

PREA Facility Audit Report: Final

Name of Facility: Whiteville Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: 01/06/2023

Date Final Report Submitted: 06/05/2023

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: Jillian Shane	Date of Signature: 06/05/ 2023

AUDITOR INFORMATION	
Auditor name:	Shane, Jillian
Email:	jillianshane@sbcglobal.net
Start Date of On-Site Audit:	12/06/2022
End Date of On-Site Audit:	12/08/2022

FACILITY INFORMATION	
Facility name:	Whiteville Correctional Facility
Facility physical address:	1440 Union Springs Road , Whiteville, Tennessee - 38075
Facility mailing address:	P.O. Box 679, Whiteville, , Tennessee - 38075

Primary Contact

Name:	Shameka Bivens
Email Address:	Shameka.Bivens@corecivic.com
Telephone Number:	615-904-5872

Warden/Jail Administrator/Sheriff/Director

Name:	Chance Leeds
Email Address:	Chance.Leeds@corecivic.com
Telephone Number:	731-254-0801

Facility PREA Compliance Manager

Name:	Shameka Bivens
Email Address:	shameka.bivens@corecivic.com
Telephone Number:	

Facility Health Service Administrator On-site

Name:	Leslie Norfork
Email Address:	Leslie.Norfork@corecivic.com
Telephone Number:	731-254-0829

Facility Characteristics

Designed facility capacity:	1536
Current population of facility:	1504
Average daily population for the past 12 months:	1511
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Males
Age range of population:	19-78
Facility security levels/inmate custody levels:	Medium and Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	297
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	20
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	12

AGENCY INFORMATION	
Name of agency:	CoreCivic, Inc.
Governing authority or parent agency (if applicable):	
Physical Address:	5501 Virginia Way, Suite 110, Brentwood, Tennessee - 37027
Mailing Address:	
Telephone number:	6152633000

Agency Chief Executive Officer Information:	
Name:	Damon T. Hininger
Email Address:	
Telephone Number:	6152633000

Agency-Wide PREA Coordinator Information
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Name:	Eric Pierson	Email Address:	Eric.Pierson@corecivic.com
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

1

- 115.17 - Hiring and promotion decisions

Number of standards met:

44

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:	2022-12-06
2. End date of the onsite portion of the audit:	2022-12-08

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
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	SANE, Rape Crisis, Ethics

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1536
15. Average daily population for the past 12 months:	1511
16. Number of inmate/resident/detainee housing units:	7
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ 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**

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1498
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	3
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	6
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	4

44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	12
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	26
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	278
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	22

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	16
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	None
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	18
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☒ Gender ☐ Other ☐ None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Based on roster with intake date, race, unit characteristics
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	13
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".	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	3
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/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/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	None at facility, spoke with medical and management
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/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/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	None at facility, spoke with medical and management
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2

65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	4
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/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/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	None at facility, spoke with medical and management; reviewed segregation logs
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	15
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☒ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
If "Other," describe:	gender
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	no barriers, all shifts

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.

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

26

76. Were you able to interview the Agency Head?

☒ Yes

☐ No

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

☒ Yes

☐ No

78. Were you able to interview the PREA Coordinator?

☒ Yes

☐ No

79. 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)

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

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

	☒ Other
If "Other," provide additional specialized staff roles interviewed:	Mailroom, volunteer services coordinator, grievance officer, segregation CO
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☐ Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☒ Medical/dental ☒ Food service ☐ Maintenance/construction ☐ Other

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

88. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☒ Yes ☐ No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.
SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY	
Sexual Abuse and Sexual Harassment Allegations and Investigations Overview	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	15	0	15	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	15	0	15	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	4	0	4	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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	6	8	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	1	6	8	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	1	0
Staff-on-inmate sexual harassment	0	1	1	0
Total	0	2	2	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

7

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	4
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

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

2

112. 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)

113. 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)

114. 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**

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. 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

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.11 (a): Policy 14-02, Sexual Abuse Prevention and Response states that CoreCivic is committed to protecting inmates and detainees from personal abuse, corporal punishment, personal injury, disease, property damage and harassment. Sexual abuse in correctional institutions is a public safety issue that can impact facility order and security. It victimizes vulnerable inmates/detainees, causes psychological trauma, can increase the spread of communicable diseases, and can elevate the risk of violence and tension in a correctional facility. Core Civic has zero tolerance toward all forms of sexual abuse and sexual harassment. When it is learned that an inmate may be subjected to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate/detainee. Inmates who sexual abuse fellow inmates will be disciplined and may be subject to criminal prosecution. Inmate victims of sexual abuse or harassment will be provided with a supportive and protective environment. Regardless of consensual status, sexual activity between inmates and employees, contractors, or volunteers is strictly prohibited and is subject to administrative and criminal disciplinary sanctions. It is Core Civic policy to aggressively investigate all allegations, regardless of the source,

and prosecute those who are involved in incidents of sexual abuse that are criminal in nature.

Policy 14-02, Sexual Abuse Prevention and Response further details and outlines the CoreCivic's approach to preventing, detecting and responding to sexual abuse and sexual harassment. These sections of policy include, but are not limited to Reporting for staff, inmate/inmate reporting, training, background checks, staffing, supervision and monitoring, Sexual Abuse Response Team (SART), inmate/inmate screening and education, response procedures, and investigations.

115.11 (b): CoreCivic has designated a Senior Director, PREA Compliance and Programs to be the agency PREA Coordinator. This upper-level management Facility Support Center employee is responsible for development, implementation, and oversight of CoreCivic efforts to comply with PREA Standards and the agency Sexual Abuse Response and Prevention Program. He provides supervisory oversight to all CoreCivic facilities ensuring coordination in the prevention, detection, interventions, investigation, and disciplinary/prosecution of sexual abuse as outlines in this policy.

At the time of the initial audit and review, the facility Warden provided the auditor with an email that went to all staff and stated that the Assistant Warden Bryant is the designated PREA Compliance Manager. Since, with the appointment of the new PCM, a new email went to staff advising them of the new PCM.

115.11 (c): Policy 14-02, Sexual Abuse Prevention and Response states that each CoreCivic facility has a designated PREA Compliance Manager to coordinate efforts at the facility level to comply with PREA standards. This position is an Administrative Duty Officer level manager appointed by the Warden who maintains responsibility for the facility's Sexual Abuse Response and Prevention Program.

An interview as well as numerous informal discussions were conducted with the PREA Coordinator (PC) for the Agency. He was extremely knowledgeable about his roles and responsibilities, the standards, the policy and the things that our in operations for this facility and the Agency. He indicated that he feels that he has proper authority and time to complete the duties which could also be seen by the response from staff, the documents reviewed and the processes in place.

An interview as well as numerous informal discussions were conducted with the PREA Compliance Manager for the facility. Based on the documents provided, the answers and responses provided and the program at the facility, the auditor did not feel that the PCM has the influence and understanding necessary to lead, coordinate, guide, and monitor successful ongoing implementation of policies and procedures that comply with the PREA standards across all departments within the facility. As part of the corrective action, the facility appointed a new PCM, who was interviewed by the auditor via phone. She was extremely knowledgeable and began the corrective action period to include completing the necessary steps for each standard that did not meet compliance. During the corrective action period, that individual was promoted to another facility as Warden. A new AW came to the facility and was announced to be

	the new PCM. She as well was interview, was a PCM before and has been involved with PREA compliance since 2003. She was extremely knowledgeable and was aware of the corrective action. In the final days of the corrective action period, she was engaged and completed the steps necessary. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: Prisons and Jails PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Organizational Chart for CoreCivic Correctional Programs Division Job Description of the Senior Director, PREA Programs and Compliance HR Email Announcing PREA Audit & Compliance Senior Director Email introducing the Director of PREA Compliance and Investigations CoreCivic Summary of Current Job Performance Characteristics for Senior Director of PREA Programs and Compliance Interview of PREA Coordinator for CoreCivic (Senior Director) Interview of PREA Compliance Manager Organizational Chart Memo
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The auditor was also provided with an agreement with the Tennessee Department of Corrections and CoreCivic. This contract outlined PREA Reporting information, definitions, prohibited acts, and other PREA related requirements. In the contract, it stated that the contractor must comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42 USC 1506 et. seq.) with all applicable Federal PREA standards and with all State policies as may be revised and standards related to PREA for preventing, detecting, monitoring, investigating and eradicating any form of sexual abuse within facilities/programs/offices owned, operated, or contracted. In addition, the contract states that the State has the right and authority under this Contract to monitor Contracts performance hereunder. Such monitoring shall include but not be limited to observing and reporting on the day-to-day operational performance of Contractor regarding compliance with all terms and conditions of this contract.

	Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: Prisons and Jails PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with Vice President Operations Administration, CoreCivic Contract with TDOC
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02, Sexual Abuse Prevention and Response states that it is CoreCivic policy to aggressively investigate all allegations, regardless of the source, and prosecute those who are involved in incidents of sexual abuse that are criminal in nature. Policy 14-02 Sexual Abuse Prevention and Response states in section D, Staffing, that: The facility, in coordination with CoreCivic FSC will develop, shall develop a staffing plan that provides for adequate levels of staffing to protect inmates/detainees against sexual abuse. The location of video monitoring systems will be considered when determining adequate levels of staff. The policy continues on to state that in calculating staff levels and determining the need for video monitoring, the following factors shall be taken into consideration: 1. Generally accepted detention and correctional practices; 2. Any judicial findings of inadequacy; 3. Any findings of inadequacy from federal investigative agencies; 4. Any findings of inadequacy from internal or external oversight bodies; 5. All components of the facilities physical plan (including ‘blind spots’ or areas where staff and inmates/detainees may be isolated; 6. The composition of the inmate/detainee population; 7. The number and placement of supervisory staff; 8. Institutional programs occurring on a particular shift; 9. Any applicable state or local laws, regulations, or standards; 10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse and; 11. Any other relevant factors. The facility provided and the auditor reviewed the 2022, 2021 and 2020 14-02 Staffing Plan review and saw that the facility assessed, determined, and documented whether adjustments are needed to the staffing plan, whether adjustments are

needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

Staffing plans for 2021 and 2022 for this facility were reviewed by the auditor.

(b) Policy 14-02 Sexual Abuse Prevention and Response states the PREA Compliance Manager shall document and describe the deviation on the 5-1B Notice to Administration, along with a thorough justification for the deviation and description of any corrective actions that were taken to resolve the deviation.

During the audit review period, the facility stated that there has been no instances in which they were required to deviate from the staffing plan.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that following consultation with the facility staff, the FSC PREA Coordinator shall assess, determine, and document whether adjustments are needed to:

- The staffing plan established pursuant to this section;
- The facility's deployment of video monitoring systems and other monitoring systems and other monitoring technologies; and
- The resources the facility has available to commit to ensure adherence to the staff plan.

The respective Business Unit Vice President/designee shall approve the Annual Staffing plan Assessment. Any changes to policy and/or procedure, physical plant, approved capital expenditures, video monitoring and/or technology, or staffing require approval of the respective Business Unit Vice President.

The facility provided and the auditor reviewed the 2021 and 2022 14-02I Staffing Plan review and saw that the facility assessed, determined, and documented whether adjustments are needed to the staffing plan, whether adjustments are needed to prevailing staffing patterns, whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies, and whether adjustments are needed to the resources the facility has available to commit in order to ensure adequate staffing levels.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be prohibited from altering other employees that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

The facility indicated that there were no instances in which they deviated from the staffing plan during the review period. While on site, supervisors and the PCM indicated that they were aware of the requirements and process to document and report this.

	The auditor was provided a list of the cameras at the facility, and while onsite, the officer review the camera angles, function and discussed with staff who have access. The auditor randomly selected various log books while in units/pods and reviewed the documentation of the staff documented the unannounced rounds. While onsite, the auditor noticed some areas that would benefit from mirrors for additional coverage and viewing. In addition, some areas had shelving and boxes which created blind spots. The facility immediately added mirrors to the suggested areas and provided pictures to the auditor to demonstrate the coverage. While onsite, the auditor observed various posts on all shifts, in person and through cameras, to assess where officers complete walkthroughs, their lines of site, amount of time between rounds and supervisory functions and availability to respond. The facility demonstrated that staff rounds are completed up to and including ADO staff on daily and weekly basis, inmates are afforded privacy from staff of the opposite gender, and are available to the inmate population to address any concerns. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: Prisons and Jails PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response 14-2, Annual PREA Staff Plan Assessment Supervisory interviews Warden and PCM interview Tour of physical plant Review of camera placement and viewing Physical Plant Diagram Staffing Plan Administrative Duty Officer Live Staff Roster Review Supervisor Daily Hours Report – Day and Night Shift Logbook, Supervisory Rounds Unannounced Rounds signage
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a)(b) (c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared

dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

(b) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a) (b) (c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

(c) Policy 18-2, Classification and Inmate/Detainee Management states in the section for housing considerations that in accordance with PREA 115.14 (a)(b) (c), a youthful offender shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area, or sleeping quarters. Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

Further, policy states that in accordance with PREA 115.14 (c), absent exigent circumstances, agencies shall not deny youthful inmates daily large muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.

The facility advised the auditor, in writing, that no youthful offenders are housed at this facility. The auditor requested and was provided a roster of all inmates with their dates of birth and verified that there were no youthful offenders.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

Prisons and Jails PREA Standards Compliance Checklist
Policy 14-02 Sexual Abuse Prevention and Response
Roster of Inmates with Ages/Dates of Birth
Interviews with Warden, PC and PCM
Interviews with Random Staff

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard Auditor Discussion (a) Policy 14-02, Sexual Abuse Prevention and Response states that cross gender inmate/detainee strip searches shall not be conducted except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order) or when performed by medical practitioners. Policy 9-5, Searches of Inmate and Various Locations states that body cavity searches are not authorized at CoreCivic facilities and will not be conducted by CoreCivic personnel without the prior approval of the Vice President, Operations. Policy 9-5, Searches of Inmate and Various Locations states that the strip search shall be conducted by employees of the same sex as the inmate/detainee being searched except in temporary unforeseen circumstances that require immediate action to combat a threat to the security or institutional order of a facility. Any occurrence of such cross-gender strip searches shall be documented in the 5-1 Incident Report administration process using form 5-1B Notice to administration. Security staff shall be trained on how to conduct cross-gender strip searches. (b) The provision is not applicable, as the rated capacity does exceed 50 inmates. (c) Policy 9-5, Searches of Inmates/Inmates and Various Locations states that strip searches based on Reasonable Suspicion are to be documented as follows: • Date and time of the search; • Person authorizing the search; • Person or persons conducting the search; • Whether anal area was inspected; • Whether ay body cavity was searched; • Reason for search and • Results of the search. (d) Policy 14-02, Sexual Abuse Prevention and Response states that inmates/ detainees may shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttock, or genitalia, except in exigent circumstances (that is, temporary unforeseen circumstances that require immediate action in order to combat a threat to security or institutional order) or when such viewing is incidental to routine living quarter checks. Policy continues to state that employees of the opposite gender must announce their presence when entering an area where inmates/detainee are likely to be showering, performing bodily function or changing clothing. While completing the walkthrough of the facility, female staff completed these announcements loudly, each time and area

where an inmate could be in a state of undress was entered.

