials. The core training materials contain all ten of the elements outlined in this provision. Each element is covered in detail in the training, which has incorporated numbered training elements to facilitate the retention of the required elements. The training's level of complexity and robustness will depend on the employee's classification, with specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed 87 staff training records conducted with staff from various categories. Each record reviewed contained the relevant documentation to show the staff had met their initial PREA requirements. In addition, the Auditor reviewed the signed attendance sheets for the most recent PREA training, which were confirmed by staff signatures. Each employee acknowledged receiving the PREA training.

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

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

The Auditor reviewed 87 staff training records. Each record contained all relevant documentation indicating that the staff had met their initial PREA requirements. In addition, the Auditor reviewed all the sign-in sheets for PREA refresher training for the past twelve months, which were confirmed by staff signatures, and each employee acknowledged receiving PREA training.

Provision (b)

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

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

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

Provision (c)

Of the 87 staff records reviewed, the documentation showed that all 87 staff (100%) have received PREA training in the past twelve months.

A tri-fold pamphlet is distributed to staff entitled PREA, Prison Rape Elimination Act, What Staff Should Know About Sexual Misconduct with Inmates. This pamphlet addresses the major components of PREA, definitions of Sexual Abuse and Sexual Harassment, as well as other issues for staff to consider.

The ADOC developed a small pocket-sized spiral notebook, entitled Prison Rape Elimination Act (PREA), A Trauma-Informed Guide for First Responders. This spiral

	<p>notebook is made of laminated plastic, with tabbed sections for easy review. The seven sections are:</p> <ol style="list-style-type: none"> 1. Intro to PREA 2. Definitions of Sexual Abuse and Sexual Harassment 3. PREA Components 4. Prevention 5. Detection 6. Response 7. Summary/Resources <p>Provision (d)</p> <p>PREA training requirements mandate that attendance at all PREA-required training be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. The auditor observed a copy of these receipts in every file reviewed. The receipts contained various dates, which reflected separate training sessions.</p> <p>When a receipt for training material was not required, staff would sign-in on a Training sheet, verifying their attendance at the required training. The Auditor reviewed copies of each training session for the past twelve months, reflecting training completed by staff.</p> <p>CONCLUSION:</p> <p>Based on the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every standard provision regarding employee training policies.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Administrative Regulation #216 4. Contractor Training Records 5. Volunteer Training Records

6. Training Curricula Volunteer/Contractor Training

INTERVIEWS

Volunteer Interview

Through the interview process, a volunteer recalled having PREA training before being allowed to work with inmates. The volunteer stated that the training was specific to the volunteer's role and responsibilities in the facility. When the Auditor questioned the volunteer about their knowledge of PREA, they were able to identify what PREA was and, more importantly, what the volunteer's role or responsibility if confronted with a situation of sexual abuse or sexual harassment.

Contractor Interview

Through the interview process, a contractor recalled having PREA training before being allowed to work with inmates. The contractor stated the training was specific to the contractor's role and responsibilities in the facility. When the Auditor questioned the contractor about knowledge of PREA, the contractor was able to identify what PREA was and, more importantly, what the contractor's role or responsibility if confronted with a situation of sexual abuse or sexual harassment.

PROVISIONS

Provision (a)

The facility reported on the PAQ that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The facility reported 31 contractors and 336 volunteers who have contact with inmates who have been approved to enter the facility. However, the numbers who actually enter the facility and have contact with the inmates are significantly lower. This was confirmed through the interview process with the contractors and volunteers.

The Auditor reviewed training documentation for 25 volunteers and 24 contractors. Each of the records had documentation for completion of the annual PREA training.

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

The policies that address this provision are:

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, K, 8, indicates the IPCM is responsible

for ensuring all volunteers and contractors at their facility have received appropriate training.

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

Provision (b)

The facility reported on the PAQ that the level and type of training provided to volunteers and contractors are based on the services they provide and the level of contact they have with inmates. All volunteers and contractors have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This was verified through the interview process with contractors and volunteers.

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

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

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

Provision (c)

The facility reported on the PAQ that the agency maintains documentation confirming that volunteers and contractors understand the training they have received.

As indicated in Provision (b), the facility reported copies of the acknowledgment page from the PREA training are retained in each volunteer and contractor file. This provision requires the facility/agency to maintain documentation confirming that volunteers and contractors received and understood the training they have received.

The Auditor reviewed the sign-in sheets from the PREA training sessions for the past twelve months. Each sign-in sheet reflected acknowledgment signatures from contractors and volunteers for the PREA training they received.

	<p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined the agency/facility meets every provision of the standard that addresses policies regarding volunteer and contractor training.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. Inmate Prison Rape Elimination Act Training Curriculum 4. ADOC Women's Services Inmate Handbook, dated November 1, 2017 5. Inmate Orientation Material on Sexual Assault 6. Inmate Receipt of PREA/Acknowledgment 7. What You Should Know About Sexual Abuse and Assault Pamphlet 8. PREA Posters 9. Misc. Training Materials 10. Posters and other Visual Aides/Spanish/Low-Vision Reading Materials 11. Outside Confidential Support Service Agency Posting 12. Inmate PREA 30-day Education Attendance Sheets 13. Inmate PREA Education Chart Spreadsheet with Dates <p><u>OBSERVATIONS</u></p> <p>During the on-site review, the Auditor observed PREA-related information posted on the walls, explaining sexual abuse and sexual harassment and how to report both throughout the facility. The facility has PREA information posted on the walls, i.e., the hotline numbers to report sexual abuse to the ADOC PREA Unit (internal reporting), as well as One Place Family Justice Center (external reporting), Zero Tolerance, etc. Outside Confidential Support Services Agency information and PREA-related information was posted in each living unit near the telephones for easy accessibility.</p> <p>The ADOC Women's Services Inmate Handbook, the PREA Inmate Information Guide Brochure, the PREA video Discussing PREA, as well as the PREA postings were observed during the on-site tour of the facility by the Auditor. The Auditor reviewed written materials in both English and Spanish. Braille is also available. The Discussing Prison Rape Elimination Act video is in English and Spanish with closed captions and American Sign Language.</p>

INTERVIEWS

Intake Staff

Through the interview process, intake staff acknowledged that inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment upon arrival.

Furthermore, the intake staff confirmed that within 15 days of intake, the agency/facility provides comprehensive education to inmates either in person or through video regarding:

1. Their right to be free from sexual abuse and sexual harassment.
2. Their rights to be free from retaliation for reporting such incidents.
3. ADOC policies and procedures for responding to such incidents.
4. How to make a report verbally, in writing, by third party, or anonymously

Through the interview process, intake staff acknowledged that PREA-related education and training are provided to all inmates upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.

Through the interview process, intake staff indicated that inmate education is in formats accessible to all inmates, including but not limited to those who are limited in English proficiency, hearing impaired, vision impaired, cognitively impaired, and those with limited reading skills.

During interviews with intake staff, it was confirmed that all inmates who enter the facility are provided with an Inmate Handbook upon admission. The inmate signs the acknowledgment form which is retained in the inmate record. Further the intake staff indicated the inmates receive their PREA training immediately upon arrival, prior to their unit assignment. The inmates receive more in-depth PREA education during orientation in the weeks following their arrival.

Random Inmate

Through the interview process, random inmates acknowledged receiving information explaining how to report incidents or suspicions of sexual abuse or sexual harassment.

During the random inmate interviews, 100% of the inmates remembered receiving written PREA materials and an Inmate Handbook upon arrival. All the interviewees reported the material they received, including information about the facility's zero-tolerance policy and ways to report.

During interviews, inmates confirmed they watched a video as part of their orientation process. Discussing PREA,

PROVISIONS

Provision (a)

According to the PAQ, the facility reported that inmates receive information at the time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This information is not intended to be comprehensive, but an overview of the PREA standards, addressing important topics to make the inmates safer until they can be given a Comprehensive PREA education by staff. The intake staff verified this.

According to the PAQ, the facility reported that 671 inmates were admitted during the past twelve months, and 100% of them received PREA information at intake. The intake staff verified this.

The Auditor observed the Inmate Handbook, the inmate orientation material, the PREA pamphlet, and the PREA posters during the on-site tour of the facility. The Auditor reviewed written materials in both English and Spanish.

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

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

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

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

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

Provision (b)

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

The PAQ indicates that during the past twelve months, there were 671 inmates admitted to the facility whose length of stay was more than thirty days. The PAQ also reflected that all inmates were provided the PREA information, which included their right to be free from sexual abuse, as well as the policies and procedures for reporting. Per the PAQ, 100% of the inmates admitted to their facility in the past twelve months received the mandated information.

Provision (c)

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

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

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

Provision (d)

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

	<p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 13, B, 1, c, requires that the IPCM provide all inmates accessible educational formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service.</p> <p>The various training elements provided to the inmate population range from PREA orientation video and documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish.</p> <p>Provision (e)</p> <p>As stated in previous provisions, all inmates are required to sign the ADOC Administrative Regulations #454-A, Inmate Awareness Acknowledgment. A copy of this acknowledgment is scanned and retained in the inmate file as documentation.</p> <p>As stated in provision (a), a review of forty inmate records was conducted. The signed acknowledgment was in every record.</p> <p>The ADOC has a database to track if an inmate has participated in the mandated PREA training. The database can conduct a query by inmate name and facility to verify whether an inmate has received training.</p> <p>Provision (f)</p> <p>ADOC, and the facility ensure the inmates receive crucial education about sexual abuse and sexual harassment. Using varying formats, the inmate population receives valuable information in user-friendly, comprehensible ways. The various delivery systems are Inmate handbook, which specifically lays out the prevention of Sexual Violence, zero tolerance policy and includes multiple methods inmates can seek assistance regarding sexual violence.</p> <p>ADOC created a variety of PREA posters in both English and Spanish. These posters are different throughout the facility so as not to become easy to overlook. They are posted in every area of the facility. During the on-site tour, the Auditor observed these posters in every room throughout the facility.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard for inmate education.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
2. ADOC Administrative Regulation #454
3. Specialized Training Curriculum
4. Training Certificates for Investigators

INTERVIEWS**Investigative Staff Interviews**

Through the interview process, investigative staff confirmed participation in and successful completion of special investigator training. The training included proper use of Miranda and Garrity warnings and conducting Sexual Abuse/Sexual Harassment investigations in confinement settings.

Provision (a)

The facility reported on the PAQ that agency policy requires that investigators be trained in conducting sexual abuse investigations in confinement settings. Investigative staff verified this.

According to the PAQ, the ADOC currently employs thirty-six PREA investigators statewide. The Auditor reviewed training certificates for each investigator assigned to the state area of the facility, and the Moss Group provided the Specialized Investigation Training certificates. The training records reflected the required training items in addition to various other courses such as: Trauma-Informed Sexual Assault, Human Trafficking, Prison Rape and Sexual Assault Investigations. Additionally, the fifty-two IPCMs across the state have had specialized investigator training.

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

1. PREA Investigations
2. Collaborating with Victims Interviewing Techniques
3. Institutional Culture and Investigations

The policies that address this provision are:

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

1. Interviewing Sexual Abuse Victims

2. Proper Use of Miranda and Garrity Warnings
3. Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
4. Criteria and evidence required to substantiate a case for administrative action
5. Criteria and evidence required to substantiate a case for prosecutorial referral

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

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

1. Interviewing Sexual Abuse Victims
2. Conducting Sexual Abuse Investigations in confined settings
3. Investigated and collected Evidence for Inmate Sexual offense cases
4. Sexual Harassment and Custodial Sexual Misconduct

Provision (b)

The facility reported on the PAQ that investigator specialized training includes techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Investigative staff verified this.

As indicated in Provision (a), the investigative staff reported attending the required training and met all training requirements.

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

1. Course Introduction
2. PREA Investigations
3. Collaborating with Victims
4. Interviewing Techniques
5. Institutional Culture and Investigations

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

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 11, V, 2, mandates investigators and other ADOC employees with PREA

	<p>related responsibilities to receive additional training related to their roles to include, but not limited to:</p> <ol style="list-style-type: none"> 1. Interviewing Sexual Abuse Victims 2. Proper Use of Miranda and Garrity Warnings 3. Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting 4. Criteria and evidence required to substantiate a case for administrative action 5. Criteria and evidence required to substantiate a case for prosecutorial referral <p>Provision (c)</p> <p>The facility reported on the PAQ that the agency maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. Investigative staff verified this.</p> <p>As outlined previously in Provisions (a) & (b), ADOC Administrative Regulation 454 addresses this provision.</p> <p>The ADOC currently employs thirty-six PREA investigators statewide. The Auditor reviewed training certificates for each of the ADOC Law Enforcement Services Division PREA Investigators and the Specialized Investigation Training certificates provided by the Moss Group.</p> <p>Provision (d)</p> <p>The Auditor is not required to audit this provision.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard that addresses policies regarding specialized training: investigations.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. Training Records of Medical and Mental Health Practitioners 4. Specialized Training Curricula

INTERVIEWS

Facility Head

Through the interview process, the Facility Head indicated that medical and mental health care practitioners received general and specialized PREA training.

