

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility: Lee Arrendale State Prison			
Physical address: 2023 Old Gainesville Highway, Alto, GA 30510			
Date report submitted: 02/20/2015			
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Date of facility visit: 01/21/2015			
Facility Information			
Facility mailing address: <i>(if different from above)</i> PO Box 709, Alto, GA 30510			
Telephone number: 706-776-4700			
The facility is:	Military	County	Federal
	Private for profit	Municipal	State
	Private not for profit		
Facility Type:	Jail	Prison	
Name of PREA Compliance Manager: Deanne Sims		Title: SIP Coordinator	
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Agency Information			
Name of agency: Georgia Department of Corrections			
Governing authority or parent agency: <i>(if applicable)</i>			
Physical address: 300 Patrol Road, Forsyth, GA 31029			
Mailing address: <i>(if different from above)</i>			
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Agency Chief Executive Officer			
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AUDIT FINDINGS

NARRATIVE:

The Lee Arrendale State Prison (LASP) received an on-site PREA audit began January 21, 2015. In addition to the Warden and Facility PREA Manager, the State-wide PREA Coordinator was present during the audit. Prior to the on-site, the auditor completed a review of documentation provided prior to the actual on-site visit.

This institution houses females only, both youthful offenders and adult inmates. There were 1,469 inmates present at the beginning of the audit. Thirty-eight (38) inmates were interviewed. Staff interviews consisted of seventeen (17) specialized staff and ten (10) random staff.

A tour of the facility was conducted on the first day of the audit. Both PREA audit notices and PREA educational material were observed throughout the facility. There are eleven (11) buildings for housing, in addition to areas for food service, education, programming, medical, gymnasium, visitation, and administration. There is twenty-four hour a day, 7 day a week medical and mental health staff. In the past 12 months, there were thirty-eight (38) allegations of sexual abuse or sexual harassment; thirty-seven (37) which were handled through administrative investigations and one (1) which was referred for criminal investigation.

Staff receive annual training on PREA policies and procedures. Inmates receive a comprehensive PREA education within 30 days of intake. Contractors and volunteers receive PREA education that is commiserate with their inmate contact and duties.

The audit concluded with the Warden, Facility PREA Manager and State-wide PREA Coordinator on January 23, 2015.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Lee Arrendale State Prison (LASP) is Georgia's largest female facility, with a maximum capacity of 1700 offenders. LASP is tasked with a variety of missions and is dedicated to preparing women for successful return to their communities. LASP is the diagnostic facility for females entering the state system from counties throughout the state. They house all female Level III and Level IV mental health offenders. Recently, LASP was selected as a site for the Forensic Peer Mentor Program.

This facility is the home of the state's only female Probation Residential Substance Abuse Treatment Program and has recently begun a Strategic Intervention Program for non-violent offenders. Programming is a vital component of the activities at LASP including an equine rescue center (in coordination with the State Department of Agriculture) and a dog rescue program (in collaboration with the local animal shelter). Inmates are able to earn technical college credit and receive certificates in both Vet Tech and Pet Grooming. LASP houses a female fire fighter team. This team is the only all-female structured fire certified team in the

U.S. LASP boasts an intense OJT program and reentry programs that prepare women for return to society as contributing pro-social members of the community.

LASP has a wide variety of academic education opportunities to include the addition of a charter high school program at the facility, which is the first in the State. Additionally, LASP offers a Fast Track GED program allowing for more opportunities for offenders to obtain an academic education while incarcerated.

Vocational programs are also available where offenders can gain certification in skilled trades such as cosmetology, auto mechanics, woodworking, electrical repair, auto body repair and paint, and auto detailing.

The facility operates a fully functional swine operation as well as a cattle operation. Offenders are able to learn the mechanics of these areas which will give them transferable skills that can be applied once they are released from prison. LASP offers a variety of cognitive programs. Programming is evidence based and is delivered based on individual assessed needs of the offender.

SUMMARY OF AUDIT FINDINGS:

On January 23, 2015 the Lee Arrendale State Prison (LASP) on-site visit was completed. The results of the audit indicate that the agency is not fully compliant with PREA; and therefore an Interim Report is being issued. On August 16th, 2015, the agency provided documentation to address prior non-compliant standards. The facility is now compliant with PREA standards.