(e) Policy 14-02, Sexual Abuse Prevention and Response states that searches or physical examination of a transgender or intersex inmate/detainees for the sole purpose of determining the inmates/detainee's genital status is prohibited. If the inmate/detainee's genital status is unknown, it may be determined during conversations with the inmate/detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

Policy 9-5, Searches of Inmate and Various Locations states that searches or physical examination of a transgender or intersex inmate/detainee for the sole purpose of determining the inmates/detainee's genital characteristics is prohibited. Security staff shall be trained in how to conduct searches of transgender and intersex inmates.

(f) Policy 14-02, Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, security staff shall receive training in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates/detainees, in a manner that is professional, respectful, and the least intrusive possible while being consistent with security needs.

Procedure in this policy states that all searched shall be conducted in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs and policy, including officer safety.

The CoreCivic Training Facilitators Guide for Search Procedures was reviewed by the auditor. In this guide, and referenced on slide six, the guide states that searches of transgender or intersex inmate should be conducted in accordance with the inmate's gender identity and by asking the individual to identify the staff with whom they would feel most comfortable conducting the search. Inmate who are suspected of changing their identity and/or search preferences to evade security screening procedures should be reported to supervisory personnel. Staff should never conduct a 'dual gender' pat search, i.e.: where the staff of one gender searches the top half of the inmate and the staff of the opposite gender searches the bottom half of the inmate.

The guide also states that cross gender searches and searches of transgender and intersex inmate should be conducted in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs. Finally, pat searches of transgender visitors should be conducted in accordance with the gender identity of the visitor.

During the walkthrough of the facility, on the entry doors to the housing areas, signage which stated "staff of the opposite gender must announce themselves upon entry".

The facility indicated on the PAQ that in the past twelve months, there have been zero

	cross gender strip or cross gender visual body cavity searches of inmates. During the facility walkthrough and during a review of the cameras, the auditor observed areas where inmates would be in any state of undress as well as areas where strip searches may occur. Each of these areas allowed for protection of the inmate in that they were open at the top, in an open area with proper doors and curtains to allow for others to hear, while allowing for privacy from staff of the opposite gender viewing. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 9- 5, Searches of Inmates/Residence and Various Locations Lesson Plan for Searches Training Curriculum – Guidance in Cross Gender and Transgender Pat Searches Strip Search Logs Training Acknowledgement Sheets
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility and agency efforts to prevent, detect and respond to respond to {sic} sexual abuse and sexual harassment. Inmates who are deaf or hard of hearing shall have access to information through simple written or oral communication. Sign language interpreters, or auxiliary aids such as a TTY that are reasonable, effective, and appropriate to the needs of the inmate shall be provided when simple written or oral communication is not effective. Policy goes on to state that the facility will ensure that information is effectively communicated orally, on an individual basis, to inmate with limited reading skills. In the event an inmate has difficulty understanding provided inmate and/or procedures due to intellectual deficiencies or mental health concerns, the facility will ensure that such information is effectively communicated orally to such inmates on an individual basis. A TDD Machine and its manual for the hearing impaired is located in the shift supervisor's office.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall take reasonable steps to ensure meaningful access to all aspects of the facility and agency efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are Limited English Proficient (LEP). Interpreters shall be provided who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

For those inmates/inmates who are limited English proficient with Spanish as a primary language, a flier entitled "Sexual Assault Awareness and Prevention" is available in both English and Spanish. This flier is educational and outlines the PREA education requirements to the inmate population.

The receiving and discharge acknowledgment which included the handbook acknowledgment is also available in both English and Spanish.

The video, called PREA: What you need to know, is available in English, Spanish and Hmong.

The inmate handbook was provided and reviewed, with all required education materials for PREA.

A contract between Language Lines Services, Inc. and CoreCivic of Tennessee, LLC. was provided to and reviewed by the auditor. The contract provides for over-the-phone services for translation and was last executed on February 17, 2019. It provides for interpretation services in over 200 languages. In addition, the facility can use LanguageLine Insight Video Interpreting which has I demand access in the 36 top languages, Spanish and American Sign Language interpreters available 24/7/365.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that inmates will not be relied upon to provide interpretation services, act as readers, or provide other types of communication assistance, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate'/inmates safety, the performance of first-responder duties, or the investigation of the inmate's allegations.

In the past twelve (12) months, the facility indicated that there were no instances where inmate interpreters, readers or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety.

An interview with CoreCivic Vice President, Operations Administration was conducted, and he indicated that the CoreCivic corporate office aids facilities that enable them to locate potential vendors and/or agencies that would provide support services for inmates/inmates with disabilities. The agency maintains a comprehensive contract with the Language Line and some when have an MOU with organizations in the local communicates to provide translation services when needed. TTY phones are provided, and arrangements are also made to assist those inmates/inmates who are blind.

	At the time of the audit, there were no inmates who were blind, with low vision, deaf or with cognitive deficits. MH would assist with any inmates, should they need assistance with reading or the understanding of the written materials. The posters and signs throughout the facility were of larger fonts and colors and were placed at a level where inmates could see who may have vision deficiencies. The auditor selected to LEP inmates and asked two facility staff to utilize the language line. Each was able to call in a private room and the line was used to speak with the inmate (it should be noted that each of these inmates did speak and understand English as well and they do not regularly rely on this line). Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Sexual Assault Awareness and Prevention Brochure (English and Spanish) Inmate Handbook Language Line contract and flier Video PREA: What you need to know Interview with Inmate with use of the Language Line Interview with CoreCivic Vice President, Operations Administration Handbook for those with limited vision Use of Language Line with Inmate Random Staff Interviews Memo
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that to the extent permitted by law, CoreCivic will decline to hire or promote anyone who may have contact with inmates/inmates and decline to enlist the services of any contractor who may have contact with inmates/inmates who: 1. has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 USC 1997); 2. has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent or refuse; and

3. has been civilly or administratively adjudicated to have engaged in the activity as outlined above.

The 14-2H, Self-Declaration of Sexual Abuse/Sexual Harassment form, which is signed by every employee, asks each employee if they have ever with the three above questions, and in addition, asks if they have ever had a substantiated allegation of sexual harassment made against them.

(b) Policy 14-02 Sexual Abuse Prevention and Response states any incident of sexual harassment shall be considered in determining whether to hire or promote any individual, or to enlist the services of any contractor, who may have contact with inmates.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that before hiring new employees who may have contact with inmates/inmates, CoreCivic shall:

1. perform a criminal background records check; and
2. consistent with federal, state and local law make its best effort 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 as defined by this policy. The 3-20-2A Verification of Employment form shall be used to solicit such prior employment information.

Form 3-20-2B PREA Questionnaire for Prior Institutional Employers was reviewed. It is signed by all prospective hires and is a release of information to be sent to all prior institutions that the person may have worked at. HR staff interviewed and walked the auditor through their process of this form and the use of the information in consideration during the hiring process.

The authorization for security clearance form states 'I understand omission of any item may result in not receiving full consideration for employment'. This form is signed by every applicant.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic in partnership with their oversight agencies shall also perform a criminal backgrounds records check before enlisting the services of any unescorted contractor who may have contact with inmates/detainees.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic shall ensure that criminal history record checks are conducted at least every five years for current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that all applicants and employees and contractors who may have direct contact with inmates/inmates shall

be asked about previous misconduct, as outlined above, in written applications and in any interviews or written self-evaluations conducted as part of reviews of current employees.

Form 14-2H is a self-declaration of Sexual Abuse/Sexual Harassment signed by current employees and contractors on an annual basis to serve as verification of the fulfillment of his/her continuing affirmative duty to disclose any sexual misconduct as part of an annual review process.

The form entitled 'self-declaration of sexual abuse/sexual harassment' states that "you certify your understanding that if you provide false or fraudulent information you could be disqualified from further consideration for employment or, if falsity is discovered after you have become employees, terminated from employment". This form is signed by each applicant, employee and unescorted contractor.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that to the extent permitted by law, CoreCivic may decline to hire or promote and may terminate employment based on material omissions regarding such misconduct, or the provision of materially false information.

(h) Policy 14-02 Sexual Abuse Prevention and Response states that unless prohibited by law, CoreCivic shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

A roster of all facility staff was provided to the auditor which included 278 staff in total. Twenty-three employee names were selected to be reviewed by the auditor, at random, from various shifts, ranks and positions, custody and non-custody. Each staff member must sign a self-declaration of sexual abuse/sexual harassment. This is completed on two forms, one for the Tennessee Department of Correction, form CR-3819 and one for CoreCivic, Form 14-2H. In addition, background check information was included in each file, which the Tennessee Department of Correction completes upon hire and then annually, based on their birthday month. Lastly, the HR department contacts each prior institutional employer to inquire if the employee has been involved in any substantiated PREA related matters or if they resigned while an investigation was pending, completed on form 3-20-2A. Each form is done upon hire, transfer or promotion.

The Chaplain coordinates all volunteer training and clearances. An interview was held with the Chaplain while onsite. A list of all approved volunteers was provided to the auditor. Of these, four were randomly selected and the auditor requested verification that they received background checks and clearances that were ran through the TDOC process for all employees.

(d) and (e): During an interview with the Human Resource Manager, the auditor was provided a list of the current twenty-four (24) contractors who are currently at the facility. The HR Manager stated that these workers are in medical and food service and each go through the same hiring process as all other staff. Background clearance

forms, titled Tennessee Department of Correction Vendor/Contract Employee Criminal History Results form, CR 3704. For each contractor, HR provided their clearance form demonstrating that each was cleared. These are maintained in a file in HR for each contractor. The auditor randomly selected two of these contracted staff members, one from food service and one from medical and HR provided their background checks and hiring packets, which demonstrated compliance with this standard.

The Human Resource Manager detailed the process for newly hired staff, promotions, transfers and contract staff. In addition, a blanket packet of each type of paperwork was provided to the auditor.

For new hires, they complete: Fingerprint Employee Information Sheet, Previous Employment Sheet, Privacy Rights, Criminal History Request, Self-Declaration of Domestic Violence Conviction, Self-Declaration of Sexual Abuse/Sexual Harassment (TDOC and CoreCivic), Background Investigation Disclosure and Authorization Form, New Hire Information, and Testing and Consent Form.

For promotions, staff complete: Job description acknowledgement, Self-Declaration of Sexual Abuse/Sexual Harassment (TDOC and CoreCivic), and personal relationships disclosure.

For all staff/contractors annually: Employee information update, Privacy Rights, Criminal History Request, Self-Declaration of Domestic Violence Conviction, Self-Declaration of Sexual Abuse/Sexual Harassment (TDOC and CoreCivic), Background Investigation Disclosure and Authorization Form and Fingerprint Employee information Sheet.

The facility conducts background checks on an annual basis, based on birthday month, for each contractor, employee and volunteer, well above and beyond the standard. In addition, HR would call additional employers that may have a level of power or authority over persons such as medically related and those relating to minors to be sure there was no misconduct related to the potential hires previous employment, well above the standard.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist

Policy 14-02 Sexual Abuse Prevention and Response

CDCR Statement of Work

New Hire Paperwork Samples

Promotion Paperwork Sample

Contract Worker Sample

14-02 H Form

Employee Background Request

Self-Disclosure / Declarations form

Final Approval

Background investigation Disclosure and Authorization form

Authorization for Security Clearance

	Provisional Clearance Letters Interviews with HR Staff Member Interview with PCM and PC
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) The facility indicated to the auditor by memo and during discussions that during the past twelve (12) months, there have been no substantial expansions or modifications to the facility. Policy 14-02 Sexual Abuse Prevention and Response states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, CoreCivic will consider the effect of the design, acquisition, expansion, or modification on the company's ability to protect inmates from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations. A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations. (b) Policy 14-02 Sexual Abuse Prevention and Response states that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, CoreCivic will consider how much technology may enhance the ability to protect inmates/inmate from sexual abuse. Such considerations shall be documented on form 7-1B PREA Physical Plant Considerations. A blank copy of form 7-1B PREA Physical Plant Considerations was reviewed by the auditor. The form prompts the reviewer to consider the elements of the standard and document concerns or considerations. The CoreCivic Vice President of Operations Administration states that CoreCivic employs architects and other professionals who through experience, research and consulting have knowledge of the issues and needs presented by PREA. On new builds and renovations, the design staff will consult with the PREA coordinator for recommendation and work to ensure that PREA is addressed. Real estate and design staff receive information from the field on privacy concerns in areas such as showers, restrooms, and any areas where inmates/detainees may be in a state of undress. Blind spots are identified that can be corrected through video surveillance coverage. During acquisitions, the staff making the site visits develop a preliminary assessment and the PREA coordinator is involved in the review of physical plant issues. At existing facilities, a form 7-1B (PREA Physical Plant Considerations) issued to ensure

	PREA I considered when initiating a renovation/new construction. In addition, the VP states that cameras are used to support direct/indirect staff supervision. Better quality systems have been installed and consideration to optimal coverage is addressed at the time of these upgrades. Camera placement also takes into consideration the privacy needs for cross gender viewing in areas like restrooms and shower areas. Technology is also discussed with the facility during the PREA Staffing Plan assessment that is reviewed each year by facility staff and the FSC PREA coordinator. The auditor completed a walkthrough of all facility grounds and saw cameras in place throughout the facility. In numerous locations, the auditor sat with staff to review all camera angles. In addition, the auditor was provided a printout of all cameras. There has not been a camera or building upgrades since the previous audit. Each camera allowed for coverage and aimed to eliminate blind spots. No cameras were seen to have viewed of restrooms or shower areas. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 7-01B Form for plant physical assessment and improvement Interview with PC Interview with PCM Facility Walk through Interview with Agency Head List of all facility cameras
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that the investigating entity shall follow a uniform evidence protocol that maximize the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Further, CoreCivic policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate/inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate/inmate to be transported to

the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease.

(b) The TDOC Investigative Unit will conduct all criminal investigations for this facility. TDOC Policy Index 502.06.2, *Prison Rape Elimination Act Allegations, Investigations and Sexual Abuse Response Teams* is the policy used to outline the process and requirements of this standard that TDOC will utilize.

The protocol outlined by the facility and in documentation has been adapted from and is based on the most recent edition of the US Department of Justice's Office on Violence Against Woman publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents".

CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that an as appropriate, it shall be adapted from or otherwise based on the most recent editions of the Department of Justice's Office on Violence Against Woman publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocol developed after 2011.

(c) According to the PAQ, there were three SANE exams conducted during the review period.

(d) A Memorandum of Understanding between CoreCivic and the Wo/Men's Resource and Rape Assistance Program (WRAP) was reviewed and states that will, if requested by the victim, allow a victim advocate to accompany and support the victim through the forensic medical examination process and investigator interviews, and provide emotional support, crisis intervention, information and referrals. This was signed in 2020.

Further, CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall offer all victims of sexual abuse access to forensic medical exams, where evidentiarily or medically appropriate. The PCM, Facility Investigator or ADO shall consult with law enforcement prior to transporting an inmate for an examination to be performed by a SAFE or SANE. If it is determined that examination is necessary for the collection of evidence, then the facility shall transport the alleged victim. If a SAFE/SANE provider is not available, the examination may be performed by other qualified medical practitioners.

(e) CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that as requested by the victim, either the victim advocate, or a qualified facility staff person shall accompany and support the victim through the forensic medical examination process and investigatory interviews.

A Memorandum of Understanding between CoreCivic and the Wo/Men's Resource and Rape Assistance Program (WRAP) was reviewed and states that will, if requested by the victim, allow a victim advocate to accompany and support the victim through the

forensic medical examination process and investigator interviews, and provide emotional support, crisis intervention, information and referrals. This was signed in 2020.

(f) CoreCivic Policy 14-02 Sexual Abuse Prevention and Response states that investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulations, Title 28, Part 115.21, Evidence Protocol and Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity (i.e. state or local law enforcement, contracting agency, etc) comply with these regulations.

(g) Auditor is not required to audit this provision.

(h) Policy states that if unable to secure services of a victim advocate to accompany the alleged victim to the SAFE/SANE exam, and if requested by the victim, the facility may use a qualified facility staff member for this purpose. The staff member must have been screened by SART and the Warden for appropriateness to serve in the role and must have received documented education concerning sexual assault and forensic examination issues.

Administrative Investigations are completed onsite by CoreCivic Staff. Currently one staff (from neighboring facility) is trained, and documentation of this training was provided to the auditor.

The auditor also spoke with a staff member at the SANE unit who would respond to incident should an incident occur. She described the protocols and processes which were in accordance with the standards and guidelines mentioned.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist
Policy 14-02 Sexual Abuse Prevention and Response
Policy 13-79 Sexual Assault Response with 13-17A Sexual Assault Protocol
Investigation Outline and Protocol
Sample Incident Report
Uniform Evidence Protocol
A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents
Interview with SANE staff
Interview with PCM
Interview with custody staff
Interview with PC

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that the Administrator/ Director shall immediately report all allegations of sexual abuse, sexual assault and sexual harassment to a law enforcement agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior or the allegation would be not be {sic} considered a criminal act under federal, state or local law. Policy 5-1, Incident Reporting, states that when an allegation that a Priority PREA incident has occurred, a 5-1E PREA Reporting form will be initiated. Upon completion of the investigation, the 5-14E will be used to document the act as substantiated, unsubstantiated or unfounded. In the event the act is substantiated, any sanctions must be documented on the 5-1E. Completed 5-1E forms will be maintained with the 5-1 packet. The TDOC Investigative Unit will conduct all criminal investigations for this facility. TDOC Policy Index 502.06.2, Prison Rape Elimination Act Allegations, Investigations and Sexual Abuse Response Teams is the policy used to outline the process and requirements of this standard that TDOC will utilize. According to the PAQ, during the twelve (12) month period prior to this audit, there were twenty-one incidents reported of sexual abuse and sexual harassment at the facility which were investigated administratively and criminally. Fifteen of these were potentially criminal and forwarded to criminal investigators at TDOC. While onsite for the audit, the facility provided the auditor with documentation that all criminally related matters were forwarded to the TDOC investigative unit. However, after interviews with inmate victims, it was discovered that many of these were not investigated or followed up by staff. As part of corrective action, CoreCivic staff and TDOC staff reviewed all of the cases to discover where the breakdown occurred. All previous cases were reviewed and completed and a new process was developed to ensure all referrals were documented and followed through with. This new process developed was sent to the auditor to review and all investigative, PREA and ADO level staff were training on the requirements of this process and that standards. (b) Policy 14-02 Sexual Abuse Prevention and Response states that all allegation of sexual abuse or sexual harassment shall be referred for investigation to an agency or entity with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. This information is readily available on the CoreCivic Prison Rape Elimination website with links to policy and the standards. (c) Policy 14-02 Sexual Abuse Prevention and Response states that whenever feasible, the facility shall enter an MOU with the outside investigating agency or entity

	outlining the roles and responsibilities of both the facility and the investigating entity in performing sexual abuse investigations. Before developing or attempting to enter an MOU, the facility shall contact the FSC Assistant General Counsel, Vendor Contracts. CoreCivic shall maintain copies of agreements or documentation showing attempts to enter into such agreements. (d) Criminal investigations shall be documented in a written report that contains a thorough description of physical testimonial and documentary evidence and that includes copies of all documentary evidence where feasible. During an interview with the CoreCivic Vice President, Operations Administration, he stated that it is policy to refer all allegations of sexual abuse that are criminal in nature to law enforcement agencies with the legal authority to conduct criminal investigations. All administrative investigations are conducted by CoreCivic investigators who have received the specialized PREA training and/or law enforcement officials. In addition, the VP stated that all allegations are reported in the CoreCivic Incident Reporting Database (IRD) system which triggers an investigation. This system requires multiple levels of administrative oversight and review. All allegations that could result, if substantiated, in criminal violations are referred to the appropriate law enforcement officials (or by contracted partner investigative entity). Our staff works with the outside law enforcement, upon request. Incident Report logs were sent to the auditor to review. There were twenty-one in year preceding and the auditor selected eleven to review. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 5-1, Incident Reporting CoreCivic PREA Statement PREA Allegation Log PREA Allegation Administrative Investigation CoeCivic Website Interview with Specialized Staff Interview with PREA Compliance Manager Interview with PREA Coordinator Interview with CoreCivic Vice President, Operations Administration
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic has mandated zero-tolerance towards all forms of sexual abuse and sexual harassment. In addition, it states that all CoreCivic facility employees shall receive training on CoreCivic's zero-tolerance policy for sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmates/inmates at the facility and at a minimum, all employees shall receive pre-service and annual in-service training on the PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody.

Further, policy states that employees will be trained on:

1. PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody;
2. An employee's duty to report any occurrence of sexual harassment or sexual abuse;
3. How to fulfill employee responsibilities for sexual abuse/sexual harassment prevention, detection, reporting, and response in accordance with this policy;
4. The right of inmates to be free from sexual abuse and sexual harassment;
5. The right of inmates/inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
6. The dynamics of sexual abuse and sexual harassment in confinement;
7. Locations, situations, and circumstances in which sexual abuse may occur;
8. The common reaction of sexual abuse and sexual harassment victims;
9. Signs of victimization;
10. How to detect and respond to signs of threatened or actual sexual abuse;
11. How to avoid inappropriate relationships with inmates/inmates;
12. How to communicate effectively and professionally with inmates/inmate, including LGBTI and Gender Non-Conforming inmates/inmates; and
13. How to comply with laws relevant to mandatory reporting of sexual abuse to outside authorities.

The CoreCivic PREA Overview class and participant Guide was reviewed. The guide included all elements listed above, in the standard and in policy.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that employees transferring to a facility that houses a population whose gender is different from their previous facility, shall receive additional training specific to the population of the newly assigned facility.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that all CoreCivic facility employees shall receive training on CoreCivic's zero-tolerance policy for sexual abuse and sexual harassment. Such training shall be tailored to the gender of the inmates/inmates at the facility and at a minimum, all employees shall receive pre-services and annual in-services training on the PREA National Standards and other applicable state or local laws imposing criminal liability for the sexual abuse of a person held in custody.

The facility provided the auditor with an employee roster listing all current staff, position name and date of hire.

A roster was provided to the auditor with all staff at the facility, with a total of 278 employees. Twenty-two employee files were randomly selected by the auditor to review, which included staff from each shift, security and non-custody, various specialized positions and ranks. The auditor reviewed staff training acknowledgment forms for signature. In addition, in 2021, the facility switched to electronic signature when the training is administered online. IT provided a video demonstration, showing that staff had to verify receipt, acknowledgment and understanding of the training received. Staff must select this option prior to completing the training and the training showing complete on their roster in the training management system.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be required to confirm, by either electronic or manual signature, their understanding of the received training. Signed documentation will be maintained in the employees training file.

1. Staff were trained on the aforementioned elements included in provisions of this standard;
2. Staff signed an acknowledgment that they understood the training that they received;
3. Staff were trained prior to their start date and contact with the population;
4. Those employees that have been at the facility for over one year, receive this training and sign the acknowledgment annually.

Lastly, Policy 4-1 Staff Development and Training states that Orientation and/or Custody training shall be scheduled so that all training is completed before the staff member may work with inmates.

A roster was provided to the auditor with all staff at the facility, with a total of 278 employees. Twenty-two employee files were randomly selected by the auditor to review, which included staff from each shift, security and non-custody, various specialized positions and ranks. The auditor reviewed staff training acknowledgment forms for signature. In addition, in 2021, the facility switched to electronic signature when the training is administered online. IT provided a video demonstration, showing that staff had to verify receipt, acknowledgment and understanding of the training received. Staff must select this option prior to completing the training and the training showing complete on their roster in the training management system.

Of those selected, six staff were late on receiving their refresher training. The facility entered corrective action to ensure all staff are current and provide documentation to the auditor. Each had training completed in the corrective action period and documentation was provided to the auditor. In addition, the training manager was educated on the requirements and documentation required.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

	PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 4-1, Staff Development and Training Training Policy PREA Overview, Participant Guide for Training PREA Training Lesson Plan CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgment Staff Roster In-service training records Transfer training records Orientation training records Staff Training Printout Random Staff interviews HR Files Training Files Discussion with training and HR staff Interview with PCM Interviews with all specialized staff
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that all civilians/ volunteers/contractors who have contact with inmates/inmates shall receive training on their responsibilities pertaining to sexual abuse and sexual harassment prevention, detection, reporting and response as outlined in this policy. Each volunteer receives a manual that of which covers sexual abuse and sexual harassment, policy 14-2. The manual was provided to the auditor to review and includes: the various definitions of acts from PREA and Policy 14-2, sexual abuse awareness, zero-tolerance policy, safety, PREA requirements, reporting by inmates, and reporting to staff. They also receive the handout entitled PREA Overview: Training for Contractors and Volunteers. (b) Policy 14-02 Sexual Abuse Prevention and Response states that the level and type of training provided to volunteers/contractors shall be based on the services they provide and level of contact they have with inmates/detainees. All Volunteers and contractors who have contact with inmates shall acknowledge the CoreCivic zero-tolerance policy regarding sexual abuse and sexual harassment and information on how to report such incidents.

The facility provided the auditor with a list of all contract staff or contractors at the facility. All work in food service and the medical departments.

Each volunteer and contract worker signs the 14-2 A CoreCivic PREA Policy Acknowledgement and/or Training Acknowledgment Form. The training acknowledgement section, which is signed and dated by employee, states: I have listened to the instructors, viewed all video presentations, read all handouts, and I understand the training that I have received. I understand that as an employee, volunteer/contractor it is my responsibility to abide by policy and procedures as directed in the training. If I have questions about the training material presented, or policy/procedures I am aware that it is my responsibility to seek clarification from the class instructor, to my supervisor, the Learning and Development Manager, or the PCM. Five (5) signed samples of this form were provided to/reviewed by the auditor.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that each volunteer or contractor understands the training that he/she has received will be kept in the volunteer or contractors file by either the Learning Development Manager, facility Volunteer Coordinator or other staff designated by the Warden or PCM.

The Chaplain coordinates all volunteer training. An interview was held with the Chaplain while onsite. A list of all approved volunteers was provided to the auditor.

Of these, four were randomly selected and the auditor requested verification that they received training. Each of these signed a Self-Declaration of sexual abuse/harassment, Application for Service as a volunteer, a criminal history request form, TDOC Volunteer Confidentiality and Policy Agreement/Training Certification Form. On this form, it stated that they understand and reviewed the PREA Implementation and Compliance Policy, the PREA Screening, Classification, Education and Monitoring Policy, and the PREA Allegations, Investigations and Sexual Response Teams Policy. In addition, a FormStack print-out is in there file showing that they completed the online PREA Course. In addition, each was given and signed a 14-2 K, which is a CoreCivic form which provides information on the PREA standards, Prevention, detection and response information, and is required to be signed.

An interview was also held with the HR Manager and the same packet was provided and described, as above, as being needed for each volunteer and contractor.

HR provided a list of contract staff to the auditor, of which samples were selected to ensure they had completed the required training. Each selected had documentation of the required training.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist
Policy 14-02 Sexual Abuse Prevention and Response

	Volunteer Manual List of Contractors Volunteer Application Form Self-declaration of Sexual Abuse/Sexual Harassment Volunteer Acknowledgement of PREA training Volunteer List with Organization and start date Live Scan Background Clearance Documentation for selected volunteers and contractors Volunteer Right to Know form, signed by volunteers Interview with Director Interview with Volunteer Coordinator (Program Supervisor) Interview with Volunteer Inquiry with Front Desk Staff Contract staff file Memo
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states upon arrival at the facility, all inmates shall be provided written information regarding sexual abuse prevention and reporting. Inmates shall receive comprehensive educational information about the following topics related to this policy within thirty (30) days of intake either in person or through video: 1. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment; 2. How to report incidents, threats or suspicions of sexual abuse or sexual harassment; 3. An inmates/detainees right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents; 4. Availability of policies regarding sexual abuse prevention/intervention; 5. Employee-on-inmate/detainee sexual abuse; 6. Self-protection from sexual abuse; 7. Inmate on inmate sexual abuse; 8. Available emotional support services to include internal and external victim advocates and community support services. Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates, including those who are limited English proficient or disabled.

During the past twelve (12) months, there has been 982 inmates/inmates admitted to the facility who have reviewed and received the education materials.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that within 30 days following intake, either in person or through video, inmates shall receive comprehensive educational information on the follow topics related to sexual abuse and sexual assault prevention and intervention:

1. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment;
2. How to report incidents, threats or suspicions of sexual abuse or sexual harassment;
3. An inmates/detainees right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents;
4. Availability of policies regarding sexual abuse prevention/intervention;
5. Employee-on-inmate/detainee sexual abuse;
6. Self-protection from sexual abuse;
7. Inmate on inmate sexual abuse;
8. Available emotional support services to include internal and external victim advocates and community support services.