Medical Staff

Through the interview process, medical professionals acknowledged they had received the general PREA training and PREA training specifically designed for medical and mental health practitioners.

Mental Health Staff

Through the interview process, mental health staff acknowledged they had received the general PREA training as well as PREA training specifically designed for medical and mental health practitioners.

PREA Compliance Manager (PCM)

Through the interview process, the PCM confirmed that medical and mental health care practitioners employed by the agency/facility also receive training mandated for employees by §115.31.

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. There are 115 medical and mental health care practitioners who work regularly at this facility. They have all received the training required by agency policy. Reviewing the lesson plan/training materials provided demonstrates compliance with this training requirement. Reviewing training records and the interview process the Auditor confirmed that all training requirements have been met.

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

1. How to detect and assess signs of sexual abuse and harassment.
2. How to preserve physical evidence of sexual abuse.
3. How to respond effectively and professionally to victims of sexual abuse and harassment.
4. How and to who to report allegations or suspicions of sexual abuse and harassment
5. Recognizing the special medical and mental needs of all inmates
6. Factors to consider in an inmate's risk of sexual victimization.

	<p>7. Training shall be documented to denote employee understanding of material and verified through employee signature.</p> <p>Provision (b)</p> <p>N/A - All medical staff are prohibited by procedures from performing forensic examination on sexual abuse victims.</p> <p>Provision (c)</p> <p>The facility reported on the PAQ that the agency maintains documentation showing that medical and mental health practitioners have completed the required training.</p> <p>As indicated in Provision (a), through staff interviews and a review of the training documents by the Auditor, each assigned staff member has attended the required training and met all training requirements. All training documentation is retained in the employee file as needed.</p> <p>Provision (d)</p> <p>The facility reported on the PAQ that medical and mental health care practitioners working at the facility also receive training mandated for employees, contractors, and volunteers. This was verified through the interview process with the medical and mental health staff.</p> <p>The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for ADOC employees, contractors, and volunteers as outlined in policy and PREA standards. In addition to specialized training, the sign-in sheets confirm that the contracted medical staff received the general PREA training mandated for all ADOC employees.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of the available evidence, the Auditor has determined that the agency/facility meets every provision of the standard which addresses policies regarding specialized training: medical and mental health care.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454

3. ADOC Administrative Regulation #637
4. ADOC Form 454-C, Classification PREA Risk Factors Checklist
5. ADOC Form 454-K, PREA Risk Assessment
6. Risk Assessment Checklist
7. Inmate Initial Risk Assessment Records.
8. Inmate Risk 30-Day Reassessment Records.

INTERVIEWS

PREA Director (PD)

Through the interview process, the PD indicated that medical staff, mental health staff, classification staff, and PCM could access the screening information collected during intake. All information is limited to a need-to-know basis for staff, only for treatment, security, and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments. The PD also verified that the ADOC does not detain inmates solely for civil immigration purposes.

PREA Compliance Manager (PCM)

During the interview process, the PCM stated that the purpose of the risk screening assessment was to make the inmate safer inside the facility. Information is collected through risk screening that, when taken as a whole, can be analyzed by staff to determine if an inmate is at higher-than-average risk for sexual victimization or abusiveness. It assists the staff of the institution in keeping inmates safer by housing potentially abusive inmates in a different area than those who are potential victims.

Risk Screening Staff

Through the interview process risk screening staff indicated the initial risk screening is completed within the first 24 hours after the inmate arrives. This initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. A second risk screening is completed within 30 days of the first risk screening. Additional screenings are also completed after a PREA allegation if the inmate leaves the facility and returns to the facility or new information becomes known regarding the possible safety of the inmate. Transgender inmates are risk assessed within 24 hours, within the first thirty days, and a minimum of every six months thereafter.

During the interview, risk screening staff indicated that inmates are not disciplined for refusing to answer questions during an assessment. It was reported they would prod to see the opposition to answering the question, and then another attempt to engage the inmate would follow. However, disciplinary action would not be taken if the inmate chose not to respond.

Random Inmate

Through the interview process, random inmates acknowledged being asked questions relative to their concern for sexual safety and if they felt like they were in danger of

being harmed. They remembered being asked questions about their sexual orientation, gender identity, if they had ever been sexually victimized, and if this was their first incarceration. They reported having their initial risk assessment within 24 hours of arriving at the facility and their 30-day risk assessment within a few weeks of arriving at the facility.

PROVISIONS

Provision (a)

On the PAQ, the facility reported there is a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abuse toward other inmates.

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

The Auditor reviewed thirty inmate records. Those records showed that all thirty inmates completed their initial risk assessment within the required 72 hours.

The policies that address this Provision are:

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

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

Provision (b)

The facility reported on the PAQ that policy states inmates are screened for risk of sexual victimization or risk of abusing other inmates within 72 hours of arrival.

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

The Auditor reviewed the PAQ, which indicated that in the past 12 months, 100% or 671 inmates were screened for the risk of sexual victimization or sexual abusiveness within 72 hours of their entry into the facility.

A list of inmates' arrival and evaluation dates demonstrates compliance with this standard. Using this list, the Auditor reviewed random inmate files to ensure they received the training and completed it satisfactorily. The files represented inmates from various housing units and diverse ethnic and racial backgrounds. All the records reviewed confirmed that the initial screening occurred within 72 hours of arrival.

As Provision (a) states, the Auditor could specifically question staff about the required questions. The intake staff replied that all the PREA-related questions are asked during initial intake and ongoing classification screenings.

Provision (c)

On the PAQ, the facility reported that the risk assessment was conducted using an objective screening instrument. The Auditor reviewed a copy of the intake form and screening assessment form.

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

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

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

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

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

Provision (d)

The facility reported on the PAQ that their risk screening instrument includes all the

elements of this Provision.

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

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

The assessment scoring is one point for each yes answer given to a question or part of a question. If a question has more than one part, then one point is given for each part of the question that is answered with a yes. An example would be question 4. If an inmate has a developmental disability and a physical disability, that would be a total of 2 points for the question.

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

Provision (e)

The facility reported on the PAQ that the initial risk screening considers prior acts of sexual abuse, previous 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. This was confirmed by risk screening staff during the interview process. The questions referring to those things were also noted by the Auditor during the document review.

Through the interview process, risk screening staff acknowledged monitoring the inmate population and re-assessing inmates when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may have a bearing on the inmate's risk of victimization or abusiveness.

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

addressed include:

1. Prior acts of sexual abuse
2. Prior convictions for violent offenses
3. History of prior institutional violence or abuse

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

Provision (f)

The facility reported on the PAQ that inmates are reassessed within thirty days of arrival at the facility. Additionally, the inmate will be reassessed for risk of victimization or abusiveness based on any additional relevant information received by the facility after the initial screening. This information was confirmed by the screening staff during the interview process.

The Auditor reviewed the PAQ, which indicated that within the past 12 months, 671 inmates remained in the facility longer than 30 days from arrival. The facility reported that 100% of the 671 inmates were reassessed for the risk of sexual victimization or risk of sexual abuse of other inmates within 30 days of their entry into the facility.

Of the thirty inmate records that were reviewed by the Auditor, the initial risk assessment was completed within 72 hours of arrival 100% of the time. Of the thirty inmates, thirty were reassessed within thirty days.

Provision (g)

On the PAQ, the facility reported that an inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. This was verified by the risk screening staff through the interview process.

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

1. A referral
2. A request
3. An incident of sexual abuse, or

A receipt of additional information that may have some bearing on the inmate's risk of victimization or abusiveness.

The policy that addresses this Provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 14, F, 5, which specifies that all inmates shall be reassessed for risk of sexual

victimization and abusiveness within thirty days of intake. In addition, upon receipt of additional information that bears on an inmate's risk of sexual victimization or abusiveness, additional screening will be conducted.

Provision (h)

The facility reported on the PAQ inmates are not disciplined for refusing to answer or for not disclosing complete information in response to questions asked during the assessment. This was verified by the risk screening staff during the interview process.

All individuals who conduct risk screenings acknowledged, during formal interviews and informal conversations, that inmates are not disciplined for not answering questions on the screening instrument. They indicated they were willing to explain why the question was essential and how the information obtained could help the inmate be safer. Still, if, after the explanation, the inmate did not want to answer the question, they would move to the next question. They indicated they would ask the question at another time if the opportunity presented itself.

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

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

Provision (i)

The facility reported on the PAQ that they control the dissemination within the facility of responses to questions asked during risk screening to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

Through a formal interview and informal conversations, the PREA Director (PD) indicated that medical staff, mental health staff, classification staff, intake staff, and the PCM have access to the screening information collected during intake. All information is limited to a need-to-know basis for staff and is only for the purpose of treatment, security, and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments. The risk screening staff echoed this information.

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

The policy that address this Provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p.

	<p>16, F, 8, mandates there will be appropriate controls on the dissemination of screening information as to ensure each inmate's sensitive information is not exploited.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility does meet every Provision of the standard for Screening for Risk of Sexual Victimization and Abusiveness.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC SOP Number 454-5 4. Form 454-C, Classification PREA Risk Factors Checklist 5. ADOC Form 454-K, PREA Risk Assessment 6. ADOC, PREA Director memo, dated February 20, 2020, Transgender Reassessment and Housing. 7. Inmate Records 8. Intake Risk Assessment Checklist 9. Risk Assessment Checklist 10. Housing Designation Spreadsheet <p><u>INTERVIEWS</u></p> <p>PREA Director (PD)</p> <p>Through the interview process the PD indicated according to policy, the gender identification of each inmate is initially determined by their legal sex assignment, generally at birth; however, from that point forward every inmate is individually assessed and classified to ensure the safety of the inmate, as well as the safety of the inmate population.</p> <p>Through the interview process, the PD indicated the transgender or intersex inmates' views of their safety are given significant weight when making decisions regarding housing placement or programming assignments. Further regular classification reassessments are conducted a minimum of every six months or if the inmate is involved in an incident of a sexual nature. Additionally, these inmates are interviewed</p>

further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.

Staff Responsible for Risk Screening

Throughout the interview process, the staff responsible for risk screening indicated that each inmate was individually evaluated because of the assessment procedures being utilized. Staff not only use the assessment procedures in place, but additional consideration is given to the discussions with each inmate when making classification and housing decisions.

Institutional PREA Compliance Manager (IPCM)

Through the interview process, the IPCM revealed that neither the agency nor the facility are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates. All acknowledged that all LGBTI inmates are housed within the general population unless specific issues are present, and only then will the appropriate staff meet with the inmate and address the concerns.

Through the interview process, staff who are responsible for risk screening indicated transgender or intersex inmates' views of their safety are taken into thoughtful consideration when determining housing placements and programming assignments. In addition, the staff responsible for risk screening indicated that because of the assessments utilized, each inmate is evaluated individually.

Through the interview process, the IPCM indicated that every assessment completed by staff is factored into the placement and programming of each inmate. Further, the inmate's risk levels, housing, and programming assignments are guided with the use of these various assessments, ensuring that every inmate, especially those at elevated risk of being sexually victimized, are separated from those at considerable risk of being sexually abusive.

Transgender Inmate

Through the interview process, transgender inmates reported being satisfied with their showering accommodations.

Through the interview process, transgender inmates reported they were housed in the general population and were not currently, nor had they ever been, housed in a housing unit designed for only transgender inmates. The Auditor reviewed an inmate roster and confirmed that all transgender inmates were housed in the general population.

PROVISIONS

Provision (a):

The facility reported on the PAQ that the agency/facility uses information from the risk screening required to inform housing, bed, work, education, and program

assignments to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The PCM verified this.

After reviewing thirty inmate records, the Auditor verified the information from these assessments utilized in the various classification decisions made by staff.

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

Provision (b)

The facility reported in the PAQ that the agency/facility makes individualized determinations about how to ensure the safety of each inmate.

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

Provision (c)

The facility reported on the PAQ that in making housing and programming assignments, the facility shall consider on a case-by-case basis whether a placement of a transgender or intersex inmate would present management or security problems.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, f, requires that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, ADOC shall consider on a case-by-case basis whether the placement would ensure the inmate's health and safety, and whether the placement would present management or security concerns.

Provision (d)

The facility reported on the PAQ that placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to safety experienced by the inmate. The risk screening staff verified this. Transgender inmates also verified this.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p.

17, F, 10, d, advises that placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

Provision (e)

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, e, shows that a transgender or intersex inmate's view concerning his or her safety shall be given thoughtful consideration.

Provision (f)

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, g, which reveals transgender and intersex inmates shall be allowed to shower separately from other inmates.

As previously identified, each housing area has bathrooms with single shower stalls that are private and separate. The random staff who were interviewed also indicated that if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates. It was noted that the alternate shower time would be thirty minutes before or after other inmates can shower.