Number of standards exceeded:	3
Number of standards met:	38
Number of standards not met:	0
Number of standards not applicable:	2

Standard**§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Organizational Chart

Staff Interview

The agency has a policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. The policy outlines how it will implement the agency's approach. The policies include definitions, sanctions for prohibited behaviors and addresses strategies and responses. Interviews indicate that while there is time to conduct the activities of PREA, due to the implementation there are some challenges. However, both indicated that once all systems are in place that it will be much easier to manage.

Standard**§115.12 – Contracting with other entities for the confinement of inmates****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Contracts

Staff Interviews

There are currently twenty-seven (27) contracts with other agencies for the confinement of the agency's inmates. Twenty-three (23) are with jails and four (4) are with other prisons. Sample of contracts show required PREA obligations and periodic monitoring as required.

Standard**§115.13 – Supervision and monitoring****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy IIA07-0013, 208.06

Duty Officer Logbook

Staffing Analysis, dated 4/27/15

A policy and staffing analysis was provided; however neither addresses the required components of the standard. There

was no annual review documented. Deviations from the staffing plan are documented shift-by-shift in the Duty Officer Logbook. The agency policy addresses unannounced rounds on a weekly basis by Supervisory staff and undetermined frequency of rounds by the Duty Officer; however no information was provided to the auditor to confirm the practice is in place. It is noted that a form was created for this purpose, but policy states that these unannounced rounds will be documented in various logbooks. During the corrective action period, the agency provided a staffing plan analysis, dated 4/27/2015, that addresses all components of the standard, including 14 gender specific posts. Samples of unannounced rounds were provided. Unannounced rounds are required by the shift OIC and Duty Officers on each shift.

Standard

§115.14 – Youthful Inmates

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

Agency policy addresses the separation requirement between youthful offenders and adult inmates. There were eight (8) youth at the facility during the audit. All youth were sight/sound separated from adult inmates. All services are provided to youthful inmates, including education and recreation.

Standard

§115.15 – Limits to cross-gender viewing and searches

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

Clothed Searches

The agency policy prohibits any cross-gender strip search or visual body cavity searches unless exigent circumstance or by medical practitioner. The agency does not permit cross-gender pat down searches except in exigent circumstances. Any cross-gender search is required to be documented. Staff interviews confirmed that staff receive training in how to conduct cross-gender pat-searches in a respectful and professional manner and this was verified through training records. While interviewing staff, it was reported that there has been little training provided regarding the pat searches of transgender and intersex inmates. There is no policy that identifies how transgender or intersex inmates will be identified for searches. The facility provides privacy for inmates while showering, changing clothing and performing bodily functions. This was verified during the tour. The agency also prohibits searching transgender and intersex inmates strictly to identify genital status. There are policies requiring the announcement of opposite gender staff when they begin their shift. Policy also directs that information is made available in units to advise inmates that both male and females staff routinely work and visit inmate housing areas. However, policy does not direct that they re-announce if they have left the area. Inmates report that they do hear staff announce at the beginning of their shift.

During the corrective action period, the agency updated their policy regarding unannounced rounds and transgender/intersex searches. The policy now identifies that a transgender or intersex inmate shall be searched based on the gender of the population. Training was provided to all staff and the facility provided documentation of the training.

Standard

§115.16 – Inmates with disabilities and inmates who are limited English proficient

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

PREA Education Plan – disabilities/limited English

Staff Interviews

The agency has a PREA Education Plan that details how inmates with disabilities are made aware of how to report a PREA incidents. Language Line is the interpreter service and their contact information is available to the Shift OIC, Duty Officer and SART members. Inmate education is available in both English and Spanish, as well as made available through posted notices throughout the institution. A list of bilingual staff is available (Spanish/Korean), with specific instructions if a particular interpreter is not available. PREA video used for comprehensive education is only available in English. Some PREA documents are available in Spanish. Agency policy prohibits the use of inmates for interpretation except in situations where information is immediately needed to protect the safety and security of the inmates and the facility. During the corrective action, the Language Line interpreter service was identified.

Standard

§115.17 – Hiring and promotion decisions

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Guidelines for Civilian Construction Workers, Consultants, and Contract Personnel

Staff Interviews

Policy 208.06 addresses the hiring or promoting of any person who has engaged in sexual abuse or attempted to engage in sexual abuse within an institution or in the community and considers incidents of sexual harassment. All employees and contractors undergo a criminal background check prior to hire/contract. The policy addresses 5-year criminal background checks for staff, but does not address contractors. Policy does not address material omissions regarding misconduct or false information are grounds for termination. The agency does provide information to requests from institutional employers where an employee has applied to work. During the corrective action period, the agency updated their policy to include 5-year background screenings for contractors and addresses discipline regarding material omissions of misconduct or false information.