No inmates in the past twelve (12) months transferred from a different facility.

Policy 14-02 Sexual Abuse Prevention and Response also states that CoreCivic prevents discrimination based on inmate/detainees race, religion, national origin, sex, disability, or political views in making administrative decisions and in providing access to programs.

Policy 17-101, Admission, Orientations, Property control and Release states that orientation will be conducted and documented on the 17-101A Orientation Verification form for all inmates/inmates. At a minimum, orientation will include the facilities program for prevention, intervention, and remediation of sexual misconduct (PREA) – to include what constitutes sexual misconduct/sexual harassment and the consequences for participating in such activities.

(c). Policy 14-02 Sexual Abuse Prevention and Response states upon arrival at the facility, all inmates shall be provided written information regarding sexual abuse prevention and reporting. Inmates shall receive comprehensive educational information about the following topics related to this policy within thirty (30) days of intake either in person or through video:

1. CoreCivic's zero tolerance policy regarding sexual abuse and sexual harassment;
2. How to report incidents, threats or suspicions of sexual abuse or sexual harassment;
3. An inmates/detainees right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents;
4. Availability of policies regarding sexual abuse prevention/intervention;
5. Employee-on-inmate/detainee sexual abuse;

6. Self-protection from sexual abuse;
7. Inmate on inmate sexual abuse;
8. Available emotional support services to include internal and external victim advocates and community support services.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates, including those who are limited English proficient or disabled.

Further, policy 14-02 states that inmates/inmates will be provided education in formats accessible to all inmates/inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as inmates/inmates who have limited reading skills.

Lastly, policy states that inmates who have been transferred from another facility shall receive intake material from the receiving facility to serve as refresher training.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall maintain documentation of inmate/inmate participation in educational sessions pertaining to sexual abuse and sexual harassment. It also stated that inmates/detainees will be provided education in formats accessible to all inmates/detainees, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates/detainees who have limited reading skills.

Samples of the Receiving and discharge checklist were provided which have a check box indicated 'orientation video shown/PREA video shown' and signed by inmates upon intake.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that inmates shall sign indicating acknowledgement that they have received intake information and the 30 day comprehensive education and this documentation shall be maintained by the facility in the inmate file.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to providing such education, the facility shall ensure that key information is continuously and readily available or visible to inmates/inmates through posters, inmate handbooks, or other written formats.

The auditor asked for and was provided a list of inmates with their intake date into the facility. The auditor selected eight inmates who were present when the standards were implemented. Documentation for each of these inmates was provided for various times frames in 2011 and 2012. In addition, most inmates had additional education and handbook acknowledgement signed documents.

While onsite, the auditor spoke with the education department about the E-TV program that is available to inmates to watch. The PREA video, which includes all elements of this standard, is placed every Tuesday and Thursday for inmates to

watch. A calendar was provided in which he signs off on as they are played.

During the tour, the facility information for inmates to show their access to PREA related processes and policies.

The inmate handbook was provided to the auditor by staff at intake. Beginning on page seven (7) is a section with PREA education. It states:

Sexual Abuse and Harassment of Inmates

1. Whiteville Correctional Facility will provide a safe, human, and appropriately secure environment for all inmates; mandating zero tolerance towards forms of sexual abuse and harassment; and outlining the agency's approach to preventing, detecting and responding to such conduct.

2. At Whiteville Correctional Facility, the designated PREA Compliance Manager is the Assistant Warden of Programs who is responsible for coordinating the facility efforts to comply with all federal PREA standards.

3. Inmate can speak with staff or use the information provided:

All inmates have the right to report cases of sexual assault and/or abuse anonymously and at no cost. Please use the speed dials below regarding instances of sexual assault and/or abuse. If you wish for the facility investigator to provide you with a status of your complaint [sic], you may leave your name. Please note that these speed dials will be the only telephone number that this PIN can dial. All messages will be investigated.

4. In the event of sexual abuse: Do not shower or otherwise clean yourself, or if the assault was oral, do not drink or brush teeth, or otherwise take any action that could damage or destroy evidence.

5. A victim support coordinator will provide counseling and assistance to an inmate reporting to be a victim of sexual abuse. At WCFA, a Mental Health Staff will serve in this role.

6. The inmate will be offered the services of a Victim's Advocate from WRAP-WO/ Men's Resource and Rape Assistance Program by the Mental Health staff. WRAP can: Accompany and support a victim of sexual abuse through the forensic medical examination process; and upon request, provide other victims advocacy services to facility inmates. WRAP will: maintain confidentiality of communication with affected inmates in accordance with federal and state laws and WCFA policies and procedures; and communicate any other questions or concerns to WCFA PREA Compliance Manager.

7. Sexual abuse and harassment are serious and all allegations will be investigated thoroughly. Please note that filing a report usually will not result in cell/unit changes, transfers, or even staff reassignment. If it can be determined that an inmate files a false report; there could be disciplinary infractions initiated or possible outside law enforcement changes.

8. WCFA will work with local law enforcement officials and the District Attorney to prosecute those determined to have sexually assaulted another individual.

9. Any inmate who displays predatory behavior or potential for victimization at any time while incarcerated at WCFA will be referred to the unit team for prescreening as possible identification as a high risk sexual aggressor or confirmed/potential victim.

10. Counseling staff shall meet with each inmate identified as high risk or identified as the victim of a sexual assault for reviewing, monitoring behavior and offer counseling if desired. Mental health referrals may also be made in accordance with TDOC Policy 113.82. In addition to this, Mental Health Staff shall meet with each inmate identified as a confirmed victim of sexual assault for the purpose of reviewing, monitoring behavior and offering counseling if desired.

11. Inmates identified as a high risk sexual aggressor or as a victim/potential victim at any time during his incarceration shall be evaluated for appropriate housing and programs in accordance with CoreCivci Policy 14-2 and applicable TDOC policy.

Inmate reporting information that was posted, continually throughout the facility, was in errors and confusing. The handbook had conflicting and unclear information. Of the inmate files reviewed, five were missing education documents, and all new intakes who were interviewed stated that they had not watched the PREA video, although they were asked to sign for it. The handbook and posting for continuing education were all updated to ensure the information was clear and consistent. In addition, it was moved in locations to be more visible for those who may have lower vision. Picture and samples of these were sent to the auditor to review.

In addition the above reference education, the booking staff created a form entitled Whiteville Correctional Facility/Core Civic, PREA Intake. This form has the inmate write his name, TDOC number, and the date and has them check a box, which states "I have been verbally informed about the Zero Tolerance Policy and how to report Sexual Harassment and Sexual Abuse at WCFA". The are then kept in a binder in booking. It was recommended that these either be added to electronic files or hard files for each inmate, as he signs.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist
 Policy 14-02 Sexual Abuse Prevention and Response
 Inmate Handbook
 Inmate Acknowledgement Form
 Sexual Assault Awareness Brochure (English and Spanish)
 PREA DVD
 PREA Comprehensive Education Handout
 Inmate Orientation Checklist
 14-2A Preventing Sexual Abuse and Misconduct, English and Spanish
 Photos and viewing TDD Telephone
 PREA Poster

	PREA Acknowledgment Inmate Interviews (random and specialized) Inmate Files Facility Walkthrough Interview with Intake Staff Interview with Counselors Interview with PCM
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees and to the extent that CoreCivic conducts sexual abuse investigations, investigators shall receive training in conducting sexual abuse investigations in confinement settings. The PCM shall ensure that more than one (1) person at the facility receives training as a sexual abuse investigator. This will ensure that a trained investigator is available as backup during employee absences (e.g.) leave, paid time off, sickness, offsite training, etc) from work. The facility provided a Certificate of Completion for the one (1) assigned facility investigator. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the Moss Group. In addition, CoreCivic held a webinar training entitled “PREA Update, Investigation Standards and Required Specialty Training”. (b) Policy 14-02 Sexual Abuse Prevention and Response states that specialized investigators training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies. The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections and each training included the requirements of the standard and Policy 14-02: Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution

	referral. (c) Policy 14-02 Sexual Abuse Prevention and Response states that employees who conduct sexual abuse and sexual harassment administrative investigations are required to document completion of this training by signing the 14-2A1 PREA Training Acknowledgment Specialized Training. This documentation shall be maintained in the employee training file. The facility provided a Certificate of Completion for the one (1) assigned investigator. The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the National Institute of Corrections. (d) Auditor is not required to audit this provision. As of the date of the onsite visit, the facility did not have an assigned investigator. An investigator from the neighboring facility has been assisting with cases and was interviewed as part of the auditor protocol. In addition, this individuals name was on various investigations and, as such, her training documentation was provided to the auditor demonstrating that she has conducted the general training and specialized training for investigators. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response PREA Investigator Training Attendance Rosters Email on Training Requirements PowerPoint titled PREA Update Investigation Standards and Required Specialty Training Training Certificates for each investigator assigned at this facility Training History Records PREA Investigations Flow Chart PREA Investigations Narrative Template PREA Investigations Log Investigations Chain of Command PREA Investigation Process Chart Policy 4-1
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professions, who work regularly in the facility, shall receive specialized medical training as outlined below:

- How to detect and assess signs of sexual abuse and sexual harassment;
- How to preserve physical evidence of sexual abuse;
- How to respond effectively and professionally to victims of sexual abuse and sexual harassments; and
- How and to whom to report allegations of sexual abuse and sexual harassment.

The training PowerPoint was reviewed entitled PREA Specialty Training for Medical and Mental Health Staff and it included all of the above provisions and areas.

(b) The facility advised the auditor that they do not conduct forensic medical examinations at this facility.

(c) Sample training reports for selected staff in the medical and mental health were printed and reviewed and demonstrated that documentation of these training is maintained.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the general training provided to all employees, all full and part-time Qualified Health Care Professionals and Qualified Mental Health Professions, who work regularly in the facility, shall receive specialized medical training as outlined below:

- How to detect and assess signs of sexual abuse and sexual harassment;
- How to preserve physical evidence of sexual abuse;
- How to respond effectively and professionally to victims of sexual abuse and sexual harassments; and
- How and to whom to report allegations of sexual abuse and sexual harassment.

Of the contracted medical staff, three were randomly selected and asked to demonstrate that they have received the specialized training. Documentation was provided to the auditor to show compliance. Of the three pulled from the original list of all staff, one medical staff member did not have the training completed. That staff member was caught up on training and documentation sent to the auditor. In addition, all medical staff were reviewed by the facility and the facility sent a roster verifying each was completed.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist
Policy 14-02 Sexual Abuse Prevention and Response
PREA Specialized Training for medical and mental health staff

	Medical staff training records Mental health staff training records
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that all inmates shall be assessed during an intake screening in order to obtain information relevant to housing, cell, work, education, and program assignments. The goal is to keep separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. (b) Policy 14-02 Sexual Abuse Prevention and Response states that inmates shall be assessed within 24 hours of arrival at a facility unless contracting agency policy authorizes 72 hours following arrival. This includes inmates who have been transferred from another facility, have been received from a reception center where an assessment may already have been completed as part of reception and inmates who have been returned from court or other leave status. In the past twelve (12) months, a total of 3,088 inmates have gone through the intake process at the facility and have been screened for risk of victimization or abusiveness within the 72 hours upon intake. (c) Policy 14-02 Sexual Abuse Prevention and Response states that screenings will be completed and documented using an objective screening instrument. The TDOC screening Form shall be utilized for this purpose unless the contracting agency requires usage of another form or computerizes screening process. Policy continues to state that a list of those inmates/inmates who are identified through a screening as a victim, potential victim, predator or potential predator shall be maintained and updated as necessary by the operations manager/designee. The list shall be made available to any staff involved in the housing of inmates /inmates. Those inmates at high risk of being sexually victimized shall be separated from those at high risk of being sexual predators, to the best of our ability. Screenings will be completed, according to policy, and documented using the TDOC Sexual Abuse Screening Tool, with referrals to Case Management staff for further evaluation and screening as necessary, unless the facility management contract requires otherwise.

(d) The Assessment Questionnaire Information includes prompts as to:

- Whether the inmate has a mental, physical, or developmental disability;
- The age of the inmate;
- The physical build of the inmate;
- Whether the inmate has previously been incarcerated;
- Whether the inmate's criminal history is exclusively nonviolent;
- Whether the inmate has prior convictions for sex offenses against an adult or child;
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming (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);
- Whether the inmate has previously experienced sexual victimization;
- The inmate's own perception of vulnerability; and
- Whether the inmate is detained solely for civil immigrations purposes.

(e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that the 30-day reassessment will include any additional relevant information received by the facility since the initial intake screening. The facility will maintain a tracking system to ensure that reassessments are not completed beyond 30 days.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that a reassessment shall occur when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may impact the inmate/inmate's risk of victimization or abusiveness.

(h) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates may not be disciplined for refusing to answer, or for not disclosing complete information.

The facility advised the auditor that disciplinary action will not be taken for any participant who refused to answer these questions.

(i) For those reviewed for the time period between 1st and 2nd visits: 46 files provided: 28 were late on intake screening (72 hours); 28 were late on second screening some are due soon and can be completed in time); 36 did not receive information at intake; and 15 were late on comprehensive education.

Of the inmate files selected by the auditor to review:

Initial screening: 3 were not complete, 2 were late

2nd Screening: 5 were not complete, 4 were late

During the onsite visit to the facility, the auditor interviewed staff who perform the intake screening as well as staff who perform the second, 30 day screening. During interviews, the case managers interviewed stated that the Classification Manager send out a weekly list named, 14-2B 30 Day Reviews Due, spreadsheet. This lets each case manager know which inmates are due for their follow up screening. Samples from September, October and November were provided to the auditor to review.

Interviews with the case management staff also revealed that the Tennessee DOC sends out a weekly list titled "PREA Monitoring Due" to the Classification Manager who disseminates to all case managers. This list included an inmates name, number and when the next screening/monitoring is needed for this each inmate for those who are listed as 'aggressors', 'at risk aggressors' and 'victims' in the facility. In addition, TDOC sends out a Quarterly PREA monitoring Due list to unit staff, and requires that aggressors be monitored by staff. Two months, October and November, of this list were provided to the auditor to review.

During the onsite portion of the audit, no intakes occurred for the auditor to observe. However, the auditor asked and viewed, during the facility walk through and in specialized interviews, the intake process.

In addition, an intake packet from mental health was provided to the auditor which is used when an inmate prompts it by answers to certain questions on the PREA Screening, which included: Intake checklist, Comprehensive Clinical Record Review, Health Questionnaire, Sick Call Procedures, Problem Oriented Progress record, and Teaching Counseling Plan Document, among other medical related documents.