Provision (g)

The facility reported on the PAQ that unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect lesbian, gay, bisexual, transgender, or intersex inmates, the agency always refrain from placing lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely based on such identification or status. The PC verified this.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 17, F, 10, c, specifies the agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely based on such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment to protect such inmates.

CONCLUSION

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

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation 454 3. ADOC Administrative Regulation 435 4. Housing Designation Spreadsheet 5. Segregation Log/Holding Cell/Crisis Cell 6. Post Allegation Protective Custody Form <p><u>INTERVIEWS</u></p> <p>Facility Head or Designee</p> <p>During the interview, the facility head reported that every placement in segregated housing, regardless of reason, is documented and reviewed at least every thirty days.</p> <p>Staff Who Supervise Inmates in Segregated Housing</p> <p>Through the formal interview process and informal conversations, Segregated Housing Staff reported that they had not observed a victim of sexual abuse or retaliation to be involuntarily placed in the Segregation Unit.</p> <p>Inmates in Segregated Housing</p> <p>At the time of the on-site audit, there were no inmates in segregated housing because they had alleged sexual abuse. At the time of the on-site audit, all inmates in the segregated unit were either there administratively or due to a disciplinary report.</p> <p>PREA Compliance Manager (IPCM)</p> <p>Through the interview process, the IPCM indicated there have not been any inmates placed in protective custody or involuntary administrative/punitive segregation in the past twelve months for risk of sexual victimization or because they were a victim of sexual abuse.</p> <p><u>PROVISIONS</u></p> <p>Provision (a):</p> <p>The facility reported on the PAQ that the agency has a policy prohibiting the placement of inmates at elevated risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from abusers. The facility reported on the PAQ that no inmates were</p>

placed into involuntary administrative or punitive segregation in the past twelve months per this standard. The IPCM indicated there had not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates were interviewed relative to this standard. This Facility Head verified this.

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

Provision (b)

The facility reported on the PAQ that in the unlikely likelihood that an inmate is placed in segregated housing for this purpose, the inmate will have access to programs, privileges, education, and work opportunities to the greatest extent possible. The Facility Head verified this.

As stated in Provision (a), zero inmates have been placed into involuntary administrative or punitive segregation per this standard during the past twelve months. The PAQ reflects this information.

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, J, 2, indicates that inmates placed into segregated housing as the only means of protecting such an inmate shall have access to all programs, privileged, education and work opportunities, to the extent possible. It shall only be until an alternative means of separation from the likely accuser can be arranged, a time period not to ordinarily exceed thirty days. In these cases, the facility shall document the basis for the facility's concerns for the inmate's safety and why no alternative means of separation can be arranged.

Provision (c)

The facility reported on the PAQ that in the past 12 months, zero inmates at risk of sexual victimization were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. The IPCM verified this.

As stated in Provision (a), zero inmates have been placed into involuntary administrative or punitive segregation during the past twelve months by this standard. The PAQ reflects this information. Consequently, no inmates were held longer than thirty days.

Provision (d)

The facility reported on the PAQ that during the past twelve months, zero inmates have been placed into involuntary administrative or punitive segregation by this standard, specific to a period longer than 30 days, while awaiting alternative placement. Consequently, no inmates were interviewed regarding this provision. This

	<p>was verified by the staff who supervise inmates in segregated housing.</p> <p>Provision (e)</p> <p>The facility reported on the PAQ that zero inmates have been placed into protective custody during the past twelve months by this standard. The IPCM confirmed this. Consequently, no inmates were interviewed regarding this provision.</p> <p>As stated in Provision (a), during the past twelve months, zero inmates have been placed into involuntary administrative or punitive segregation per this standard. The PAQ reflects this information.</p> <p>The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, J, 3, states inmates placed into segregated housing as the only means to protect such an inmate shall be afforded reviews by the facility every thirty days to determine whether there is a need to continue separation from the general population.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all available evidence, the Auditor has determined the agency/facility meets every provision of the standard relative to protective custody.</p>
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115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided 2. ADOC Administrative Regulation #454 3. ADOC, Female Services Inmate Handbook, dated November 1, 2017 4. Inmate Legal Mail Envelopes 5. MOU with Securus for Hotline services 6. NO MEANS NO Poster <p><u>OBSERVATIONS</u></p> <p>During the on-site portion of the audit, the Auditor observed the NO MEANS NO poster in both English and Spanish throughout the facility. These posters were observed in each housing unit, common areas, main hallways, intake holding area, dining room, etc. In addition, the Auditor observed boxes with PREA in bold lettering located in the facility. While interviewing mailroom staff, the Auditor was informed that inmates can</p>

request and obtain envelopes, which are self-addressed, to the Director of the LESD so that inmates can provide confidential information relative to PREA utilizing the legal mail process.

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

INTERVIEWS

Institutional PREA Compliance Manager (IPCM)

Throughout the interview process, the IPCM reported that inmates could report abuse or harassment to a public or private entity.

Inmates can report to the State Board of Pardons and Paroles, Office of Victim Services, as a reporting entity outside the facility/agency.

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

Random Staff

Throughout the interview, the staff acknowledged they would accept a report or allegation from the inmate and provide it to their supervisor for further direction. They also indicated inmates can report in diverse ways, including telling a staff member, calling the PREA telephone number posted throughout the facility, or telling a family member.

Inmates can report allegations of sexual abuse and sexual harassment verbally, in writing, anonymously, and from third parties.

Through the interview process, staff acknowledged there are multiple methods for staff to report sexual abuse of inmates who were identified privately. All staff indicated they may report privately to their supervisor, another supervisor, IPCM, or PREA Director.

Random and Targeted Inmates

Through the interview process, the inmates reported they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the hotline number, contacting the PCM, having family members contact the institution, and contacting a staff member.

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency provides multiple internal ways for inmates to report privately:

1. Sexual abuse and sexual harassment
2. Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment
3. Staff neglect or violation of responsibilities that may have contributed to such incidents

The PCM verified this during the interview process.

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

Provision (b)

The facility reported on the PAQ that the agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. The PCM confirmed this during the interview process.

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

PREA and Investigations and Intelligence Hotline (*6611) (This call is recorded and archived because it is the 3rd party and the in-house hotline.)

The ADOC Crime Tip Hotline is designated as 1-866-293-7799, Option 4

ACAR Hotline designated as 1-800-639-4357 (This call is NOT recorded or monitored because it serves as the confidential support line.)

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

closed, it must be available online and unlocked.

Provision (c)

The facility reported on the PAQ that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. The staff promptly documents any verbal reports of sexual abuse and sexual harassment. The random staff verified this during the interview process.

The policies that address this provision are:

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

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

A review of the inmate handbook published September 25, 2017, p. 23, states, "All reports are investigated and are confidential - the ADOC and its staff want to keep you safe!"

Provision (d)

PAQ indicates the agency provides a method for staff to report sexual abuse and sexual harassment of inmates privately. The PCM verified this during the interview process.

As identified in Provision (c), this matter is addressed in ADOC Administrative Regulation (AR) 454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, V. Procedures, Section H.

CONCLUSIONS:

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

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard

Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation.
2. ADOC Administrative Regulation #454
3. ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023

INTERVIEWS

Random Staff

Through the interview process with staff, it was reported that allegations of sexual abuse and sexual harassment are grievable issues.

Random Inmates

Through formal interviews and informal conversations with inmates, it was reported that allegations of sexual abuse and sexual harassment are grievable issues.

PROVISIONS

Provision (a):

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

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

According to the PAQ, the facility has received 81 grievances in the past twelve months. All 81 grievances were resolved in 90 days after being filed.

The Auditor reviewed ADOC Administrative Regulation #454 and the Inmate Handbook, both of which indicate that ADOC, as an agency, has an inmate grievance procedure in place for inmates.

Provision (b)

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

The policies that address this provision are:

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

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

Provision (c)

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

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

The policies that address this provision are:

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

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

Provision (d)

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

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

Provision (e)

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

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

The policy that addresses this provision is ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 5, D., which indicates an inmate may obtain assistance from another inmate in preparing a grievance. An inmate may also get help from outside

resources, such as family members or attorneys. However, no person may submit a grievance on the inmate's behalf.

Provision (f)

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

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

The policies that address this provision are:

ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 10-11, AA, 1. Indicates the grievance process begins when an inmate submits a completed Inmate Grievance Form 406-A, Inmate Grievance Form. The grievance may be submitted in manual or electronic form. If the grievant indicates the grievance is an emergency, the IGO shall log, expedite, and forward emergency grievances to the Warden/ Designee. The Warden/Designee shall promptly determine if he or she agrees that the grievance qualifies as an emergency. If the matter qualifies as an emergency, the Warden/Designee shall immediately address and promptly document any such emergency and the responsive action taken. For allegations of sexual abuse or sexual harassment by another inmate, the emergency grievance shall be directed to the IPCM for resolution. Any grievance alleging physical or sexual abuse of an inmate by staff shall be directed to LESD for resolution. For allegations of sexual abuse or sexual harassment by another inmate or allegations of verbal, physical, or sexual abuse by staff, the Warden/Designee shall act as appropriate.

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

Provision (g)

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

The policy that addresses this provision is ADOC, AR406, Inmate Grievance Policy, dated August 1, 2023, p. 7, L, which indicates that Reprisals are prohibited. ADOC does not tolerate any form of retaliation by inmates or staff for using or participating in the grievance process. Such acts will be grounds for inmate disciplinary action,

	<p>staff corrective action, possible criminal investigation, and/or prosecution of inmates or staff.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding exhaustion of administrative remedies.</p>
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115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. MOU with Alabama Coalition Against Rape 4. PREA Posters 5. Alabama Advocacy Hotline 6. MOU with Outside Confidential Support Service Agency Advocacy Centers Contact Information <p><u>OBSERVATIONS</u></p> <p>During the tour of the facility, the Auditor observed the NO MEANS NO posters throughout the facility, in English and Spanish.</p> <p><u>INTERVIEWS</u></p> <p>Inmates</p> <p>During the interview, inmates indicated they knew of an outside confidential support services agency they could contact for emotional support. They also responded that they were familiar with the PREA hotline *6611, which is recorded and archived. Each responded that some information they provided might be given to the facility staff.</p> <p>Institutional PREA Compliance Manager (IPCM)</p> <p>During the interview process, the IPCM indicated that the facility has an MOU with an outside confidential support services agency.</p> <p>Representative from One Place Family Justice Center</p> <p>The Auditor spoke with a One Place Family Justice Center representative, 530 S Lawrence Street, Montgomery, AL 36104, #334-262-7378. Victim advocates are</p>

available to be present with the victim before, during, and after the examination. Additionally, the advocate conducts follow-up contacts with the victim to ensure aftercare is arranged and firmly in place.

PROVISIONS

Provision (a)

On the PAQ, the facility reported that it does provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. The IPCM verified this.

The facility provided the Auditor a listing from the Alabama Coalition Against Rape (ACAR) Member Crisis Centers, including the mailing address, as well as the office telephone number. The listing further broke down the contact information by county for utilization by respective facilities. A representative from One Place Family Justice Center, 530 S Lawrence Street, Montgomery, AL 36104, #334-262-7378, confirmed they provide services to the facility.

Provision (b)

During the facility tour, the auditor tested several payphones to gain access to the ADOC PREA hotline. Each time, the PREA hotline functioned appropriately. The phones are checked once each shift by an intermediate or higher staff member to ensure they are working to reach the PREA hotline easily.

A representative from One Place Family Justice Center, 530 S Lawrence Street, Montgomery, AL 36104, #334-262-7378, was advised that a victim advocate can be present with the victim before, during, and after the examination. The representative reported that One Place Family Justice Center staff are responsible for informing any victim that some information the victim shares with them may need to be provided to facility staff. This information may be medical and/or non-medical for institutional security, PREA investigation, and further medical and mental health services.

Provision (c)

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

CONCLUSIONS:

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

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC webpage links 3. ADOC Administrative Regulation #454 4. Reporting Forms for LESD 5. Website Publication Showing DOC PREA Email <p><u>INTERVIEWS</u></p> <p>Inmates</p> <p>During the interview, the inmates indicated they were aware of third-party reporting and would use it if necessary.</p> <p><u>PROVISIONS</u></p> <p>Provision (a)</p> <p>The ADOC has provided access to a third-party reporting process through its agency website. An individual wishing to report a PREA-related incident on the agency website can access this through the PREA link, located under the ADOC tab. Below is the PREA Director's name. Here is a link: Request an Investigation: http://www.doc.-state.al.us/PREA. This link allows for the initiation of a third-party request.</p> <p>ADOC has provided an additional access point for third-party reporting through its agency website. The agency website lets the individual wishing to report a PREA-related incident access this information through the PREA link under the "About ADOC" tab. Located below the PREA Director's name is a link that asks the individual if they would like to email their report, then providing the email address link: DOC.PREA@doc.alabama.gov.</p> <p><u>CONCLUSION:</u></p> <p>Based on the review and analysis of all the available evidence, the Auditor has determined that the agency/facility meets every standard provision regarding third-party reporting.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation
2. ADOC Administrative Regulation #454
3. ADOC Administrative Regulation 302

INTERVIEWS**Random Staff**

During the interview process, staff acknowledged this requirement and were able to articulate how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e., their supervisor, medical staff, etc. Revealing any information related to a sexual abuse report to anyone is prohibited unless it is needed for treatment, investigation, security, or management. All (100%) staff indicated that PREA-related allegations and reports go to the IPCM, who notifies the investigative staff.