For corrective action, the facility re-trained all intake and unit staff on the requirements of this standard. Documentation of the training was sent to the auditor. Also, the facility and auditor developed a tracker which include the inmates name, number, intake date, initial screening and second screening (as well as other information) and all documents were sent to he auditor each month to show that the facility was completing on time. There was a total of 159 inmates who went through this process during this time frame and all wee completed timely. All documentation was provided to the auditor.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist

Policy 14-02 Sexual Abuse Prevention and Response

Policy 14-02 B Screening Tool (electronic and password protected)

30 day re-assess example

Direction for Completion of the Sexual Abuse Screening Tool

Training/Activity Attendance Roster

Assessment Questionnaire/Information Screening Tool from inmate files

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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that upon admission to the facility, and upon transfer to another facility inmates/inmates shall be screened by staff to perform the initial intake screening process in order to obtain information relevant to housing, cell, work, education and program assignments with the goal of keeping separate those inmates/inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The screening shall identify past victims and/or predators and assess vulnerability to sexual abuse victimization. Housing assignments are made accordingly. (b) Policy 14-02 Sexual Abuse Prevention and Response states that screening of inmates/detainees should only be used as a guideline for determining appropriate housing and services should never be used as the sole reason for the deprivation of a program or a privilege. Each inmate is screened privately, and their housing programming and work assignments are determined on an individual basis. (c) Policy 14-02 Sexual Abuse Prevention and Response states that in deciding whether to house a transgender or intersex inmate/inmate in a male housing unit/area or a female housing unit/area, or when making other housing and programming assignments for such inmates/inmates, the facility shall consider the transgender or intersex inmate/inmate's own views with respect to his/her own safety and shall consider on a case-by-case basis whether such a placement would ensure the inmate/inmate's health and safety. Consideration should also be given as to whether the placement would present management or security problems. (d) Policy 14-02 Sexual Abuse Prevention and Response states that in deciding whether to house a transgender or intersex inmate/inmate in a male housing unit/area or a female housing unit/area, or when making other housing and programming assignments for such inmates/inmates, the facility shall consider the transgender or intersex inmate/inmate's own views with respect to his/her own safety and shall consider on a case-by-case basis whether such a placement would ensure the inmate/inmate's health and safety. Consideration should also be given as to whether the placement would present management or security problems. (e) Policy 14-02 Sexual Abuse Prevention and Response states that Transgender and intersex inmates/inmates shall be given the opportunity to shower separately from

other inmates/inmates.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that the establishment of a unit or pod solely dedicated to the housing of LGBTI and/or Gender Non-Conforming inmates/inmates is strictly prohibited unless required by consent decree, legal settlement, or legal judgment for the purpose of protecting that inmate/inmate.

Policy 14-02 Sexual Abuse Prevention and Response states that Transgender and intersex inmates/inmates shall be given the opportunity to shower separately from other inmates/inmates.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that the establishment of a unit or a pod solely dedicated to the housing of LGBTI and/or gender non-conforming inmates/detainees is strictly prohibited unless required by consent decree, court order or other comparable legal authority.

Staff interviewed (intake staff and counselors) who complete these screenings all indicated that once an offender has a score, they will determine housing and programming accordingly.

The potential victims are potential perpetrators at this facility are housed on separate dorms/pods and tracked before placement. Each staff member interviewed was aware of this process and demonstrated it to the auditor. The program areas and nature of the facility allows for always viewing and interaction with staff and the population, but staff are aware of these individuals at all times.

The facility began using the TDOC PREA Housing and Programs Review Form, Form CR4086, for all transgender and intersex inmates, every six months. Copies of this for all recent inmates who were completed were provided to the auditor to review. In addition, the facility stated that there was currently three transgender inmates at the facility; the auditor interviewed one of these individuals, who was randomly selected from this list. This individual recalled being called out and have this form discussed. It includes information on the inmates perception of their safety, security, medical and mental health concerns, and PREA Risk Assessments. This is reviewed by and signed by the Security Director, Classification Supervisors, Facility Commander, Programs Director, Mental Health Staff and Medical Staff. In addition, with these packets are memos for applicable unit staff explaining shower accommodations made for transgender inmates who wish to shower separately.

For each of the three transgender inmates present at the facility, the facility provided memos whereas the PCM sent a memo to the need to know unit staff that the inmate can shower privately during county after it clears or at night, after all other inmates have locked down. This memo is directed to stay in the control room. In addition, all screenings for each of these individuals was provided to the auditor and demonstrated that the facility did screen each twice per year for 2021 and 2022.

Interviews with inmates in the LGBTI population let the auditor know that there is not a housing unit designated at this facility for this population and the transgender

	inmates interviewed detailed the process of the review committee, discussed above. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response 14-02 B Sexual Abuse Screening Tool Transgender Inmate input on Housing Sample Inmate work Roster Housing Plan with Housing Assignments
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115.43 Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/ detainees at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment. (b) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations. (c) Policy 14-02 Sexual Abuse Prevention and Response states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. (d) Policy 14-02 Sexual Abuse Prevention and Response states that if involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainees safety and the reason why no alternative means of separation can be arranged.

	(e) Policy 14-02 Sexual Abuse Prevention and Response states that every thirty (30) days, a review of each inmate/detainees status will be conducted to determine whether there is a continuing need for separation from the general population. The facility has advised the auditor that they have not had any inmates placed in voluntary segregated housing for high risk of sexual victimization within the last twelve (12) months. Discussions with the Warden, PCM and assistant Wardens revealed that on a daily basis a Tomis Report (the TDOJ inmate management system) a Segregation without end dates, roster is generated and it states the reason for each inmate being placed in segregation. A week of these was reviewed by the auditor and no inmates listed a PREA related reason or involuntary placement for a sexual abuse or sexual harassment related occurrence. In addition, the Warden provided a sample TDOC Protective Services Hearing sample to the auditor. This was not for a PREA related matter, however, the review and form was provided to demonstrate the process. An interview was also held with a segregation officer, who stated that he was unaware of any inmate ever being housed in the segregation unit for a PREA related victimization matter. In addition, the officer described the process and differences between those housed in segregation for administrative purposes, such as protection, and those housed for disciplinary reasons and the privileges that would be allowed. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Incident statement Inmate file Confinement Review Confinement Record Confinement Activity Record
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/inmates shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/inmates or employees for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmate/

inmates who are victims of sexual abuse have the option to report and incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods:

1. Calling the facility's twenty-four (24) hour toll-free notification telephone number;
2. Verbally telling any employee, including the Chaplain;
3. Calling the facility 24-hour toll free notification number;
4. Submitting a request to meet with medical or mental health staff and/or reporting to medical staff during sick call;
5. Forwarding a letter, sealed and marked 'confidential', to the Warden/facility administrator or any other employee;
6. Calling or writing someone outside with facility who can notify facility staff; contacting the facility PREA compliance manager; and
7. Electronically reporting allegation of sexual abuse and sexual harassment to the PREA mailbox listed in CORES system (where available).

All reports of sexual abuse/harassment will be taken seriously and will be investigated. You will not be subject to retaliation, reprisal, harassment, or disciplinary action for truthfully reporting abuse or signs of abuse observed. Filing a false PREA claim will result in disciplinary action and/or prosecution.

Reporting Allegations of Sexual Abuse/Sexual Harassment

Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including, but not limited to:

Send a letter to the warden of the facility at the address provided on our facility locator.

Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities.

Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided.

Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-800-461-9330 or e-mail www.corecivic.com/ethicsline

It is not required that any personal information be provided. However, the more information that can be provided regarding dates, times, locations, witnesses, and as much detail about the alleged incident as is known serves to assist staff and law enforcement in their efforts to successfully conduct the investigations.

The auditor also filed a test report through the EthicsPoint System online at https://secure.ethicspoint.com/domain/en/report_company.asp?clientid=45517&locationid=28782851&override=yes&agreement=no&companyname=CoreCivic

Within twenty minutes of being filed online, the Director of Ethics and compliance wrote an email response while forwarding it to the facility and stated that this would

be the process. The agency PREA Coordinator/Director was included on thread. The Warden and PCM immediately replied with receipt and stated that they would forward to be investigated.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/inmates shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/inmates or employees for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmate/inmates who are victims of sexual abuse have the option to report and incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods:

1. Calling the facility's twenty-four (24) hour toll-free notification telephone number;
2. Verbally telling any employee, including the Chaplain;
3. Calling the facility 24-hour toll free notification number;
4. Submitting a request to meet with medical or mental health staff and/or reporting to medical staff during sick call;
5. Forwarding a letter, sealed and marked 'confidential', to the Warden/facility administrator or any other employee;
6. Calling or writing someone outside with facility who can notify facility staff; contacting the facility PREA compliance manager; and
7. Electronically reporting allegation of sexual abuse and sexual harassment to the PREA mailbox listed in CORES system (where available).

Policy also states that inmates/detainees detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that inmate/inmates shall be encouraged to immediately report pressure, threats, or instances of sexual abuse or sexual harassment, as well as possible retaliation by other inmates/inmates or employees for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmate/inmates who are victims of sexual abuse have the option to report and incident to a designated employee other than an immediate point-of-contact line officer by using any of the following methods:

Policy also states that employees must take all allegations of sexual abuse and harassment seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports. All reports of sexual abuse and sexual harassment will be reported to the PREA Compliance Manager/Investigator. Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive and non-judgmental.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees may privately report sexual abuse and sexual harassment of inmates/inmates by

forwarding a letter, sealed, and marked 'confidential, to the facility Administrator/ Director.

The CoreCivic public website states:

Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including but not limited to:

- Contact the National Sexual Abuse Hotline at 1-800-656-4673
- Send a letter to the warden of the facility at the address provided on our facility profiles
- Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities.
- Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided.
- Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-866-757-4448 or e-mail <http://www.corecivic.ethicspoint.com/>

If an inmate includes a PREA complaint in a grievance, the grievance coordinator or staff processing grievances would take it out of the time frame for grievance responses and place it immediately into the PREA response process. It would be turned over to the Investigator and a 5-1 Incident report would be completed. Technically an inmate could still submit a formal grievance on an allegation of sexual abuse or sexual harassment if he or she wished but the response would be expedited so as to ensure his/her safety. An interview was held with the grievance coordinator who described this process.

During the facility walkthrough, the auditor notices inmate grievance forms and inmate request forms available in the day rooms and education area demonstrating that they are readily available. In addition, locked mailboxes are in each unit hallway for inmates to privately place inside. After discussion with numerous specialized staff, it was stated that only unit managers and higher could access certain boxes, only medical can access the medical mailboxes, only the grievance officer can open the grievance mailbox and mailroom staff open the mailbox.

The phone number used for reporting was tested by the auditor and numerous staff in multiple units. During this time, it was discovered that the painting on the walls did not provide clear instructions for the inmates on how to report, and when followed, would not allow for reporting. Further, postings in the unit bulletin boards and the inmate handbook had differing instructions, creating much confusion.

During the walk through of the facility, the reporting information was not listed by the telephones in all units and in some areas where it was posted, it was unclear on how to access. The facility immediately corrected and sent the auditor pictures of newly painted information on 'dialing instructions' which was placed by all unit telephones.

	A sample PREA notification was completed and demonstrated that a notification goes directly to the Warden. However, when the Warden showed the auditor this list, the list of individuals who this went to included staff who were no longer at this facility and it appeared it had not been updated in sometime. While onsite, the ADO staff immediately fixed this and added the necessary PREA Notification Contacts. An email from the account manager for the service was provided to the auditor. In addition, as corrective action, the Warden and PCM were tasked clarify the difference between reporting and advocacy and reeducate all staff, via email and inmates by pulling all education information from the units, correcting and re-hanging with the correct information. Documentation was sent to all staff educating them on these differences, and, all posted information and handbooks were updated to clearly explain the roles of the various reporting mechanisms. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response CoreCivic Website CoreCivic Code of Ethics Participant (Inmate) Handbook First Responder card/staff reminders Sexual Assault Awareness and Prevention pamphlet (English and Spanish) PREA poster Inmate Interviews (Random and Specialized) Staff Interviews (Random and Specialized)
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer. (b) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an

inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

On the PAQ, staff indicated that there was zero grievances filed alleging sexual abuse in the past twelve months.

(e) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

On the PAQ, staff indicated that there were no emergency grievances filed alleging sexual abuse in the past twelve months.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise mandated by contract, alleged incidents will not be processed through the facilities inmate/inmate grievance process. Should a report be submitted and received as an inmate/inmate grievance, whether inadvertently or due to contracting agency requirements, it will be immediately be referred to the facility Investigator or Administrative Duty Officer.

The auditor interviewed the facility grievance officer in relation to this standard, while onsite. The grievance officer provided the auditor the grievance log, upon request,

	for September through December, 2022. The grievance officer stated that she checks the grievance mailboxes daily when she is onsite and she is the only one who has key. She stated that if a grievance that mentions sexual abuse or sexual harassment would be treated as an emergency grievance and immediately forwarded to the facility investigator and PCM for investigation. She would still log and ensure it was answered but it would not be subject to timelines or grievance procedures and would be investigated through that process. She also provided a sample grievance where this occurred. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Inmate Handbook Grievance Log Inmate confidential Mailboxes
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115.53 Inmate access to outside confidential support services	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates/inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, state or national victim advocacy or rape crisis organizations. Such information shall be included in the facilities inmate handbook. The facility shall enable reasonable communication between inmate/inmates and these organizations and agencies, in as confidential a manner as possible. (b) Policy 14-02 Sexual Abuse Prevention and Response states that inmates/inmates shall be informed, prior to giving them access, of the extent to which such communications shall be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. (c) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic shall maintain or attempt to enter Memorandums of Understanding (MOU) or other agreements with community services providers that are able to provide inmates/inmates with confidential emotional support services related to sexual abuse. All

	MOUs must be reviewed and approved by the CoreCivic FSC Legal department prior to signature. The facility and FSC legal shall maintain copies of MOUs. The facility shall maintain documentation showing attempted to enter into such agreements. The MOU was reviewed between CoreCivic and the WRAP. This was executed in February 2020 and includes the provisions of this standard. While onsite, the posters and memos hanging in the units included conflicting information for reporting incidents and calling for advocacy between the various customer and corporate reporting mechanisms. As corrective action, the Warden and PCM clarified the difference between reporting and advocacy and reeducate all staff, via email and inmates by pulling all education information from the units, correcting and re-hanging with the correct information. All pictures and copies of the new information were forwarded to the auditor and were in compliance. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response MOU with WRAP and CoreCivic Sexual Assault Advocacy pamphlet Flyer entitled Inmate Access to Outside Victim Advocates and Support Services PREA posters Inmate Handbook
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that CoreCivic employees, contractors, volunteers and interested third parties may report allegations of sexual abuse and sexual harassment (including anonymous reports) to the CoreCivic 24 hours Ethics line at 1-866-757-4448 or through www.CoreCivic.ethicspoint.com. The CoreCivic public website states: Anyone can report an allegation or suspected incident of sexual abuse or sexual harassment; including inmates, staff, or third parties. This can include allegations that may have occurred at another correctional facility. At a CoreCivic facility, there are multiple options to file a report; including, but not limited to:

	Send a letter to the warden of the facility at the address provided on our facility locator. Inmates may notify any staff member either verbally or in writing or they may call the PREA hotline numbers posted at their facilities. Staff may report allegations via their chain of command or anonymously through the employee hotline numbers provided. Staff and third parties may contact the CoreCivic's Ethics and Compliance Hotline: 1-800-461-9330 or e-mail www.corecivic.com/ethicsline It is not required that any personal information be provided. However, the more information that can be provided regarding dates, times, locations, witnesses, and as much detail about the alleged incident as is known serves to assist staff and law enforcement in their efforts to successfully conduct the investigations. The auditor also filed a test report through the EthicsPoint System online at https://secure.ethicspoint.com/domain/en/report_company.asp?clientid=45517&locationid=28782851&override=yes&agreement=no&companyname=CoreCivic This was filed on December 29, 2022. A report key was returned to the auditor. Within twenty of being filed online, the Director of Ethics and compliance wrote the facility and the PREA Coordinator was included. The inmate handbook, posters and wall paintings had conflicting information as to what the various reporting mechanisms were. As corrective action, the facility edited these and sent the auditor all inmate education materials with the correct and clear methods. Each randomly selected staff member who was interviewed was aware of this reporting method and spoke of the posters throughout the facility. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response CoreCivic PREA Website 14-2AA Preventing Sexual Abuse and Misconduct Inmate Handbook Posters and Information Boards throughout facility Note: There have been no outside third party PREA reports to date.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that accordance with

this policy, employees/contractors are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse of sexual harassment [sic] that has occurred in any facility (including a facility that is not part of CoreCivic).