Medical and Mental Health Practitioner

During the interview process, medical and mental health professionals were aware of this requirement and were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each verbalized their understanding of the policy and their rights and responsibilities. They all articulated that they were obligated to advise the victim (inmate) of the limitations of confidentiality due to the mandatory reporting law before the initiation of services.

Facility Head or Designee

During the interview process, the Facility Head acknowledged awareness of this requirement and the directive to report any abuse allegations to the appropriate agency, as required by law, as well as the PCM and agency investigators. The staff is to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The same reporting directive goes for retaliation or staff neglect as it relates to sexual abuse or sexual harassment.

PREA Director (PD)

During the interview process, the PD confirmed the facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigator.

PROVISIONS**Provision (a)**

The facility reported on the PAQ that the agency requires all staff to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The same reporting directive goes for retaliation or staff neglect as it relates to sexual abuse or sexual harassment. The Facility Head confirmed this through the interview process.

The policies that address this provision are:

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

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

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

Provision (b)

The facility reported on the PAQ that apart from reporting to designated supervisors or officials, staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions. This was verified by random staff during the interview process.

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

The Auditor reviewed a copy of the inmate's Informed Consent for Medical Services before treatment. The consent document releases and permits the medical or mental health care provider to provide pertinent information to individuals who need to know.

Provision (c)

The facility reported on the PAQ that medical and mental health practitioners are required to inform inmates of the practitioner's duty to report and the limitations of confidentiality at the initiation of services. Medical and mental health practitioners verified this during the interview process.

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, f, declares medical and mental health practitioners shall ensure all inmates are informed before the initiation of the service of the limits of their confidentiality and shall report information about sexual victimization to the facility IPCM.

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

The Auditor reviewed a copy of the inmate's Informed Consent for Medical Services before treatment. The consent document releases and permits the medical or mental health care provider to provide pertinent information to individuals who need to know.

Provision (d)

The facility reported on the PAQ that if the alleged victim is under 18 or considered a vulnerable adult under a State or local vulnerable person's statute, the agency reports the allegation to the designated State or local services agency under applicable mandatory reporting laws. The Facility Head verified this through the interview process.

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, g, mandates that any allegation of sexual abuse or sexual harassment involving a youthful inmate or a vulnerable adult inmate under a State statute, shall additionally be reported to the Alabama Department of Human Resources.

Provision (e)

The facility reported on the PAQ that the facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigator. The PREA Coordinator verified this through the interview process.

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

	<p>reported to the IPCM, PREA Director and the I & I investigator immediately, by AR302, Incident Reporting.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff and agency reporting duties.</p>
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115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. Transfer of Inmate due to Sexual Safety 4. Housing Placement (Housing Designation Log) 5. Coordinated Response Plan <p><u>INTERVIEW</u></p> <p>Facility Head or Designee</p> <p>During the interview, the facility head acknowledged that immediate action would be taken to protect the victim (inmate). Depending on what is needed to protect the victim, the victim might be moved to another area or another facility. The perpetrator, if known, would be placed in segregated housing.</p> <p>Random Staff</p> <p>Through the interview process, staff acknowledged that if they receive an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence. The first action would be to protect the inmate.</p> <p><u>PROVISIONS</u></p> <p>Provision (a)</p> <p>The facility reported on the PAQ that when the agency/facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. In the past twelve months, the agency/facility reported 260 determinations that an inmate was subject to a substantial risk of imminent sexual abuse. On average, each determination was addressed within 3 hours. This was</p>

	<p>confirmed through formal interviews and informal conversations with random staff and the Facility Head.</p> <p>The policies that address this provision are:</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section J, 1, indicates inmates at high risk for sexual victimization or those who report sexual victimization shall not be placed in involuntary administrative or punitive segregation unless there has been an assessment of all other available alternatives and a determination made that there are no other alternative available.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 10, Section K, 3, specifies the IPCM is responsible for recommending placement and/or transfer of inmates involved in reported incidents of sexual abuse and sexual harassment with the approval of the Warden or designee, and taking immediate action when an inmate is subject to a substantial risk of imminent abuse.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding agency protection duties.</p>
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115.63 Reporting to other confinement facilities	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Form 454-F, Reporting to Other Confinement Facilities 4. IPCM Memorandum 115.62, dated December 1, 2024 <p><u>INTERVIEWS</u></p> <p>Agency Head Designee</p> <p>Through the interview process, the Agency Head Designee confirmed that any notification received regarding a PREA incident, whether it be sexual abuse, sexual harassment, or staff sexual misconduct that occurred within any facility, will be investigated by the guidelines of the GDC.</p>

Facility Head

Through the interview process, the Facility Head indicated that once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately assigned for investigation. When an inmate reports sexual abuse or sexual harassment that occurred at another facility, the facility where it happened is notified as soon as possible, but no later than 72 hours.

PROVISIONS**Provision (a)**

The facility reported in the PAQ that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred.

The IPCM Memorandum 115.62, dated December 1, 2024, states that during the past 12 months, Tutwiler Prison for Women has had 3 incidents to report to other confinement facilities. However, Tutwiler Prison for Women hasn't received any reports of sexual harassment, sexual abuse, or sexual misconduct incidents from other confinement facilities.

Of the three incidents reported to other facilities, each was reported by one facility head to the other facility head within the 72-hour timeframe. LESD investigated all three incidents. After investigation, two were deemed unfounded, and one was still pending at the time of the on-site audit.

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

Provision (b)

The facility reported on the PAQ that the agency policy requires the facility head to provide such notification as soon as possible but no later than 72 hours after receiving the allegation. The Facility Head verified this.

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

Provision (c)

The facility reported on the PAQ that it documents that it has provided such notification within 72 hours of receiving the allegation. The facility reported it did not need to make any notification in the past twelve months. The Facility Head verified

	<p>this.</p> <p>The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, Section H, 1, d, indicates the Warden is responsible for notifying the other confinement facility and should do so using ADOC Form 454-F, Reporting to Other Confinement Facilities.</p> <p>Provision (d)</p> <p>The facility reported on the PAQ that its policy requires that allegations received from other facilities and agencies be investigated according to the PREA standards. In the past twelve months, the facility reported receiving zero allegations of sexual abuse from another facility. The Facility Head verified this.</p> <p><u>CONCLUSION</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding reporting to other confinement agencies.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. PREA First Responder Duty Card 4. PREA Pocket Guide for First Responders <p><u>INTERVIEWS</u></p> <p>Security Staff - First Responders</p> <p>Through the interview process, security staff first responders acknowledged training in the PREA process through annual in-service training, on the job training, and staff meetings.</p> <p>Security First Responders</p> <p>Through the interview process, non-security staff indicated they would notify security staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until security staff arrived. They verbalized the importance of, as well as their understanding of the need</p>

for confidentiality in all cases.

Staff

Through the interview process staff were consistently able to articulate to the Auditor, step-by-step, how to respond to a PREA incident. All staff were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident.

Inmates Who Reported Sexual Abuse

Through the interview process, inmates who reported sexual abuse reported:

1. The facility staff was responsive to them when they reported the incident.
2. Being referred for a forensic examination immediately.
3. Those who were referred for a forensic examination reported being offered a victim advocate.
4. The victim advocate was with them during the examination and helped them understand what was going to happen.
5. Not having to pay for any medical treatment.
6. 100% of the inmates reported they were not asked to take a polygraph test.
7. Being notified in writing of the results of the investigation

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency has a first responder policy for allegations of sexual abuse. The security and non-security first responders verified this.

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

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

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

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

The PAQ indicates there were 179 inmate-on-inmate sexual abuse or sexual assault cases. These allegations were investigated criminally. After the investigation, 130 allegations were deemed unfounded, 18 were unsubstantiated, and 29 were ongoing.

There were 27 cases of staff-on-inmate sexual abuse or sexual assault. These allegations were investigated criminally. After the investigation, 20 allegations were deemed unfounded, two were unsubstantiated, and five were ongoing. Prosecution was declined for all closed cases. In all sexual abuse cases, the alleged victim was offered medical and mental health services. Retaliation monitoring was conducted until the allegation was deemed unfounded, the victim was transferred, the victim was released, or the mandatory 90 days of monitoring had elapsed. All closed sexual abuse cases, except those deemed unfounded, underwent a sexual abuse incident team review within 30 days of the investigation's completion. In every closed case, the inmate was promptly notified in writing of the investigation results. In the past months, there were 48 allegations of sexual harassment. Of these, 28 involved inmate-on-inmate incidents and were investigated administratively. After the investigations, 20 were found to be unfounded, three were unsubstantiated, one was substantiated, and four are still ongoing.

Twenty allegations of staff-on-inmate sexual harassment were investigated criminally. During the on-site audit following the criminal investigation, 12 were deemed unfounded, five were found to be unsubstantiated, and three remained open.

In all resolved sexual harassment cases, the inmate received prompt written notification of the investigation results.

Zero forensic medical examinations were completed in the past twelve months. When forensic exams take place, they are completed by SANE personnel at One Place Family Justice Center, 505 S. Lawrence Street, Montgomery, AL 36104; 334-262-7378. Victim advocates are offered to all inmates who have SANE examinations.

Two hundred and twenty times, the first security staff member to respond to the report separated the alleged victim and the abuser.

Two-hundred-and-twenty times staff were notified within a time period that still allowed for the collection of physical evidence.

Two-hundred-and-twenty times the first security staff member to respond to the report requested that the alleged victim (and alleged abuser) not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

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

	<ul style="list-style-type: none"> • a. Ensure the victim(s), aggressor(s), and witness(es) are physically separated. • b. Protect and preserve the crime scene until appropriate steps can be taken to collect evidence. • c. Request the victim not bathe, wash, brush teeth, eat, drink, smoke, urinate or defecate. • d. Ensure the alleged aggressor does not bathe, wash, brush teeth, eat, drink, smoke, urinate or defecate. • e. If the first responder staff is not security staff, the responder should request the alleged victim not take any actions that would destroy evidence and notify security staff. • f. Do not show the alleged victim(s), aggressor(s), or witness(es) any evidence, such as but not limited to, pictures or video footage of the incident, and do not interview any of these parties on the specifics of the incident. • g. As soon as possible first responders shall notify the Shift Commander of the incident and draft an Incident Report. <p>Provision (b)</p> <p>Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past 12-months there were 206 allegations of sexual abuse and 28 allegations of sexual harassment.</p> <p>The PAQ indicates there were zero times the first responder was not a security staff member.</p> <p>The Auditor's review of the PREA training curriculum all staff, volunteers, and contractors received identifies whoever received the information first, as a First Responder, including staff, volunteers, and contractors. As a First Responder, these individuals are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, and relay any observations to the investigators, IPCM, or shift commander.</p> <p>CONCLUSION:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding staff first responder duties.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation
2. ADOC Administrative Regulation #454
3. PREA First Responder Card
4. PREA Pocket Guide for First Responders
5. Coordinated Response SOP

INTERVIEWS**Facility Head**

Through the interview process, the Facility Head confirmed that the coordinated response plan breaks down the various responsibilities of the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings, and on-the-job training.

PROVISIONS**Provision (a)**

The facility reported on the PAQ that they have developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse. The Facility Head verified this.

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

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

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

The policies that address this provision are:

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

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

	<p>and Harassment, dated January 4, 2016, p. 18, Section G, 2, the responsibilities of a Shift Commander upon learning of an allegation of a PREA-related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 18, Section G, 3, outlines the responsibilities of Medical and Mental Health care personnel upon learning of an allegation of a PREA-related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, Section H, 1, outlines the responsibilities of employees and staff when reporting an allegation of a PREA-related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 21, Section H, 2, outlines the steps for inmates to report an allegation of a PREA-related incident.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, 1, outlines the roles and responsibilities of the IPCM and investigators in investigations of inmate-on-inmate sexual abuse and staff-on-inmate sexual abuse and harassment.</p> <p>ADOC Administrative Regulation (AR) #454, Operations & Legal, regarding Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, Section I, 2, outlines the roles and responsibilities of the IPCM and investigators in investigating incidents of inmate-on-inmate sexual harassment.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding coordinated response.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Memorandum, Collective Bargaining and PREA Standard 115.66, dated 3/19/19.