Policy further states that:

- Employees/contractors must take all allegations of sexual abuse seriously, including verbal, anonymous, and third-party reports, and treat them as if the allegation is credible. Staff shall promptly document any verbal reports.
- When it is learned that an inmate is subject to substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate.
- Employees/contractors who fail to report allegations may be subject to disciplinary action.

All staff have signed an acknowledgment of this provision, on the 14-2A form, CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement.

A note from the facility stated that the facility has had no reports of retaliation against staff or inmate who have reported incidents of alleged sexual abuse or sexual harassment since the previous audit.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that apart from reporting to designated supervisors or officials, employees shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, and as specified in this policy, to make treatment, investigation, and other security and management decisions. When it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that unless otherwise precluded by federal, state or local law, medical and mental health professionals shall be required to follow reporting procedures as outlined in policy. At the initiation of providing medical care, both medical and mental health professionals will inform inmate of their professional duty to report and the limitations of confidentiality.

(d) Policy 14-02 Sexual Abuse Prevention and Response states that employees may privately report sexual abuse and sexual harassment of inmates by forwarding a letter, sealed and marked 'confidential' to the facility Administrator/Director or contact the CoreCivic ethics and compliance hotline.

Further, policy states that if the alleged victim is under the age of eighteen (18) or considered a vulnerable adult under a state or local vulnerable person's statute, the allegation shall be reported to the designated state or local services agency under applicable mandatory reporting laws.

This facility indicated that they have not had any incidents of alleged sexual abuse and/or sexual harassment in which the alleged victim is under the age of 18 or

	considered a vulnerable adult within the last twelve (12) months. (e) Policy 14-02 Sexual Abuse Prevention and Response states that all reports of sexual abuse and sexual harassment will be reported to the PREA Compliance Manager/Investigator. Employees having contact with the alleged victim should behave in a manner that is sensitive, supportive and non-judgmental. The auditor reviewed a report and was able to see the process involving the provisions of this standard. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Staff Rosters 5-1C Incident report Incident Log Employee Training Inmate Notification Poster Staff Acknowledgement Sheets Notes/Memos Investigative Report with detailed first responder duties Interviews with Random Staff, Warden Interviews with Specialized Staff, Medical and MH
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that when it is learned that an inmate is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect the inmate. It is CoreCivic's policy to aggressively investigate all allegation, regardless of the source, and prosecute those who are involved in incidents of sexual abuse. Alleged victims of sexual abuse or harassment will be provided a supportive and protective environment. In the past twelve (12) months, there were no instances in which the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse. During an interview with CoreCivic Vice President, Operations Administration, he stated that staff take immediate action to protect the inmate by removing the inmate from the area and/or individuals where risks may be stemming from, and an

	investigation is immediately initiated. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with CoreCivic Vice President, Operations Administration Sample Report Interview with PC Interview with Random Staff Interviews with Warden
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider’s facility), the following actions shall be taken: 1. The Warden that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. 2. A copy of the statement of the inmate shall be forwarded to the appropriate official at the location where the incident was reported to have occurred. The Warden stated that there have been no allegations received that an inmate was sexually abused while confined at another facility. (b) Policy 14-02 Sexual Abuse Prevention and Response states that if the allegation involves events that took place while the alleged victim was not in CoreCivic custody (e.g. while housed at another provider’s facility), the following actions shall be taken: 3. The Administrator/Director that received the allegation shall contact the facility head or appropriate office of the facility where the alleged abuse took place as soon as possible, but no later than seventy-two (72) hours after receiving the allegation. 4. A copy of the statement of the inmate shall be forwarded to the appropriate official at the location where the incident was reported to have occurred. (c) Policy 14-02 Sexual Abuse Prevention and Response states that all such contacts and notification shall be documented on the 5-1B Notice to Administration; including any details learned from contact with the site where the alleged abuse took place,

	and the facilities response to the allegation. (d) Policy 14-02 Sexual Abuse Prevention and Response states that upon receiving notification from another facility that an incident/allegation of sexual [sic] had occurred while the inmate was previously confined at the facility the facility will record the name of the agency making the notification, any information obtained, and shall request an inmate statement. The facility warden and PAQ stated that no allegations have been received from other facilities in the past twelve (12) months. During an interview with the CoreCivic Vice President, Operations Administration, he stated referrals to and from other facilities occurs most often at the facility level rather than at the corporate office level. The information is received by the Warden at the facility. However, any staff who received the information know to report it to the Warden, for appropriate action. It then gets added into our incident system and the PREA protocols are initiated. If the allegation was alleged to have occurred at another facility, the facility Warden receiving the information would notify the Warden at the other facility within 72 hours. If the allegation received was that an incident of sexual abuse allegedly occurred within the CoreCivic facility both the partner agency and the investigative entity responsible for criminal investigations would be notified. He also stated that the most common examples are allegations inmates make during their intake process. The CoreCivic staff obtain as much information as possible from the inmate and provide this to Warden at the other facility as part of the notification. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: Corrections PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with CoreCivic Vice President, Operations Administration Interviews PCM, Warden
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states in the Response Procedures Sections that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse, shall ensure that the following actions are accomplished:

a. The alleged victim is kept safe, has no contact with the alleged perpetrator and is immediately escorted to the Health Services Department.

b. While in the private area, employees shall, to the best of their ability, ensure that that the victim does not wash, shower, remove clothing use the restroom facilities, eat drink, smoke or brush his/her teeth. The highest-ranking authority on-site is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any investigation.

All staff have signed an acknowledgment of this provision, on the 14-2A form, CoreCivic PREA Policy Acknowledgment and/or Training Acknowledgement. The acknowledgment for all twenty-five (25) staff were reviewed by the auditor and in compliance.

A sample report was reviewed by the auditor for an incident of alleged sexual abuse. In the report, staff documented their efforts to maintain the preservation of evidence as noted in the provisions of this standard and in policy.

(b) Policy 14-02 Sexual Abuse Prevention and Response states that if the first staff responder is not a security staff member, the responder shall be required to request that they alleged victim not take any actions that could destroy physical evidence and notify security staff.

Staff are all provided, and the auditor saw while on-site, a First Responder Duty card to add to their ID. It states:

A has a zero tolerance for all forms of sexual abuse and sexual harassment.

FIRST RESPONDER DUTIES:

- Separate the alleged victim and abuser (ordinarily the victim should not be placed in segregation/restrictive housing).
- Preserve and protect the crime scene until steps can be taken to collect evidence.
- If the abuse occurred within a time period that still allows for the collection of physical evidence, request the alleged victim not take any actions that could destroy physical evidence (such as washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating).
- Ensure the alleged abuser does not take any of the above actions that could destroy physical evidence.
- Immediately notify your supervisor and medical and mental health practitioners.

Confidentiality must be maintained, apart from reporting to designated supervisors or officials.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

	PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response First Responder Cards PREA Training Acknowledgments Interviews with Random Staff Interview with PCM Sample Report
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion a) Policy 14-02 Sexual Abuse Prevention and Response states that each facility will establish a SART which includes but is not limited to the following positions: - o PREA Compliance Manager - o Security Representative - o Medical Representative - o MH Representative - o Victim Services Coordinator The SART responsibilities shall include the following in part: - o Responding to reported incidents of sexual abuse; - o Responding to victim assessment and support needs; - o Ensuring policy and procedures are enforced to enhance inmate safety; and - o Participating in the development of practices and/or procedures that encourage prevention of sexual abuse and enhance compliance with PREA National Standards. Further, policy states that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse shall ensure that the following actions are accomplished: · The alleged victim is kept safe, has no contact with the alleged perpetrator, and is immediately escorted to the Health Services Department. · While in the Health Services, employees shall, to the best of their ability, ensure that that the victim does not wash, shower, remove clothing use the restroom facilities, eat drink, smoke or brush his/her teeth. The highest-ranking authority on-site is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any investigation. · The highest-ranking authority onsite is immediately notified and will further ensure to protect the safety of the victim and the integrity of the crime scene and any investigation. · When the alleged perpetrator is an inmate/detainee, he/she is secured in a single cell in the event evidence collection is required.

	· All acquired information concerning the allegation is kept confidential. · An incident statement is written in accordance with the CoreCivic Policy 5-1C. Policy then further goes on to describe, in detail, all processes that would follow, to include but not limited to: preserving evidence; notifications; scene preservations; notifications if this occurred at another location; steps in the event an employee was involved; review team; administrative and criminal investigations; roles with an investigating entity; and advocacy. In the response plan, the Sexual Abuse Incident Protocol, form 13-79A is included. This is used at the initiation of any incident allegation that may occur and ensures that all steps in the plan are carried out in a timely manner. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with CoreCivic Vice President, Operations Administration
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that neither CoreCivic nor any other entity responsible for collective bargaining on CoreCivic's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the company's ability to remove alleged employee 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. Nothing in this requirement shall restrict entering into or renewal of agreements that govern: - o The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions outlined above in Q.2.a-c. and a preponderance of the evidence in determining whether sexual abuse or sexual harassment are substantiated. - o Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the employees personnel file following a determination that the allegation of sexual abuse is not substantiated. During an interview with the CoreCivic Vice President, Operations Administration, he

	stated that CoreCivic as an agency has entered into and/or renewed collective bargaining agreements since August 20, 2012. The agreements permit CoreCivic to remove alleged staff sexual abusers from contact with an inmate pending an investigation of disciplinary action. Whiteville is not subject to any collective bargaining agreement. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with CoreCivic Vice President, Operations Administration
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115.67 Agency protection against retaliation	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that inmate and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other inmates or staff. (b) Policy also states that ADO staff, or the Warden will determine on a case by case basis whether or not placement of a staff member in a non-contact role with the victim and/or other inmates is warranted. This determination will take into account the gravity and credibility of the allegations. (c) Policy 14-02 Sexual Abuse Prevention and Response states that to ensure that thirty/sixty/ninety (30/60/90) day monitoring is conducted by the designated staff, following a report of sexual abuse or sexual harassment, to protect against potential retaliation against inmates or employees. Policy further states that monitoring shall continue beyond ninety (90) days if the initial monitoring indicates a continuing need. The PCM shall ensure prompt action are taken to remedy any identified retaliation. In the past twelve (12) months, there has been zero incidents of retaliation occurring at this facility, according to the PAQ. (d) Policy 14-02 Sexual Abuse Prevention and Response states that this shall include periodic status checks of inmates/detainees and review of relevant documentation.

	(e) Policy 14-02 Sexual Abuse Prevention and Response states the PCM will ensure any other individual who cooperate with an investigation and expresses fear of retaliation is protected from retaliation. During an interview with the CoreCivic Vice President, Operations Administration, he stated that for both inmates and staff who have reported allegation of sexual abuse, we provide monitoring on a 30/60/90-day period, longer if needed, to ensure no retaliation has occurred. These reviews are documented on an attachment to our 14-2 policy. The review takes into consideration any actions which may be perceived as retaliatory whether it be housing and/or job assignments with inmates and shift changes, evaluations, etc. for staff. These reviews also prohibit retaliation for any reason, and we include this expectation in training with staff. Any violations are acted upon accordingly. For those who cooperate and express a fear of retaliation, our policies and practices prohibit retaliation for any reason and we include the expectation in training with staff. Any violations are acted upon accordingly. Of the eleven investigations selected and reviewed by the auditor, three did not include retaliation monitoring. As corrective action, the PCM reviewed all previously completed cases and re-completed the Retaliation Monitoring with the required individuals present, and forwarded documentation to the auditor. In addition, three new staff, all who work in the MH department were selected and trained on retaliation monitoring and were named as retaliation monitors. Documentation of this training was sent to the auditor to review. In addition, for the new cases that occurred during the corrective action period, retaliation monitoring was completed as per the standard. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Blank form, PREA Retaliation report monitoring Memo, indicating staff who will conduct all monitoring and process 5-1A Incident Report 30/60/90 Day Retaliation Monitoring Report Interview with CoreCivic Vice President, Operations Administration Interview with Random Staff Interview with PCM Interview with Retaliation Monitor Interview with Unit Team Staff
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard

	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the inmate/detainee in involuntary segregated housing for less than twenty-four (24) hours while completing the assessment. Policy 14-02 Sexual Abuse Prevention and Response states that inmate/detainees placed in segregated housing for this purpose shall have access to programs, privileges, education, or work opportunities to the extent possible. If access to programs, privileges, education, or work opportunities is restricted, the facility shall document the following: the opportunities that have been limited, the duration of the limitation and the reasons for such limitations. In addition, Policy 14-02 Sexual Abuse Prevention and Response states that segregated housing shall be used only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. If involuntary segregated housing is warranted as outlined above, documentation of such action shall clearly specify: the basis for the facilities concern for the inmate/detainees safety and the reason why no alternative means of separation can be arranged. Policy 14-02 Sexual Abuse Prevention and Response states that every thirty (30) days, a review of each inmate/detainees status will be conducted to determine whether there is a continuing need for separation from the general population. The facility advised the auditor that the facility has had no inmates placed in involuntary segregated housing for high risk of sexual victimization within the last twelve (12) months. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview Warden, PCM, Segregation Staff
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard

Auditor Discussion
(a) Policy 14-02 Sexual Abuse Prevention and Response states that facility administrative investigations into allegations of sexual abuse and sexual harassment shall be done promptly, thoroughly, and objectively for all allegations including third-party reports and anonymous reports. (b) Policy 14-02 Sexual Abuse Prevention and Response states the facility shall use investigators for administrative investigations who have received special training in sexual abuse investigations pursuant to Standards. The facility provided a Certificate of Completion for the one (1) assigned facility investigator (this investigator is no longer at the facility and the documents for another investigator, at a neighboring facility were also provided). The certificate is from a training entitled PREA: Investigating Sexual Abuse in a Confinement Setting which was delivered online through the National Institute of Corrections. In addition, CoreCivic held a webinar training entitle PREA Update, Investigation Standards and Required Specialty Training. (c) Policy 14-02 Sexual Abuse Prevention and Response states that specialized shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies. The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02 : Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. (d) Policy 14-02 Sexual Abuse Prevention and Response states that specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collections in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Policy also states that documentation confirming that investigators have completed the required specialized training in conducting sexual abuse investigations shall be maintained in accordance with facility record retention policies.