	<p><u>INTERVIEW</u></p> <p>Agency Head or Designee</p> <p>During the interview, the Personnel Director indicated that corrections officers and other prison staff employed by the ADOC do not have a labor union and do not collectively bargain with them.</p> <p><u>PROVISIONS</u></p> <p>Provision (a)</p> <p>The facility reported on the PAQ, the State of Alabama does not enter into collective bargaining. The Agency Head Designee verified this</p> <p>The policy that addresses this provision is ADOC Memorandum, Collective Bargaining and PREA Standard 115.66, dated 3/19/19, from the agency Personnel Director, which states that corrections officers and other prison staff employed by the ADOC do not have a labor union. Therefore, the ADOC does not collectively bargain with corrections officers or other facility staff.</p> <p>Management does have the right to separate the inmate from a staff member who is the subject of an investigation. This separation can either temporarily reassign the employee, redirect the employee, or restrict the employee from the grounds during the investigation.</p> <p>The facility has not had any PREA-related incidents that required alleged staff sexual abusers not to have contact with any inmate pending the outcome of an investigation during the audit period.</p> <p>Provision (b)</p> <p>The Auditor is not required to audit this provision.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding preservation of ability to protect inmates from contact with abusers.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<u>DOCUMENTATION:</u>

1. Pre-Audit Questionnaire (PAQ) and supporting documentation.
2. ADOC Administrative Regulation #454
3. ADOC Form 454-D, Sexual Abuse/Harassment Retaliation Monitoring

INTERVIEWS

Agency Head or Designee

Retaliation monitoring is for a period of 90 days after an allegation. It begins the day of the allegation, for 90 days. If the allegation is deemed to be unfounded, the monitoring can stop. Anyone associated with the allegation in any way who is in fear of retaliation is monitored.

Facility Head or Designee

The Facility Head indicated multiple measures are used to protect inmates and staff from retaliation. These measures include considering and monitoring whether an inmate is being given changes in housing assignments or work assignments or an increase in disciplinary reports. Staff monitoring includes watching for negative performance reviews or work reassignments. The staff in charge of monitoring retaliation echoed these comments.

Retaliation Monitor

During the interview process, the Retaliation Monitor indicated that retaliation is taken very seriously at the facility. The Retaliation Monitor emphasizes to staff and inmates that they should speak about PREA without fear of retaliation. Retaliation monitoring is generally for the victim of the alleged abuse; however, if any other individual who cooperates with an investigation expresses fear of retaliation, they will be monitored as well.

Retaliation monitoring lasts 90 days from the day of the allegation unless an extension is needed. It includes a minimum of monthly status checks on the individual being monitored, which are documented in Attachment 8, Retaliation Monitoring Checklist. In the past twelve months, there have been zero instances of retaliation.

Inmates in Segregated Housing for Risk of Sexual Abuse

At the time of the on-site audit, the facility reported zero inmates in segregated housing for risk of sexual victimization or who alleged to have suffered sexual abuse.

Inmates who Reported Sexual Abuse

Through the interview process, inmates who reported sexual abuse reported:

1. The facility staff was responsive to them when they reported the incident.
2. Being referred for a forensic examination immediately.
3. Those who were referred for a forensic examination reported being offered a

victim advocate.

4. The victim advocate was with them during the examination and helped them understand what was going to happen.
5. Not having to pay for any medical treatment.
6. 100% of the inmates reported they were not asked to take a polygraph test.
7. Being notified in writing of the results of the investigation

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency has established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. Moreover, the agency/facility has designated staff members or departments that are charged with monitoring retaliation. The monitoring is in place for 90 days unless an extension is warranted. The Retaliation Monitor verified this.

The IPCM has been identified as the individual who is primarily responsible for monitoring retaliation.

The policies that address this provision are:

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

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

Provision (b)

The facility reported on the PAQ that the agency/facility employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Facility Head verified this.

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

A review of the ADOC 454-D for the 206 allegations of sexual abuse reported in the previous twelve months that required monitoring. indicated that no retaliation was reported.

Provision (c)

The facility reported on the PAQ that the agency/facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. This monitoring continues for 90 days unless an extension is warranted. Further the facility reported on the PAQ that there were five instances of retaliation in the past twelve months. The Retaliation Monitor verified this.

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

Provision (d)

The facility reported on the PAQ that retaliation monitoring includes periodic status checks for inmates. The Retaliation Monitor verified this.

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

Provision (e)

The facility reported on the PAQ that if any other individual who cooperates with an investigation expresses a fear of retaliation, the agency/facility shall take appropriate measures to protect that individual against retaliation. The Retaliation Monitor verified this.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section K, 2, d, which directs that all appropriate measures shall be taken to

	<p>protect any individual who cooperates with an investigation and expresses fear of retaliation.</p> <p>Provision (f)</p> <p>The Auditor is not required to audit this provision.</p> <p><u>CONCLUSION:</u></p> <p>Based on the review and analysis of all the available evidence, the Auditor has determined that the agency/facility meets the standard regarding agency protection against retaliation.</p>
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115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Form 454-H, Prison Rape Elimination Act (PREA) Post- Allegation Protective Custody, dated January 4, 2016 <p><u>OBSERVATIONS</u></p> <p>During the tour, it was observed that there were no inmate victims of sexual abuse in restrictive housing as a means of involuntary protection or segregation due to an allegation of sexual abuse.</p> <p><u>INTERVIEWS:</u></p> <p>Facility Head or Designee</p> <p>During the interview process, the Facility Head confirmed that the abuser or victim could be moved to another facility if needed. The facility exhausts all options before placing a victim of sexual abuse in segregated housing. In the unlikely event of an involuntary segregated housing assignment being made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. Further, inmates are allowed to participate in programs, education, and work while being housed in segregation for protection as a sexual abuse victim, consistent with safety and security needs.</p> <p>Staff who Supervise Inmates in Segregated Housing</p>

During the interview process, Segregated Housing Staff indicated there are multiple housing options available and, therefore, a sexual abuse victim is not automatically placed in segregation for his protection. Other alternatives are constantly explored, and segregation is utilized as a last resort.

Inmates in Segregated Housing for Risk of Sexual Abuse

At the time of the on-site audit, the facility reported zero inmates in segregated housing for risk of sexual victimization or who were alleged to have suffered sexual abuse. This was confirmed by the Segregated Housing Staff.

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made. A determination has been made that there is no available alternative means of separation from abusers. In the past twelve months, zero inmates were held involuntarily for one to 24 hours awaiting completion of assessment. In the past twelve months, zero inmates were held involuntarily for longer than 30 days pending alternative placement. Segregated Housing Staff verified this.

The facility reported on the PAQ that if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. The Facility Head verified this.

The policies that address this provision are:

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

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section J, 2, indicates in cases where segregated housing is the only means to protect such an inmate, the inmate shall have access to all programs, privileges, education, and work opportunities, to the extent possible, and it shall only be until an alternative means of separation from likely abusers can be arranged, a time not ordinarily to exceed thirty (30) days. Furthermore, in these cases, the facility shall document:

The basis for the facility's concern for the inmate's safety

The reason is that no alternative means of separation can be arranged.

	<p>CONCLUSION:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility does not meet the standard regarding post-allegation protective custody.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Administrative Regulation #300 4. ADOC Standard Operating Procedure Investigations & Intelligence #454 5. Alabama Department of Corrections form #454-C 6. Investigative Outcomes/Disposition 7. Investigative Review Team Meeting Minutes 8. Notification to Inmate <p><u>INTERVIEWS</u></p> <p>Investigative Staff</p> <p>During the interview process, the investigator indicated:</p> <ol style="list-style-type: none"> 1. Investigations begin immediately following notification of the incident. The same protocols are used regardless of how the incident is reported, whether in person, telephonically, verbally, by a third party, by mail, or anonymously. 2. Confirmed attendance at the required training sessions. The Auditor reviewed the investigators' training records and verified attendance and participation in all mandated training. 3. All investigations follow the same investigative format. Interviews are conducted with the victim first, then any witnesses, and the perpetrator last. Protocol varies slightly if it is an alleged sexual harassment rather than an alleged sexual assault or sexual abuse. 4. If it is an alleged sexual assault or sexual abuse incident, the victim is met at the dedicated SAFE/SANE location if applicable. Except in cases where the SAFE/SANE team collects the evidence, the investigator collects and secures all evidence. 5. Investigative staff are trained in evidence collection. The Auditor reviewed training records, which provided confirmation. 6. When the evidence supports a criminal act that has been committed, the

agency shall conduct compelled interviews only after consulting with prosecutors on whether compelled interviews may be an obstacle for subsequent criminal prosecution. The OPS-Criminal Division confirmed that if the case is criminal, Miranda warnings are given to the person(s)

7. The credibility of anyone involved in the investigation is determined through the investigative process. Everyone is treated as credible and truthful unless the investigation proves otherwise. Polygraph is not used in the investigative process of PREA cases.
8. In administrative investigations, the evidence is followed as the investigation unfolds. Following the evidence, an attempt is made to determine if staff actions or failure to act contributed to the allegation. All findings are summarized in the investigative report.
9. If the investigation uncovers evidence that a crime has been committed, the allegation is investigated by the OPS-Criminal Division.
10. Confirmed that if a principle (victim or abuser) is released or terminated from the agency, it does not alter the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved.
11. Confirmed the facilities cooperate with the OPS-Criminal Division and endeavor to keep the facility informed of the progress of the investigation.

PREA Director (PD)

During the interview process, the PD indicated the agency retains all written reports about the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Additionally, most inmate information is stored permanently in the SCRIBE database.

Institutional PREA Compliance Manager (IPCM)

Through the interview process, the IPCM indicated that the agency ensures that the departure of an alleged abuser or victim from employment or control of the agency does not provide a basis for terminating an investigation.

Facility Head or Designee

Through the interview process, the Facility Head Designee reported that in the past twelve months, there were zero substantiated allegations of conduct that were criminal and referred for prosecution.

Inmates Who Reported Sexual Abuse

Through the interview process, inmates who reported sexual abuse reported:

1. The facility staff were responsive to them when they reported the incident.
2. Being referred for a forensic examination immediately.
3. Those referred for a forensic exam reported being offered a victim advocate.

4. The victim advocate was with them during the examination and helped them understand what would happen.
5. Not having to pay for any medical treatment.
6. 100% of the inmates reported they were not asked to take a polygraph test.
7. Being notified in writing of the results of the investigation

PROVISIONS

Provision (a)

The facility reported on the PAQ that the agency has a policy related to criminal and administrative investigations. The investigative staff verified this during the Interview process.

The PAQ indicates there were a total of 257 allegations of sexual abuse and sexual harassment in the past twelve months. According to PAQ, 209 of these allegations included instances of sexual abuse. One hundred seventy-nine inmate-on-inmate allegations were investigated criminally. During the on-site audit, 130 were deemed unfounded following criminal investigations, 18 were considered unsubstantiated, and 29 remained open. Prosecution was declined for the 148 closed cases.

Twenty-seven allegations involved staff-on-inmate misconduct and were investigated criminally. During the on-site audit, 20 were deemed unfounded following the criminal investigation, two were considered unsubstantiated, and five cases remained open. Prosecution was declined for the 22 closed cases.

In all reviewed sexual abuse cases, the alleged victim was provided with medical and mental health services. Retaliation monitoring remained in place until the victim was transferred or released or until the mandatory 90 days of monitoring had elapsed. All closed sexual abuse cases that were not deemed unfounded had a sexual abuse incident team review within 30 days of the investigation's completion. In all closed cases, the inmate was promptly informed in writing of the investigation results.

The facility reported that no forensic medical examinations were completed in the past twelve months. However, when a forensic examination is warranted, they are conducted by SANE personnel at One Place Family Justice Center. Victim advocates were offered to all inmates who underwent a SANE exam.

There were 48 sexual harassment allegations in the past twelve months. Twenty-eight allegations were inmate-on-inmate and were investigated administratively. At the time of the on-site audit, 20 were deemed unfounded after the administrative investigation, three were considered unsubstantiated, one was deemed substantiated, and four remained open.

Twenty sexual harassment allegations involved staff-on-inmate interactions and were investigated criminally. During the on-site audit, 12 allegations were deemed unfounded after criminal investigation, five were considered unsubstantiated, and three remained open. In all closed cases, the inmate was promptly notified in writing of the investigation results.

The auditor reviewed documentation confirming that the investigators had completed specialized training from the National Institute of Corrections. LESD conducts all administrative and criminal investigations. LESD refers all substantiated criminal cases to the local district attorney's office and is available to assist those authorities in prosecuting these cases upon request.

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

Provision (b)

The facility reported on the PAQ that when sexual abuse is alleged, the agency uses investigators who have received specialized training in sexual abuse investigations. The investigative staff verified this during the interview process.

The policy addressing this provision is ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 2, III, C. It requires all investigators used by the ADOC to receive specialized training in sexual abuse investigations under 115.34 of the Prison Rape Elimination Act.

LESD investigators receive additional training in interviewing techniques for sexual abuse victims, conducting investigations in confinement settings, collecting evidence related to inmate sexual offenses, addressing sexual harassment, and managing custodial sexual misconduct. This training is documented and verified by the auditor through employee signatures on sign-in sheets and certificates of completion. The auditor reviewed the investigator training records and verified attendance and participation in all mandated training.

Provision (c)

The facility reported on the PAQ that investigators gather and preserve both direct and circumstantial evidence, including any available physical evidence, DNA samples, and electronic monitoring data. They interviewed alleged victims, suspected perpetrators, and witnesses. The investigators also reviewed previous reports and complaints of sexual abuse involving the suspected perpetrator, which the investigative staff verified during the interview process.

If an incident involves alleged sexual assault or abuse, the investigator goes to One Place Family Justice Center, where the victim is seen. Except in cases where the SAFE/SANE team collects evidence, the investigator collects and secures all evidence. The investigator receives training in evidence collection through the agency's investigator

training and NIC training. The Auditor reviewed training records, which confirmed this training.

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

Provision (d)

The facility reported on the PAQ that when the quality of evidence supports criminal prosecution, the agency conducts compelled interviews only after consulting with prosecutors to assess whether these interviews might hinder subsequent criminal prosecution. The investigative staff confirmed this during the interview process.

The policy addressing this provision is ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, F, 1, i. It states that when the quality of evidence supports criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors regarding whether such interviews could pose an obstacle to subsequent criminal prosecution.

Provision (e)

The facility reported in the PAQ that agency investigators assess the credibility of an alleged victim, suspect, or witness individually and not based on that individual's status as an inmate or staff member. The agency investigates allegations of sexual abuse without requiring an inmate who alleges such abuse to submit to a polygraph examination or any other truth-telling device as a condition for proceeding. The investigative staff confirmed this during the interview process.

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

Provision (f)

The facility reported in the PAQ that administrative investigations involve assessing whether staff actions or inactions contributed to the abuse. These investigations are documented in written reports that outline the physical and testimonial evidence, the rationale for credibility assessments, and the investigative facts and findings. This

was verified by the investigative staff during the interview.

The policy addressing this provision is ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, F, 2 & 3. It states that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and must be documented in written investigative reports. These reports should include descriptions of physical and testimonial evidence, the reasoning behind credibility assessments, and the investigative facts and findings.

Provision (g)

The facility reported in the PAQ that criminal investigations are documented in a written report featuring a detailed description of the physical, testimonial, and documentary evidence, with all documentary evidence attached whenever possible. The investigative staff confirmed this during the interview process.

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

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

Provision (h)

The facility reported on the PAQ that the agency retains all written reports regarding the administrative or criminal investigation of alleged sexual abuse or sexual harassment for the duration of the alleged abuser's incarceration or employment by the agency, as well as for an additional five years. This was verified by the PREA Director (PD) during the interview process.

The facility reported on the PAQ that in the past twelve months, six substantiated allegations of criminal conduct were referred to for prosecution. The facility head designer confirmed this during the interview process.

Provision (i)

The facility reported on the PAQ that the agency ensures the departure of an alleged abuser or victim from employment or control of the agency does not provide grounds for terminating an investigation. This was verified by the PREA Compliance Manager (PCM) during the interview process.

The policy addressing this provision is ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, J. It states that the departure of the alleged abuser or victim

	<p>from the employment of the facility or agency shall not provide a basis for terminating an investigation.</p> <p>Provision (j)</p> <p>The facility reported on the PAQ that the agency's assurance regarding the departure of an alleged abuser or victim from employment or control of the agency does not justify terminating an investigation. This was confirmed by the PREA Compliance Manager (PCM) during the interview process.</p> <p>The policy addressing this provision is ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, J. This procedure requires the agency to retain all written reports referenced in this provision for as long as the individual is incarcerated or employed by the agency, plus an additional five years.</p> <p>Provision (k)</p> <p>The auditor is not required to audit this provision.</p> <p>Provision (l)</p> <p>The facility reported in the PAQ that when outside agencies investigate sexual abuse, it will cooperate with those investigators and strive to stay informed about the investigation's progress. However, as previously stated, the agency does not have external investigators specifically tasked with examining PREA allegations. All administrative and criminal investigations are conducted within the facility and agency. The investigative staff confirmed this during the interview process.</p> <p>The ADOC handles all aspects of investigations. ADOC Standard Operating Procedure I & I #454, Investigation and Intelligence Division, PREA Sexual Assault Investigations, dated July 16, 2015, p. 3, L, states that if an outside agency investigates an allegation of sexual abuse within one of its facilities, the facility must cooperate with the outside investigators. The involvement of outside agencies is only authorized by and coordinated through LESD and the ADOC Commissioner.</p> <p><u>CONCLUSION:</u></p> <p>Based on the review and analysis of all available evidence, the Auditor has determined that the agency/facility meets every standard provision regarding criminal and administrative investigations.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

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

INTERVIEWS:**Investigative Staff**

During the interview process, the investigative staff explained that in an investigation, all available evidence- whether physical, from the victim, from the perpetrator, from the scene, or through interviews- is collected and submitted to both facility administration and the District Attorney's Office for their review and consideration.

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

Provision (a)

The facility reported on the PAQ that the agency does not require a standard higher than a preponderance of the evidence to determine whether allegations of sexual abuse or sexual harassment are substantiated. This was confirmed by the investigative staff during the interview process.

The policies that address this provision are:

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

ADOC Administrative Regulation #300 from the Investigations and Intelligence Division, dated April 18, 2016, page 5, states that the LSED (formerly I & I) Division will distribute all investigative reports as follows:

1. Commissioner or designee
2. Inspector General
3. Deputy/Associate Commissioners, Institutional Coordinators, Institutional Wardens, as appropriate
4. The District Attorney of the county has jurisdiction if the incident involved criminal conduct
5. ADOC official that requested the investigation
6. Investigations that involve central office personnel will be distributed only to the Commissioner of Corrections.

CONCLUSION

	Based on the review and analysis of all available evidence, the auditor concluded that the agency or facility complies with all the standard provisions regarding the evidentiary requirements for administrative investigations.
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. Investigative Outcome/Disposition 4. Notification to Inmate (Must have Signature) 5. Investigative Review Team Meeting <p><u>INTERVIEWS</u></p> <p>Investigative Staff</p> <p>During the interview, the investigative staff reported that the final step of the investigation process takes place after all findings have been determined. At the conclusion of any PREA investigation, LESD submits a close-out letter to the victim and the perpetrator advising each of the conclusion of the investigation and the findings.</p> <p>Provision (a)</p> <p>The PAQ indicates there were 179 inmate-on-inmate sexual abuse or sexual assault cases. These allegations were investigated criminally. After the investigation, 130 allegations were deemed unfounded, 18 were unsubstantiated, and 29 were ongoing.</p> <p>There were 27 cases of staff-on-inmate sexual abuse or sexual assault. These allegations were investigated criminally. After the investigation, 20 allegations were deemed unfounded, two were unsubstantiated, and five were ongoing. Prosecution was declined for all closed cases. In all sexual abuse cases, the alleged victim was offered medical and mental health services. Retaliation monitoring was conducted until the allegation was deemed unfounded, the victim was transferred, the victim was released, or the mandatory 90 days of monitoring had elapsed. All closed sexual abuse cases, except those deemed unfounded, underwent a sexual abuse incident team review within 30 days of the investigation's completion. In every closed case, the inmate was promptly notified in writing of the investigation results. In the past months, there were 48 allegations of sexual harassment. Of these, 28 involved inmate-on-inmate incidents and were investigated administratively. After the investigations, 20 were found to be unfounded, three were unsubstantiated, one was</p>

substantiated, and four are still ongoing.

Twenty allegations of staff-on-inmate sexual harassment were investigated criminally. During the on-site audit following the criminal investigation, 12 were deemed unfounded, five were found to be unsubstantiated, and three remained open.

In all resolved sexual harassment cases, the inmate received prompt written notification of the investigation results.

Zero forensic medical examinations were completed in the past twelve months. When they occur, these examinations are completed by SANE personnel at One Place Family Justice Center, 530 S Lawrence Street, Montgomery, AL 36104; 334-262-7378. Victim advocates were offered to all inmates who had a SANE examination.

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

Provision (b)

N/A

Provision (c)

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

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

Provision (d)

See provision (a) for the breakdown of allegations in the past 12 months.

The facility hasn't had any Inmate-on-Inmate incidents where an inmate has been indicted as of yet.

Provision (e)

The PAQ indicates there were 206 sexual abuse and 28 sexual assault allegations in the past 12 months. See provision (a) for a breakdown of the allegations and

	<p>outcomes.</p> <p>Provision (f)</p> <p>The Auditor is not required to audit this provision.</p> <p><u>CONCLUSION</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding reporting to inmates.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Administrative Regulation #208, Personnel, dated 08/17/05, Employee Standards of Conduct and Discipline 4. ADOC memorandum, PREA Compliance Standard 115.76, Disciplinary Sanctions for Staff <p><u>INTERVIEWS</u></p> <p>Facility Head or Designee</p> <p>Through the interview process, the Facility Head Designee indicated:</p> <p>All staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or sexual misconduct policies.</p> <p>In the past twelve months, there were zero staff who have violated agency sexual abuse, sexual harassment, or sexual misconduct policies.</p> <p>In the previous twelve months, there had been zero terminations or resignations of staff for violation of the agency's sexual abuse, sexual harassment, or sexual misconduct policies.</p> <p>The presumptive disciplinary sanction for staff who have engaged in sexual abuse is termination.</p> <p>PROVISIONS</p> <p>Provision (a)</p>

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

The policies that address this provision are:

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

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institutions
2. Has been convicted of engaging or attempting to engage in sexual activity in the community, facilitated by force, overt or implied, threats of force, or coercion, or if the victim did not consent or was unable to consent
3. Has been civilly or administratively adjudicated to have engaged in activity described above

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

Provision (b)

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

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

The policies that address this provision are:

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

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

Provision (c)

The facility reported on the PAQ that the disciplinary sanctions for violations of

	<p>agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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. Additionally, in the past 12 months there were zero staff from the facility who were disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse). This was confirmed through the interview process with the Facility Head.</p> <p>The policy that addresses this provision is ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline indicates disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) shall be commensurate with the nature and circumstance of the acts committed, the staff members disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>Provision (d)</p> <p>The facility reported on the PAQ that 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, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. Additionally, in the past 12 months, there was one staff member from the facility who were reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies. This was confirmed through the interview process with the Facility Head.</p> <p>The policy that addresses this provision is ADOC Administrative Regulation #208, August 17, 2005, Employee Standards of Conduct and Discipline mandates that all terminations for violations of ADOC's sexual abuse and sexual harassment policies or resignations by staff who would have been terminated for sexual abuse or sexual harassment, if not for their resignation, shall be reported to local prosecutors, unless the activity was clearly not criminal in conformance with Alabama law. ADOC shall also report the staff members to any relevant licensing bodies.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for staff.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ) and supporting documentation.
2. ADOC Administrative Regulation #454
3. ADOC Administrative Regulation #216, Personnel, dated December 7, 2015

INTERVIEWS**Facility Head or Designee**

During the interview process, the Facility Head acknowledged that during the previous twelve months, there had been zero contractors or volunteers reported to law enforcement agencies and/or relevant licensing bodies for engaging in sexual abuse of inmates. Further, there had been zero volunteers or contractors reported to law enforcement for engaging in sexual abuse of inmates.

PROVISIONS**Provision (a)**

The facility reported on the PAQ that the agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Further, any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates. However, in the past twelve months, zero contractors and zero volunteers have been reported to law enforcement agencies and/or relevant licensing bodies for engaging in the sexual abuse of inmates. The Facility Head verified this.

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

Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institutions.

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.

Has been civilly or administratively adjudicated to have engaged in the above-mentioned activity.

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

Provision (b)

	<p>The facility reported on the PAQ that the facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. The Facility Head verified this.</p> <p>According to the PAQ, the facility has had no remedial measures against a contractor or a volunteer to prohibit further contact with inmates due to a violation of agency sexual abuse or harassment policies in the past twelve months. The Facility Head verified this.</p> <p>The policy that addresses this provision is ADOC Administrative Regulation #216, Personnel, dated December 7, 2015, pp. 6 – 11, which are attachments of forms new employees must complete before being hired. The required questions are on the forms.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding corrective action for contractors and volunteers.</p>
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115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Administrative Regulation #403 <p><u>INTERVIEWS</u></p> <p>Facility Head or Designee</p> <p>Through the interview process, the Facility Head indicated:</p> <ol style="list-style-type: none"> 1. GDC prohibits sexual activity between inmates. 2. There were zero administrative findings of inmate-on-inmate sexual abuse that occurred at the facility in the past twelve months. 3. There were zero criminal findings of guilt for inmate-on-inmate sexual abuse that occurred at the facility. 4. Inmates are disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

5. Disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred is prohibited.

Medical and Mental Health Staff

Through the interview process, medical and mental health staff stated the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. The facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits.