The curriculum for each of the two trainings was provided and reviewed by the auditor (through CoreCivic and the National Institute of Corrections) and each training included the requirements of the standard and Policy 14-02 : Techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, Sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse.

(g) Whiteville staff does not conduct criminal investigations, allegations that could be criminal are forward to the TDOC OIC division. These notifications are noted in the 5-1 packets as notification but no other information, documentation, follow-up or conclusions have been produced by the facility.

Policy 14-02 states that criminal investigations shall be documented in a written report that contains a thorough description of physical , testimonial, and documentary evidence and attaches copies of documentary evidence where feasible.

(h) Whiteville staff does not conduct criminal investigations, allegations that could be criminal are forward to the TDOC OIC division. These notifications are noted in the 5-1 packets as notification but no other information, documentation, follow-up or conclusions have been produced by the facility.

(i) Policy 14-02 Sexual Abuse Prevention and Response states that the agency shall retain all investigative reports into allegations of sexual abuse for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

CoreCivic Policy 1-15 Retention of Records stats that 115 B Records Retention Schedule will be utilized to determine the retention period of company records.

Records stored electronic are subject to the same retention period and procedures as documents store in non-electronic forms. On the Schedule it stated that 5-1 Incident Packets and Aggregated PREA Sexual Abuse data shall be retained for ten (10) years. In addition, PREA investigative files and written reports to be retained if the alleged abuser is incarcerated or employed plus five (5) years.

(k) Policy 14-02 Sexual Abuse Prevention and Response states that investigations conducted by a facility employee for allegations of sexual abuse will be handled in accordance with the Code of Federal Regulation, title 28, part 115.21, Evidence Protocol and Forensic Medical Examinations, as outlined below. If the facility is not responsible for investigating such allegations, the facility shall request that the responsible outside agency or entity comply with these requirements:

- The investigating entity shall follow a uniform evidence protocol that maximizes

the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

(I) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Prior to the onsite portion of the audit, the auditor was provided a list of all investigations at the facility of which there was fifteen. The auditor randomly selected seven and asked that they be sent to the auditor to review.

While onsite, the CoreCivic Director of PREA gave the auditor an additional 4 investigative packets, that occurred since the departure of the previous investigator and since the previous file selection. Of these:

Initially, seven investigations were selected and reviewed, CoreCivic Agency Wide PREA Staff and the auditor reviewed, while onsite and there were the following items missing from the files/unavailable on various reports: one lacked information as to what evidence was reviewed and considered; three had no information relating to criminal investigation referral follow-up; two lacked information as to whether or not SANE or outside medical was utilized; one was missing the full report and only had the summary conclusion; one lacked information on any staff or witness interviews; one had conflicting information on conclusions on the various forms; one appeared to have a victim placed in segregation; and some had SART reviews with compliance concerns and were missing inmate notifications (although these are included in other standards).

The auditor then selected an additional four cases to review onsite. Of these, the following was noted: one SART did not include the required parties; one report had inconsistent findings categories on various documents; three did not reference any criminal referral follow-up; and two missing victim notifications.

The State PREA Office was called in regards to the referrals and asked about investigations. The State of TN Investigations/PREA Office denied being notified of these criminal matter referrals despite notifications being shown from the reporting system. TDOC immediately sent a team to the facility to review these matters and try ascertain where these case stood (since no criminal investigation were completed).

For corrective action for this and many investigation related standards, the auditor required that the criminal matters be reviewed and completed or information be placed in the file with any follow-up for information requests. In addition, all files were reviewed to ensure they were thoroughly documented and all information was contained in the files. The facility also hired and trained a new investigator, documentation of which was forwarded to the auditor to review. New allegations, which occurred during the corrective action period, were forwarded to the auditor to review as the process was going through.

TDOC and CoreCivic developed a new process to refer, complete and follow-up on all

	criminal related matters. All CoreCivic ADO staff were trained and documentation was sent to the auditor to review. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Investigations Training Investigations Records Investigation Samples Policy 1-15 Retention of Records 51-G Investigation Report 5-1A Administrative Investigation Interviews PC, PCM, Warden, Facility Investigator, TDOC investigator and PC
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states in any sexual abuse or sexual harassment investigation in which the facility is the primary investigating entity, the facility shall utilize the preponderance of the evidence standard for determining whether sexual abuse or sexual harassment has taken place. A PowerPoint Training excerpt was shown to the auditor from the PREA Resource Center which stated “the criteria for administrative action are determined by individual agencies. However, the Standards required that agencies set the bar no higher than requiring the preponderance of the evidence to substantiate an allegation for administrative action, which would mean that more than 50% of the evidence supports the allegation. Incident synopses were proved and reviewed which demonstrated that a preponderance of the evidence standard was applied and noted in the investigation conclusion. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response 5-1A Incident Report with 5-1G Investigative Report

	Investigations Training curriculum from NCICS National PREA Resource Center Notification of Curriculum Utilization Investigation Interview with Investigator
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that following an investigation into an inmate's allegation that he/she suffered sexual abuse at the facility, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform the inmate. In the past twelve (12) months, there were thirteen (13) investigations of alleged inmate sexual abuse completed according to the PAQ. (b) Policy 14-02 Sexual Abuse Prevention and Response states that following an investigation into an inmate's allegation that he/she suffered sexual abuse at the facility, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, the relevant information shall be requested from the outside investigating agency or entity in order to inform the inmate. In the past twelve (12) months, there were eight (8) investigations of alleged inmate sexual abuse completed. (c) Policy 14-02 Sexual Abuse Prevention and Response states that following an inmate's allegation that an employee has committed sexual abuse against the inmate the facility shall subsequently inform the inmate (unless the facility has determined that hey allegation in unfounded) whenever: (1) The employees no longer posted within the inmate's unit as a result of the finding of the investigation; (2) The employee is no longer employed at the facility; (3) The facility learns that the employee has been indicted on a charge related to sexual abuse within the facility; or (4) The facility learns that the employee has been convicted on a charge related to sexual abuse within the facility. (d) Policy 14-02 Sexual Abuse Prevention and Response states that following an

	inmate's allegation that he/she has been sexually abused by another inmate, the facility shall subsequently inform the alleged victim whenever: 1. The facility learns that the alleged abuser has been indicted in a charge related to sexual abuse within the facility; or 2. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. In the past twelve (12) months, according to the PAQ, there have been thirteen (13) notifications to inmates provided. (e) Policy 14-02 Sexual Abuse Prevention and Response states all inmates/inmate notifications or attempted notifications shall be documented on the 14-2-E Inmate Allegation Status Notification. The inmate shall sign the 4-2 -E, verifying that such notification has been received. The signed 14-2-e shall be filed in the inmate's institutional file. In the past twelve months, according to the PAQ, there have been seven (7) notifications to inmates provided (as one was still pending). (f) Policy 14-02 Sexual Abuse Prevention and Response states the facilities obligation to notify the inmate as outlined in the section shall terminate if the inmate is released from CoreCivic's custody. During the initial document review, this matter was listed as not meeting the standard since the matters that were forwarded for criminal investigation were not followed up on by the facility (nor investigated by TDOC), there is no documentation that these notifications can/should be completed. The administrative investigations did have proper notifications but it is unknown if any action should be notified on the potential criminal matters. This was included in the training for the new investigator and the PCM was aware of this requirement. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Interview with PC Interview with PCM Interview with Director Inmate PREA Allegation Status Notification, 14-2E- Substantiated Inmate PREA Allegation Status Notification, 14-2E- Unsubstantiated Inmate PREA Allegation Status Notification, 14-2E- Unfounded
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Auditor Overall Determination: Meets Standard
Auditor Discussion
(a) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic’s sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse. Whiteville has disciplined one (1) staff disciplined for violating sexual abuse or sexual harassment policies within the past twelve (12) months. (b) Policy 14-02 Sexual Abuse Prevention and Response states that employees shall be subject to disciplinary sanctions up to and including termination for violating CoreCivic’s sexual abuse or sexual harassment policies. Termination shall be the presumptive disciplinary sanction for employees who have engaged in sexual abuse. In the past twelve (12) months, according to the PAQ, there have been one staff members who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies. (c) Policy 14-02 Sexual Abuse Prevention and Response states that disciplinary sanctions for violations of CoreCivic policies relating to sexual abuse or sexual harassment shall be commensurate with the nature and circumstances of the acts committed, the employee’s disciplinary history, and the sanctions imposed for comparable offenses by other employees with similar histories. In the past twelve (12) months, according to the PAQ, there has been one staff member who have been terminated, who resigned pending investigation, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies. (d) Policy 14-02 Sexual Abuse Prevention and Response states that all terminations for violations of CoreCivic sexual abuse or sexual harassment policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past twelve (12) months, according to the PAQ, there have been one staff member who have been terminated, disciplined or reported to law enforcement for violating agency sexual abuse or sexual harassment policies. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Code of Ethics

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that any civilian, volunteer or contractor who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies and to any relevant licensing body. In the past twelve (12) months, according to the PAQ, there have been zero contracted staff members who have been terminated or reported to law enforcement for violating agency sexual abuse or sexual harassment policies. In addition, policy 22-1, Volunteers Services and Management states that volunteers, regardless of level, are expected to abide by CoreCivic and applicable contracting government agency policy, procedures, regulations, and prevailing law. Failure to do so may result in immediate termination or removal from the Volunteer Roster. Relationships that are beyond or outside the scope of the approved volunteer service being provided by the volunteer constitute grounds for immediate termination or removal from the Volunteer Roster. Termination and/or removal from volunteer services and the Volunteer Services roster may result from any violation of the volunteer code of ethics or volunteer dress code and the facility's published dress codes, and conduct restrictions at the discretion of the Warden. (b) Policy 14-02 Sexual Abuse Prevention and Response states that any other violation of CoreCivic sexual abuse or sexual harassment policies by a civilian or contractor will result in appropriate corrective action up to and including restricting contact with inmates and removal from the facility. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 22-1, Volunteers Services and Management Note from facility: there have been no substantiated allegations of contractor or volunteer sexual abuse/harassment.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

(a) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engages in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Policy also states that because the burden of proof is substantially easier to prove in an inmates/detainees disciplinary case than in a criminal prosecution, an inmate/detainee may be institutionally disciplined even through law enforcement officials decline to prosecute.

In the past twelve (12) months, there have been no administrative findings or criminal findings of guilt on inmate-on-inmate abuse that have occurred at this facility, according to the PAQ.

(b) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.

(c) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that the disciplinary process shall consider whether an inmates mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed.

In addition, Policy 15-2, Disciplinary Procedures states that if the inmate has been diagnosed as having a psychiatric illness, he Warden/Administrator and the responsible physician or their designee will be consulted prior to the disciplinary measures recommended by the Hearing Officer or Disciplinary Board being taken.

(d) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures that if the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the alleged perpetrator to participate in such interventions as a condition of access to programming or other benefits.

(e) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that an inmate may be disciplined for sexual conduct with an employee only upon finding that the employee did not consent to such contact.

(f) Policy 14-02 Sexual Abuse Prevention and Response states in the Disciplinary Procedures, substantiated incidents sections that inmates who deliberately allege false claims of sexual abuse can be disciplined. For the purposes of disciplinary action, a report of sexual abuse made in good faith based on a reasonable belief that the alleged contact occurred shall not constitute falsely reporting an incident or lying,

	even if an investigation does not establish evidence sufficient to substantiate the allegation. In the past twelve (12) months, there have been no inmates that received disciplinary action for falsified reports of sexual abuse. (g) Policy also states that sexual activity between inmates is prohibited in all CoreCivic facilities, and inmates may be disciplined for such activity. Such activity shall not be deemed sexual abuse if it is determined that the activity is not coerced. Policy 15-1 indicates that a charge of number twenty (20) sexual misconduct, is the above outlined behavior. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 15-1 Offense and Penalty Code Policy 15-2 Disciplinary Procedures Incident report Memo/Note Staff interviews
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion a) Policy 14-2 Sexual Abuse Prevention and Response states that inmates identified during the intake screening as at risk for sexual victimization with a history of prior sexual victimization whether it occurred in an institutional setting or the community shall be offered a follow-up meeting with a medical or mental health practitioner or other qualified professional within 14 days of the intake screening, Policy 13-61 Mental Health Services states that an initial mental health screening will be performed on all inmate patients during intake. To identify any obvious mental health needs. (b) Policy 14-2 Sexual Abuse Prevention and Response states that inmates, excluding jail inmates, identified during the intake screening as high risk with a history of sexually assaultive behavior, whether it occurred in an institutional setting or in the community, shall be offered a follow-up meeting with a mental health practitioner or

other qualified professional within 14 days pf the intake screening.

Policy 13-61 Mental Health Services states that mental health appraisals will be conducted by a QMHP within fourteen (14) days of admission to the facility.

(c) Policy 14-2 Sexual Abuse Prevention and Response states that inmates identified during the intake screening as at risk for sexual victimization with a history of prior sexual victimization whether it occurred in an institutional setting or the community shall be offered a follow-up meeting with a medical or mental health practitioner or other qualified professional within 14 days of the intake screening,

(d) Policy also states that patient inmate information, whether in the form of the documentary medical record, computerized data, or as information known to a member of the Health Services staff, is strictly confidential and may be disclosed only to those who are responsible for the patient inmate's care or who have a legitimate interest in the patient inmate's medical history.