PROVISIONS

Provision (a)

The facility reported on the PAQ that:

1. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.
2. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.
3. In the past 12 months, there were zero administrative findings of inmate-on-inmate sexual abuse that occurred at the facility.
4. In the past 12 months, there have been zero criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility.

The Facility Head verified this.

Additional information received provided an overview of the administrative and criminal cases, including status. During the past twelve months, there were 206 sexual abuse allegation cases and 28 sexual harassment allegation cases. All sexual abuse cases were referred for criminal investigation. Prosecution was declined in 170 of the sexual abuse cases. At the time of the on-site audit, thirty-four remained in the review process for prosecution.

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

Provision (b)

The facility reported on the PAQ that 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 Facility Head verified this.

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

Provision (c)

The facility reported on the PAQ that when determining what types of sanction, if any, should be imposed, the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior. This was verified with the Facility Head through the interview process.

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

Provision (d)

The facility reported on the PAQ that it offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. The facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits. This was verified through the interview process with medical and mental health staff.

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

Provision (e)

The facility reported on the PAQ that the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. This was verified with the Facility Head through the interview process. The IPCM indicated the agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

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

	<p>Provision (f)</p> <p>The PAQ indicates the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish sufficient evidence to substantiate the allegation. This was verified with the Facility Head through the interview process.</p> <p>The IPCM indicated the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 22, H, 2, c. It specifies that an inmate reporting sexual abuse or sexual harassment shall not be issued a disciplinary report for lying based solely on the fact that their allegations were determined to be unfounded or that the inmate later decides to withdraw his allegation.</p> <p>Provision (g)</p> <p>The PAQ indicates the agency prohibits all sexual activity between inmates and deems such activity to constitute sexual abuse only if it determines that the activity is coerced. This was verified with the Facility Head through the interview process.</p> <p>The policy that addresses this provision is ADOC Rules Violation Definitions and Examples, associated with RV#912 Sexual Offenses (non-Forcible) / Soliciting, which is defined as the commission of any sexual act during which both participants act willingly, to include touching, hugging, fondling, kissing, etc. The agency prohibits all sexual activity between inmates.</p> <p><u>Conclusion:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding disciplinary sanctions for inmates.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p><u>DOCUMENTATION:</u></p>

1. Pre-Audit Questionnaire (PAQ) and supporting documentation.
2. ADOC Administrative Regulation #454
3. ADOC Form 454-C, PREA Risk Factors Checklist
4. Risk Assessment Checklist
5. Mental Health Referral
6. Medical Referral
7. Classification Spreadsheet

INTERVIEWS

Risk Screening Staff

Through the interview process, staff who conduct intake screenings confirmed that all medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.

Medical and Mental Health Staff

Through the interview process, medical and mental health staff acknowledged they obtained informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18. Inmates are offered a follow-up meeting with a mental health professional within 14 days of intake. If the screening indicates the inmate is at substantial risk for victimization, aggressiveness or has a history of victimization.

Inmates Who Disclosed Prior Victimization

One inmate who disclosed prior victimization was interviewed during the on-site audit. The inmate stated that a mental health referral was attempted the day of intake for an appointment the following week; however, she declined the referral.

PROVISIONS

Provision (a)

The facility reported on the PAQ that all inmates who disclosed any prior sexual victimization during a screening are offered a follow-up meeting with a medical or mental health practitioner. Further, a follow-up meeting is offered within 14 days of intake screening. Medical and mental health services staff document all encounters with inmates.

This was verified during the interview process with an inmate who disclosed prior victimization.

The policy which addresses these provisions is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 15, F, specifies if an inmate has an elevated risk to be victimized or screens

as sexually aggressive a mental health professionals shall meet with the inmate and review their screening information. If the screening indicates the inmate has prior sexual victimization or sexual aggression in their history, the mental health professionals shall offer a follow-up meeting with mental health within fourteen days of the intake screening.

Provision (b)

The facility reported on the PAQ that all prison inmates who have previously perpetrated sexual abuse are offered a follow-up meeting with a mental health practitioner. The meeting is no more than 14 days from the time the staff becomes aware of predatory behavior. Mental health staff maintain logs of all mental health service encounters. This information was verified through the interview process with mental health staff.

The policy which addresses this provisions is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 6 indicates within a set time period, not to exceed thirty days from the inmate's arrival, the inmate shall be re-assessed for risk of victimization or abusiveness using the risk screening assessment and any additional, relevant information received since the intake screening. An inmate's risk level is to also be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

During the document review there were thirty inmate records, chosen randomly from the master roster, with varying arrival dates. All thirty records had a signed acknowledgment sheet, had received an orientation booklet and PREA brochure, and viewed the PREA video. Of the thirty inmates, thirty had received PREA information during intake; thirty had comprehensive PREA education within 30 days of intake, and thirty were reassessed within 30 days of arrival. All transgender inmates were reassessed twice in the past twelve months as required.

Provision (c)

This provision is not applicable because the facility is not a jail.

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

Provision (d)

The facility reported on the PAQ that information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to informing security and management decisions, including treatment plans, housing, beds, work, education, and program assignments, or as otherwise required by federal, state, or local law. This was verified through the interview process with the Risk Screening

	<p>Staff.</p> <p>The policy which addresses this provisions is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 16, F, 9, denotes that all information obtained during the intake screening process and PREA Mental Health Assessment shall be used to make individualize and safety based determinations and assist in the initial classification and institutional assignment of the inmate as well as determine work, education and programs, in accordance with ADOC Classification Manual, AR433 and AR435, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>Provision (e)</p> <p>The facility reported on the PAQ that medical and mental health professionals obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18. This was verified by medical and mental health staff during the interview process.</p> <p>The IPCM confirmed that medical and mental health practitioners obtained informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate was under the age of eighteen.</p> <p><u>CONCLUSION</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets the standard regarding medical and mental health screenings, history of sexual abuse.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation (AR) 454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Form MH-008, Referral to Mental Health. 4. ADOC MOU with Alabama Coalition Against Rape (ACAR) <p><u>INTERVIEWS</u></p> <p>Medical and Mental Health Staff</p>

Through the interview process, medical staff reported that upon arriving at medical after a report of sexual assault, an inmate will get a cursory examination by the physician to provide feedback for use of SART or if the inmate should be immediately transported to a hospital due to the nature of his injuries. If the SART is utilized, before leaving the facility, the nurse will provide recommendations for treatment and care. The facility physician will complete the orders. As part of the process, the inmate receives information about sexually transmitted infection prophylaxis and other necessary care information.

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

Inmates Who Reported Sexual Abuse

Through the interview process, inmates who reported sexual abuse reported:

1. The facility staff were responsive to them when they reported the incident.
2. They were offered referrals for medical and mental health.
3. Being referred for a forensic examination immediately.
4. Those who were referred for a forensic examination reported being offered a victim advocate.
5. The victim advocate was with them during the examination and helped them understand what was going to happen.
6. Not having to pay for any medical treatment.
7. 100% of the inmates reported they were not asked to take a polygraph test.
8. Being notified in writing of the results of the investigation

First Responders (Security and Non-Security)

During the interview process, security first responders indicated that their primary responsibility is to protect the victim, notify the appropriate medical and mental health practitioners, and preserve evidence.

During the interview process, the non-security first responders said that their primary responsibility was to protect the victim, notify security first responders, and stay with the victim until the security first responders arrived.

PROVISIONS

Provision (a)

The facility reported on the PAQ that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. This was verified during the interview process with medical staff. Additionally, the Auditor reviewed records of inmates who alleged sexual abuse, and in each case, the

inmate was offered a referral to medical and mental health within the appropriate time.

The facility reported on the PAQ that medical and mental health practitioners determine the nature and scope of such services according to their professional judgment. The medical and mental health staff document the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Medical and mental health staff verified this.

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

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

All forensic medical exams and SAFE/SANE (Sexual Assault Nurse/Examiner) personnel are located at One Place Family Justice Center, 530 S, Lawrence Street, Montgomery, AL 36104; 334-262-7378. In the unlikely event a SAFE/SANE practitioner is not on shift, one is always on call 24/7 and will report immediately to conduct the rape kit examination, provide results of the exam to ADOC, as well as other issues relative to the SART (Sexual Assault Response Team) exam.

The IPCM confirmed there were zero inmates who were transported for SANE examinations in the past twelve months.

Provision (b)

The facility reported on the PAQ that if no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, security staff first responders take preliminary steps to protect the victim. Then immediately notify the appropriate medical and mental health practitioners. This was verified during the interview process with first responders.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, b, dictates that if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall

take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.

Provision (c)

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

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

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

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

Provision (d)

The facility reported in the PAQ that treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. This was verified through the interview process with medical staff. This was also verified by inmates who reported abuse.

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

	<p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding access to emergency medical and mental health services.</p>
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115.83	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. ADOC Form MH-008, Referral to Mental Health 4. ADOC MOU with ACAR 5. Referral for on-going treatment (Must have inmate signature) <p><u>INTERVIEWS</u></p> <p>Medical and Mental Health Staff</p> <p>During the interview process, medical and mental health staff indicated that treatment is provided immediately and is based on their professional judgment.</p> <ol style="list-style-type: none"> 1. Medical and mental health staff offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse. 2. Medical and mental health staff provide victims with medical and mental health services consistent with the community level of care. 3. Medical and mental health staff acknowledged that 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. 4. Medical and mental health staff work together to ensure the inmate receives the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis are offered in accordance with professionally accepted standards of care and where medically appropriate. 5. Further medical and mental health staff support compliance in evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff indicates an active understanding of the importance of

- appropriate evaluation, follow-up, treatment planning and service referral.
6. Mental Health staff indicated through the interview process that a mental health evaluation of all known inmate-on-inmate abusers is attempted within 60 days of learning of such abuse history. Treatment is offered when deemed appropriate and beneficial.
 7. Medical Staff indicated through the interview process that inmate victims of sexual abuse, while incarcerated, are offered tests for sexually transmitted infections as medically appropriate.

Inmates Who Reported Abuse

Through the interview process, inmates who reported sexual abuse reported:

1. The facility staff was responsive to them when they reported the incident.
2. They were offered referrals for medical and mental health.
3. Being referred for a forensic examination immediately.
4. Those who were referred for a forensic examination reported being offered a victim advocate.
5. The victim advocate was with them during the examination and helped them understand what was going to happen.
6. Not having to pay for any medical treatment.
7. 100% of the inmates reported they were not asked to take a polygraph test.
8. Being notified in writing of the results of the investigation

PROVISIONS

Provision (a)

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

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

All forensic medical exams and SAFE/SANE (Sexual Assault Nurse/Examiner) personnel are located at One Place Family Justice Center, 530 S, Lawrence Street, Montgomery, AL 36104; 334-262-7378. SAFE/SANE practitioners are on staff. In the unlikely event a SAFE/SANE practitioner is not on shift, one is always on call 24/7 and will report to conduct the rape kit examination, provide results of the exam to ADOC, as well as other issues relative to the SART (Sexual Assault Response Team) exam.

The Auditor reviewed records produced by the facility documenting the community

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

Provision (b)

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, e, dictates that the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or upon their released from custody.

Provision (c)

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

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

Provision (d)

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

The IPCM confirmed that zero inmates had been referred for SART examinations by SAFE/SANE practitioners in the previous twelve months.

Provision (e)

According to the PAQ if pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services.

Provision (f)

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, mandates that inmate victims of sexual abuse or sexual

	<p>harassment while incarcerated be offered timely information about access to emergency contraception, pregnancy tests, tests for sexually transmitted infections, and prophylaxis where medically appropriate.</p> <p>Provision (g)</p> <p>The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, e, mandates that all ongoing treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Provision (h)</p> <p>The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, g, states an attempt shall be made to conduct a mental health evaluation of known Inmate-on-Inmate abusers within sixty (60) days of learning of such abuse history and offer treatment. All referrals for mental health shall be made using ADOC Form MH-008, Referral to Mental Health.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Form 454-E, Sexual Abuse Incident Review 4. Sexual Assault Incident Review <p><u>INTERVIEWS</u></p> <p>Facility Head</p> <p>During the interview process the Facility Head confirmed the members of the Incident Review Team are executive level, upper-level management and cross many departments. The Facility Head Designee expressed the facility's commitment to</p>

consider and incorporate recommendations from team members.

PREA Compliance Manager (PCM)

During the interview process the PCM indicated the report from the Sexual Abuse Incident Review team is submitted to the PCM and the Facility Head. Additionally, the PCM confirmed the SAIR meets within thirty days of the close of the investigation.