With the exception of QHCP, staff shall have access to patient inmate information on a need-to-know basis, and clinicians may abstract patient inmate information for consultants to whom they refer patient inmates.

Policy 13-74, Privacy of Protected Health Information thoroughly outlines all staff who may have access to protected health information and the process of consent to release any information.

(e) Policy 13-74, Privacy of Protected Health Information thoroughly outlines all staff who may have access to protected health information and the process of consent to release any information. Further it states that an authorization from the patient is required for use and disclosure of PHI for all individuals not outlines in the policy as having access.

Policy 14-2 states that medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

CoreCivic policy 14-2 Sexual Abuse Prevention and Response states that 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.

In addition, an intake packet from mental health was provided to the auditor which is used when an inmate prompts it by answers to certain questions on the PREA Screening, which included: Intake checklist, Comprehensive Clinical Record Review, Health Questionnaire, Sick Call Procedures, Problem Oriented Progress record, and Teaching Counseling Plan Document, among other medical related documents.

	During the site visits for this audit, files randomly selected by the auditor demonstrated that inmates were not consistently being offered mental health services when required as per policy and this standard. Interviews with staff also demonstrated that staff were aware of these requirements. Of the inmate files selected for review by the auditor, eleven were missing referral or follow-up documentation. As corrective action, the auditor was sent all intake documentation and followup documentation for all intakes for February, March and April 2023, which was after all staffed were trained on the requirements of this standard. Of the 159 new intakes, 5 required MH follow up as per this standard and each was completed timely and in accordance with this standard and the facility policy. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 13-58 Medical Records Policy 13-61Mental Health Services Policy 1374 Privacy of Protected Health Information 14-2 Screening Tool 13-50 A Initial Intake Screening 13-61 A Comprehensive Mental Health Evaluation and Follow Up Investigation sample
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis interventions services, the nature and scope of which shall be determined by community medical and mental health practitioners according to their professional judgment. Policy 14-02 Sexual Abuse Prevention and Response states in the Response Procedures Sections that any employee who discovers or learns of sexual abuse, or an allegation of sexual abuse, shall ensure that the following actions are accomplished: a. The alleged victim is kept safe, has no contact with the alleged perpetrator and is immediately escorted to the Health Services Department.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged RAPE that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

Beyond the seventy-two (72) hours, physical trauma is evident, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.

Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual abuse shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests.

Whiteville has qualified medical staff on site twenty-four (24) hours per day.

(b) Policy 14-2 Sexual Abuse Prevention and Response states if the facility does not have qualified medical or mental health practitioners on staff, security first responders shall take preliminary steps to protect the victim.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

Whiteville has qualified medical staff on site twenty-four (24) hours per day.

(c) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse shall be offered timely information about and referral for timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care where medically appropriate.

Policy 13-79 Sexual Assault Response states that upon receiving a notice of an alleged rape that occurred within the previous seventy-two (72) hours, QHCP will examine the patient inmate utilizing the protocol and will arrange for the patient inmate to be transported to the local, designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted diseases.

(d) Policy 14-2 Sexual Abuse Prevention and Response states that 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. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Policy 13-79 Sexual Assault Response Investigation sample
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that the Health Services Department shall provide services in accordance with CoreCivic policy 13-79 Sexual Assault Responses, unless otherwise mandated by contract. Policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two hours, QHCP will examine the patient inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate to be transported to the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease. If physical trauma is evident for an incident beyond the seventy-two (72) hours, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above. Further, Policy 14-02 Sexual Abuse Prevention and Response states that all patient inmates who allege rape or sexual assault will be offered access to confidential support services as specified in CoreCivic Policy 14-2 Sexual Abuse Prevention and Response. (b) Policy 14-02 Sexual Abuse Prevention and Response states that the medical representative will in cases of sexual abuse, ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and address any ongoing medical care needs following the incident. In addition, the mental health representative will ensure mental health needs are addressed according to policy and local procedure. Policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two hours, QHCP will examine the

patient inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate to be transported to the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease. If physical trauma is evident for an incident beyond the seventy-two (72) hours, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.

Policy 14-02 Sexual Abuse Prevention and Response further states that the evaluation and treatment of victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following transfer to, or placement in, other facilities or release from custody.

(c) Policy 14-02 Sexual Abuse Prevention and Response states that the medical representative will in cases of sexual abuse, ensure that the facility's medical staff respond appropriately in medically stabilizing an alleged victim before assessment by a community medical provider, if medically indicated; and address any ongoing medical care needs following the incident. In addition, the mental health representative will ensure mental health needs are addressed according to policy and local procedure.

Policy 13-79 Sexual Assault Response states that upon receiving notice of an alleged RAPE that occurred within the previous seventy-two hours, QHCP will examine the patient inmate utilizing the 13-79A Rape/Sexual Assault Protocol and will arrange for the patient inmate to be transported to the local designated Emergency Room (ER) for examination, evidence collection, and prophylaxis treatment for sexually transmitted disease. If physical trauma is evident for an incident beyond the seventy-two (72) hours, the patient inmate will be transported to the local designated emergency room, in accordance with the procedures outlined above.

(d) Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests. In the event the inmate tests positive for pregnancy, the patient inmate will be provided information regarding lawful pregnancy-related services in a timely manner.

CoreCivic and Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexually abusive vaginal penetration while incarcerated shall be referred for pregnancy tests. If pregnancy results, victims shall receive timely and comprehensive information and access, to all lawful pregnancy-related medical services.

(e) Policy 14-2 Sexual Abuse Prevention and Response states that inmate victims of sexually abusive vaginal penetration while incarcerated shall be referred for pregnancy tests. If pregnancy results, victims shall receive timely and comprehensive information and access, to all lawful pregnancy-related medical

services.

(f) Policy 14-02 Sexual Abuse Prevention and Response states that inmate victims of sexual abuse while incarcerated shall be referred for tests for sexually transmitted infections as medically appropriate.

Policy 13-79 Sexual Assault Response states that patient inmate victims of sexual abuse shall be offered testing for sexually transmitted infections and 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. Patient inmate victims of sexually abusive vaginal penetration will be offered pregnancy tests. In the event the inmate tests positive for pregnancy, the patient inmate will be provided information regarding lawful pregnancy-related services in a timely manner.

(g) Policy 14-02 Sexual Abuse Prevention and Response states that 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.

(h) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall attempt to refer all known inmate-on-inmate abusers for a mental health evaluation within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Policy 14-02 Sexual Abuse Prevention and Response states that QMHP shall attempt to conduct a mental health evaluation of all know inmate on inmate abusers within sixty (60) days of learning of such abuse history and offer treatment deemed appropriate. If the inmate refuses a mental health evaluation, the refusal will be documented on the 13-49B Refusal to Accept Medical Treatment and placed in the medical record.

Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding:

PREA Standards Compliance Checklist
Policy 14-02 Sexual Abuse Prevention and Response
Policy 13-79 Sexual Assault Response
Attempts at MOU with Center for Community Solutions
Advocacy Pamphlet, English and Spanish
Policy Change Notice
5-1A Incident Report
14-2B Sexual Abuse Screening Tool
Medical and Mental Health Follow Up
Sexually Transmitted Disease Testing

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that the Warden/ Facility Administrator will ensure that a post investigation review of a sexual abuse incident is conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. In addition, to the Warden/ Facility Administrator the incident review team shall include upper-level facility management and the facility SART with input from line supervisors, investigators, and medical or mental health practitioners. Such review shall ordinarily within thirty (30) days of the conclusion of the investigation. In the past twelve (12) months, the PAQ indicated that there have been seven administrative investigations of alleged sexual abuse completed at the facility, excluding 'unfounded' incidents. (b) Policy 14-02 Sexual Abuse Prevention and Response states that an incident review team will review the incident within thirty (30) days of the conclusion of the investigation. (c) Policy 14-02 Sexual Abuse Prevention and Response states that in addition to the administrator/director, the incident review team shall include upper-level facility management, with input from line supervisors, investigators and medical or mental health practitioners. (d) Policy 14-02 Sexual Abuse Prevention and Response states that the incident review team shall: 1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 2. Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI and/or gender non-conforming identification, status or perceived status, or gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility; 3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; 4. Assess the adequacy of staffing levels in that area during different shifts; and 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. Further, policy states that all findings and recommendations for improvement will be documented on the 14-2-F Sexual Abuse Incident Review Report. Completed forms will be forwarded to the Administrator/Director, the PCM, and the FSC PREA Compliance Coordinator.

	(e) Policy 14-02 Sexual Abuse Prevention and Response states that the facility shall implement the recommendations for improvement or shall document reasons for not doing so. Of the fifteen investigations reviewed by the auditor, multiple SARTS only included the PCM and MH; no other facility officials, and one included the PCM and IA. In addition, no comments or notes were on any of the forms (were they previously scored high for victimization or perpetration, reeducation of staff for corrective action on walkthroughs, etc). Based on the lack of information and the interviews with staff, it appears that these meetings are not thorough and meaningful to review this incident and prevent future incidents. For corrective action, the ADO staff were trained on this requirement all all old cases with non-compliant SART's were re-conducted with the new PCM and reviewed to ensure nothing was missed. These were forwarded to the auditor to review. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response Sexual Abuse or Assault Incident Review Form Interview with PREA Coordinator 14-2F Sexual Abuse Incident Review Report 5-1H Incident Packet Checklist Interview with Incident Review Team Member Interview with PREA Compliance Manager Investigation Sample
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states that each facility will ensure that incidents of sexual abuse are entered into the IRD as required by CoreCivic Policy 5-1 Incident Reporting and 1-2 -BB PREA 5-1 IRD Incident Reporting Definitions. (b) Policy 14-02 Sexual Abuse Prevention and Response states that at least annually, CoreCivic shall aggregate the incident-based sexual abuse data. These shall include, at a minimum the data necessary to answer all questions from the most recent versions of the Survey of Sexual Victimization conducted by the Department of Justice. Upon request, CoreCivic shall provide all such data from the previous calendar year to the Department of Justice no later than June 30th or at a date

	requested by that Department. (c) Policy 14-02 Sexual Abuse Prevention and Response states that the aggregated data will, at a minimum, include all categories of data necessary to respond to the Survey of Sexual Violence as directed by the Department of Justice. (d) Policy 14-02 Sexual Abuse Prevention and Response states that all case records associated with claims of sexual abuse, including incident reports, investigative reports, inmate information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be retained in accordance with the facility's record retention policies. (f) Policy 14-02 Sexual Abuse Prevention and Response states that upon request, CoreCivic shall provide all data as outlined above in T.1.a.ii.-iii. from the previous calendar year to the Department of Justice no later than June 30. The facility will respond to the SSV if selected by the DOJ to do so. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response CoreCivic 2019 Annual PREA Report CoreCivic 2020 Annual PREA Report CoreCivic 2021 Annual PREA Report
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion (a) Policy 14-02 Sexual Abuse Prevention and Response states the FSC PREA Coordinator shall review all aggregated sexual abuse data collected in order to assess and improve the effectiveness of its sexual abuse prevention, detections and response policies, practices and training, to include: Identifying problem areas; Taking corrective action on an ongoing basis; and Preparing an annual report of findings and corrective actions for each facility, as well as CoreCivic as a whole. (b) Policy 14-02 Sexual Abuse Prevention and Response states such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of CoreCivic's progress in addressing sexual abuse. (c) Policy 14-02 Sexual Abuse Prevention and Response states CoreCivic's report

	shall be approved by the company's Chief Corrections Officer and made readily available to the public through CoreCivic website. (d) Policy 14-02 Sexual Abuse Prevention and Response states specific material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of a facility, but the nature of the material redacted must be indicated. During an interview with CoreCivic Vice President, Operations Administration, he stated he reviews and approves annual reports written as per this standard. Further, he stated that PREA data is reviewed on a daily, monthly, and annual basis. Incident data is provided daily to select FSC staff in a daily PREA report. Monthly and annually the data is reported as metrics in a format that can determine if there are trends at individual facilities or with inmate populations. Facilities can use the data to identify where sexual abuse may be occurring and whether changes to either physical plant, presence of staff/video coverage, or procedures would minimize the risks of incidents in those areas. The PC for the agency stated that all reports do not contain any identifying or personal information for the inmates and/or staff involved. Corrective action is and could be ongoing and could be facility specific, contract specific or agency wide. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response CoreCivic 2019 Annual PREA Report CoreCivic 2020 Annual PREA Report CoreCivic 2021 Annual PREA Report CoreCivic Public Website Interview with CoreCivic Vice President, Operations Administration
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115.89 Data storage, publication, and destruction	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) Policy 14-02 Sexual Abuse Prevention and Response states that data collected shall be stored and retained in accordance with the facility's record retention policies. (b) Policy 14-02 Sexual Abuse Prevention and Response states that the FSC PREA Coordinator shall make all aggregated sexual abuse data available to the public at least annually through the CoreCivic website.

	(c) Policy 14-02 Sexual Abuse Prevention and Response states that before making aggregated sexual abuse data publicly available, CoreCivic shall remove all personal identifiers. (d) The records retention schedule, 1-15B states that aggregated PREA Sexual Abuse data will be retained for at least 10 years. Documents Reviewed, Interviews Conducted, and Observations that helped auditor reach finding: PREA Standards Compliance Checklist Policy 14-02 Sexual Abuse Prevention and Response CoreCivic 2019 Annual PREA Report CoreCivic 2020 Annual PREA Report CoreCivic 2021 Annual PREA Report CoreCivic Public Website Records Retention Schedule
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion All information for CoreCivic PREA related topics is located at: http://www.corecivic.com/the-prison-rape-elimination-act-of-2003-pr ea This includes all prior audits, CoreCivic Policies, reporting information for inmates and their families and friends, the final standards, inmate and detainee rights, zero tolerance, investigations, and all previous agency reports form 2013-2022. This facility was previously audited and the date of the final report was September 16, 2020. This report is also available on the TDOC website located at: https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard

	Auditor Discussion All information for CoreCivic PREA related topics is located at: http://www.corecivic.com/the-prison-rape-elimination-act-of-2003-prea This includes all prior audits, CoreCivic Policies, reporting information for inmates and their families and friends, the final standards, inmate and detainee rights, zero tolerance, investigations, and all previous agency reports form 2013-2022. This facility was previously audited and the date of the final report was September 16, 2020. This report is also available on the TDOC website located at: https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>
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Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	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).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	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)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	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.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na
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?	no
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.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

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?	no

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.)	na
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.)	yes
	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.)	na
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)	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.) yes