Incident Review Team (IRT)

Members of the IRT included upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners

Members of the sexual abuse incident review team indicated the team considers all criteria listed in this standard, as required by PREA policy. The report from the Sexual Abuse Incident Review team is submitted to the Facility Head and the PCM.

PROVISIONS

Provision (a)

The facility reported on the PAQ that it conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. The facility reported in the past twelve months there were sixteen criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. This was verified during the interview process with the Facility Head.

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

At the time of the audit, information received regarding the allegations of sexual abuse and sexual harassment during the prior twelve months revealed a total of 179 inmate-on-inmate sexual abuse or sexual assault cases. These allegations were investigated criminally. After the investigation, 130 allegations were deemed unfounded, 18 were unsubstantiated, and 29 were ongoing.

There were 27 cases of staff-on-inmate sexual abuse or sexual assault. These allegations were investigated criminally. After the investigation, 20 allegations were deemed unfounded, two were unsubstantiated, and five were ongoing. Prosecution was declined for all closed cases. In all sexual abuse cases, the alleged victim was offered medical and mental health services. Retaliation monitoring was conducted until the allegation was deemed unfounded, the victim was transferred, the victim was released, or the mandatory 90 days of monitoring had elapsed. All closed sexual abuse cases, except those deemed unfounded, underwent a sexual abuse incident

team review within 30 days of the investigation's completion. In every closed case, the inmate was promptly notified in writing of the investigation results. In the past months, there were 48 allegations of sexual harassment. Of these, 28 involved inmate-on-inmate incidents and were investigated administratively. After the investigations, 20 were found to be unfounded, three were unsubstantiated, one was substantiated, and four are still ongoing.

Twenty allegations of staff-on-inmate sexual harassment were investigated criminally. During the on-site audit following the criminal investigation, 12 were deemed unfounded, five were found to be unsubstantiated, and three remained open.

In all resolved sexual harassment cases, the inmate received prompt written notification of the investigation results.

There were zero forensic medical examinations completed in the past twelve months.

Provision (b)

The facility reported on the PAQ the facility ordinarily conducts a sexual abuse incident review (SAIR) within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. The facility reported in the past twelve months, there were sixteen criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a SAIR within 30 days, excluding only "unfounded" incidents.

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

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

Provision (c)

The facility reported on the PAQ the SAIR includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. This was verified during the interview process with the Facility Head Designee. This was verified during the interview process with the Facility Head.

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

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

The policy which addresses this provision is ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 20, H, 1, k, indicates that a review team, including upper-level management

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

Provision (d)

The facility reported on the PAQ that it prepares a report of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to this section and any recommendations for improvement, and submits such report to the Facility Head and PREA Compliance Manager. This was verified during the interview process with the IPCM.

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

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

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

Provision (e)

The facility reported on the PAQ that it implements the recommendations of the SAIR, for improvement or documents its reasons for not doing so. This was verified during the interview process with the Facility Head.

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

CONCLUSION:

Based upon the review and analysis of all the available evidence, and the corrective action taken by the facility, the Auditor has determined the agency/facility meets every provision of the standard regarding sexual abuse incident reviews.

115.87	Data collection
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 547 376"><u>DOCUMENTATION:</u></p> <ol data-bbox="320 443 1233 645" style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. Most Recent Survey of Sexual Victimization (Form SSV-2) 4. Most Recent Annual Data Report 5. Website Address for ADOC http://www.doc.state.al.us/PREA <p data-bbox="256 689 456 723"><u>INTERVIEWS</u></p> <p data-bbox="256 757 563 790">PREA Director (PD)</p> <p data-bbox="256 828 1473 1108">Through the interview process the PD indicated upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30th. The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews. The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates.</p> <p data-bbox="256 1153 1007 1187">Institutional PREA Compliance Manager (IPCM)</p> <p data-bbox="256 1225 1473 1337">Through the interview process the IPCM indicated the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="256 1382 456 1415"><u>PROVISIONS</u></p> <p data-bbox="256 1449 464 1482">Provision (a)</p> <p data-bbox="256 1523 1437 1635">The facility reported on the PAQ that 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 PD verified this.</p> <p data-bbox="256 1680 1409 1792">The policy which addresses this provision is ADOC Administrative Regulation (AR) 454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 24, L, 1, dictates that the data collection requirement include:</p> <p data-bbox="256 1836 1406 1904">The procedure for data maintenance and collection for every allegation of sexual abuse and harassment</p> <p data-bbox="256 1948 1398 2060">The sources for data collection include the data required by the US DOJ, which includes inmate polling, documentation of announced and unannounced rounds, grievances, reports, investigation files and incident reviews.</p>

The instruments used to collect data:

1. The standardized definitions used.
2. The methodology employed to analyze data.
3. The quality control mechanisms to verify data accuracy Provision (b)

The facility reported on the PAQ, that the agency aggregates incident-based sexual abuse data at least annually. This was verified by the PC during the interview process. The Auditor reviewed the most recent Annual PREA Report.

The ADOC aggregates all its data submitting all required items according to the US Department of Justice SSV-2 (Survey of Sexual Victimization) and submits all information annually to the US department of Justice.

The Auditor reviewed the most recent annual SSV-2.

Provision (c)

The facility reported on the PAQ that the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. This was verified by the PD during the interview process.

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

The procedure for data maintenance and collection for every allegation of sexual abuse and harassment

The sources for data collection include the data required by the US DOJ, which includes inmate polling, documentation of announced and unannounced rounds, grievances, reports, investigation files and incident reviews.

The instruments used to collect data:

1. The standardized definitions used.
2. The methodology employed to analyze data.
3. Quality control mechanisms to verify data accuracy.

PREA policy dictates the incident-based data include at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The Auditor was provided with a copy of the most recent annual report, which addressed all questions, as required. This report can be located and reviewed on the ADOC website.

Provision (d)

The facility reported on the PAQ the agency maintains, reviews, and collects data as

needed from all available incident-based documents, including reports, investigation files and sexual abuse incident reviews. This was verified through the interview process with the PC.

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

Provision (e)

On the PAQ the facility reported that the agency obtains incident based and aggregated data from every private facility with which it contracts for the confinement of its inmates. This was verified through the interview process with the PC.

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

The Alabama Therapeutic Education Facility (ATEF) is a community confinement facility owned and operated by the GEO Group, Inc. GEO contracts with the Alabama Department of Corrections (ADOC) to house their adult male and female offenders. ADOC Contract CD170051713 with GEO Group, 3.39 Prison Rape Elimination Act, states, "Vendor (GEO) shall comply with Alabama Code Section 14-11-31, as well as 28 C.F.R. Part 115, the Prison Rape Elimination Act ("PREA"). The ADOC has a Zero Tolerance Policy toward all forms of custodial sexual misconduct, sexual abuse, and sexual harassment. See Administrative Regulation 454, Inmate Sexual Assault and Harassment Awareness (Prison Rape Elimination Act (PREA)). Any type of conduct – including suspected conduct – that falls within the context of custodial sexual misconduct/sexual abuse, as defined by either the State or Federal laws referenced above, shall be reported immediately to the Warden of Kilby Correctional Facility or his/her designee for conduct involving male Inmates, or the Warden of Tutwiler Correctional Facility or his/her designee for conduct involving female Inmates, as well as the ADOC's PREA Director or designated PREA Contract Monitor. Pursuant to 28 C.F.R. Part 115.12, the Vendor is obligated to adopt and comply with all PREA standards and the ADOC shall monitor the Vendor for compliance consistent with the compliance conditions set forth above. Vendor shall provide reasonable access to the PREA Contract Monitor; provide relevant documentation as requested; require and provide training of all its employees, agents, or contractors; and provide a Report from any PREA audit, which shall be performed by an independent, DOJ certified auditor."

Provision (f)

	<p>On the PAQ the facility reported the agency provides the Department of Justice with data from the previous calendar year upon request. This was verified through the interview process with the PC.</p> <p>The Auditor reviewed the most recent SSV2 submitted by the agency.</p> <p>The ADOC aggregates all its data submitting all required items according to the US Department of Justice SSV-02 (Survey of Sexual Victimization) and submits all information on June 30 from the previous calendar year to the US Department of Justice.</p> <p>The Auditor reviewed the most recently submitted SSV-2, which reflected the completion of all data fields within the required timeline.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding data collection.</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation. 2. ADOC Administrative Regulation #454 3. 2023 Survey of Sexual Victimization (Form SSV-2) 4. 2024 Annual Data Report 5. Website Address for ADOC http://www.doc.state.al.us/PREA <p><u>INTERVIEWS</u></p> <p>Agency Head or Designee</p> <p>Through the interview process the Agency Head Designee reported the annual report includes a comparison of the current year's data and corrective actions with those from prior years. PREA annual report are on our agency website http://www.doc.state-al.us/PREA</p> <p>The purpose of the annual report is to capture the facilities and the agency as whole are keeping our inmates and staff safe from sexual victimization. It assists us in locating problem areas as quickly as possible. It also helps us to take corrective action on an ongoing basis.</p>

Facility Head or Designee

Through the interview process, the Facility Head acknowledged the facility PREA committee reviews each allegation, and that information is provided to the PC for the annual review.

PREA Director (PD)

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

PREA Compliance Manager

Through the interview process, the PCM indicated that most PREA information can be found on the agency website.

PROVISIONS**Provision (a)**

On the PAQ the facility reported the agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including:

Identifying problem areas;

1. Taking corrective action on an ongoing basis; and
2. Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole

The PD verified this.

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

Provision (b)

The facility reported on the PAQ, the annual report includes a comparison of the current year's data and corrective actions with those from prior years. This was verified by the Agency Head Designee through the interview process.

	<p>The Auditor reviewed the most recent annual report from 2022 and found it to follow the PREA standards, including a comparison to the findings in previous reports to assess progress in addressing sexual abuse. This annual report can be located at http://www.doc.state.al.us/PREA.</p> <p>Provision (c)</p> <p>The PAQ indicates the agency makes its annual report readily available to the public at least annually through its website.</p> <p>As required by standard, the ADOC places all annual reports on its website, accessible for public view. http://www.doc.state.al.us/PREA allows access to the ADOC PREA webpage, which contains each annual report since 2013.</p> <p>Provision (d)</p> <p>The facility reported on the PAQ when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. This was verified by the PD during the interview process.</p> <p>The PREA Director indicated that the agency reviews data collected pursuant to 115.87 while only redacting personal identifying information. All other information is included in the annual report.</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding data review for corrective action.</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided. 2. ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. Alabama Department of Corrections publicly accessible website http://www-doc.state.al.us/PREA <p><u>INTERVIEWS</u></p> <p>PREA Director (PD)</p>

During the interview process the PD indicated the facility/agency retains data in secure locations. At the local level, data is retained within a local Risk Management System and access to the system is limited to those staff with a need to know. Additional data is retained at the Agency level as required for completion of the SSV-2, and within the ADOC website for public access.

During the interview process the PD indicated the agency reviews data collected pursuant to 115.87, and that the only information redacted from the agency report is personal identifying information. Most information related to inmates is kept permanently in the SCRIBE database

PROVISIONS

During the interview process the PREA Director indicated the agency reviews data collected pursuant to 115.87, and that the only information redacted from the agency report is personal identifying information.

PROVISIONS

Provision (a)

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

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

Provision (b)

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

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

Provision (c)

According to the PAQ the agency:

1. Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.
2. Maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.

Provision (d)

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

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

Provision (b)

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

Provision (c)

N/A

Provision (d)

N/A

Provision (e)

N/A

Provision (f)

N/A

Provision (g)

N/A

Provision (h)

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

Provision (i)

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

Provision (j)

N/A

Provision (k)

N/A

Provision (l)

N/A

	<p>Provision (m)</p> <p>During the on-site portion of the audit, the Auditor was provided with a secure, private space to conduct all interviews.</p> <p>Provision (n)</p> <p>During inmate interviews, all inmates reported being provided the opportunity to send confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Provision (o)</p> <p>N/A</p> <p><u>CONCLUSION:</u></p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the agency/facility meets every provision of the standard regarding frequency and scope of audits.</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p><u>DOCUMENTATION:</u></p> <ul style="list-style-type: none"> Alabama Department of Corrections publicly accessible website http://www-.doc.state.al.us/PREA <p><u>PROVISIONS</u></p> <p>Provision (a)</p> <p>N/A</p> <p>Provision (b)</p> <p>N/A</p> <p>Provision (c)</p> <p>N/A</p> <p>Provision (d)</p> <p>N/A</p>

Provision (e)

N/A

Provision (f)

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

CONCLUSION:

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

Appendix: Provision Findings**115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
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115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
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Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
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115.12 (a) Contracting with other entities for the confinement of inmates

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
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115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes
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	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

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

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

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

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

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b) Policies to ensure referrals of allegations for investigations		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c) Policies to ensure referrals of allegations for investigations		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a) Employee training		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

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

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

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

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

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

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

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

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

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

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

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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

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

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

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

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>