Standard**§115.18 – Upgrades to facilities and technology****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

The agency had no substantial expansion or modification to this facility. There was an updated of the video monitors to allow for better images that ultimately protect both inmates and staff. There was an upgraded video recording system also installed. New cameras were installed in one unit and the replaced cameras were relocated to other areas where additional video monitoring was needed to cover some blind areas.

Standard**§115.21 – Evidence protocol and forensic medical examinations****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Crime Scene Preservation

Local Procedure Directive

Medical Management of Suspected Sexual Abuse

Medical Management of Suspected Sexual Assault, Abuse or Harassment

Staff Interviews

The agency is responsible for both administrative and criminal investigations. Uniform Evidence Protocols are noted in a variety of policies and address all areas with the exception of informed consent for a youthful offender. The institution employs a part-time Psychologist who has received training in Rape Crisis and Sexual Assault Services, who is available to assist victims after an allegation. The medical staff are responsible for requesting her assistance if the victim requests. The agency, and medical staff, reports SANE nurse is available. The agency has a state-wide database of SANE providers for each facility.

During the corrective action period, the evidence protocols were updated to include consent of youth. All staff have received appropriate training.

Standard**§115.22 – Policies to ensure referrals of allegations for investigation****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Local Procedure Directive

Medical Management of Suspected Sexual Abuse

Medical Management of Suspected Sexual Assault, Abuse or Harassment

Staff Interviews

The agency is committed to ensuring that all allegations of sexual abuse or sexual harassment are investigated and are identified in policy as major incidents which require investigation. Any sexual assault allegations are referred to the SART team, and shall be referred to the OIC if criminal in nature. Policy is on the website.

Standard

§115.31 – Employee training

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

PREA In-service 2015

Correctional Facilities Training

Gender-Responsive Training Curriculum

Staff Interviews

Training Records

The PREA policy addresses all areas for training staff; however a review of the PREA in-services 2015 did not address communication or relevant laws related to mandatory reporting of sexual abuse to outside authorities. There is a separate class regarding Gender-Responsive Training that all staff are required to take annually.

During the corrective action period, the agency updated staff training to include mandatory reporting for youthful offenders and vulnerable adults. The facility conducted training in April 2015 for all staff regarding mandatory reporting.

Standard

§115.32 – Volunteer and contractor training

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interview

Contractor Training Record

The agency provides training for all volunteers and contractors based upon their contact with inmates. This training included zero-tolerance, how to protect the victim and who to notify.

Standard**§115.33 – Inmate education****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Inmate Education Video

Facility Tour – Posted notices

Inmate Handbook

Inmate Interviews

Staff Interviews

All inmates receive PREA training upon intake and within 72 hours, but no longer than within 30 days. This does not meet the requirements of the standards. There are two separate requirements, and they can be combined, but they would need to be completed during the intake process. All inmates are required to receive information on the Zero-Tolerance Policy and how to report at intake. Within 30 days, inmates are to receive comprehensive information. Comprehensive information is provided through the Inmate Education Video. This video is also available in Spanish. No provisions were provided for the auditor to review how this information is provided to those with disabilities. Posters were seen during the tour.

During the corrective action period, the facility updated their process for ensuring PREA education for reporting and comprehensive education for inmates. The new requirement is that all comprehensive education shall be documented and completed within 15 days.

Standard**§115.34 – Specialized training: Investigations****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Training Records

Policy requires specialized training for Investigators. The agency has provided documentation of investigators completing a 16-hour training with the Moss Group. Additionally, all SART staff have completed this same training.

Standard**§115.35 – Specialized training: Medical and mental health care****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Training Files

Staff Interviews

Policy requires medical and mental health staff are to receive standard staff training as well as specialized training. A review of documents indicates that this is complete.

Standard

§115.41 – Screening for risk of victimization and abusiveness

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

PREA Sexual Victimization/Sexual Aggressor Classification Form

Inmate Records

Staff Interviews

Inmate Interviews

All inmates arriving at the institution receiving a screening for sexual victimization or sexual aggressiveness. An objective tool is used for this purpose; however it does not contain all items as per the standard. The institution has created a Process Action Team that is reviewing the form for compliance with PREA standards. Policy requires this form to be completed within 72 hours of arrival and reviewed 30 days from intake as well as when new information is obtained. Policy prohibits discipline of an inmate for refusal to answer certain questions from the screening and has created a system in which only identified staff can access the completed screening tool.

During the corrective action period, the sexual victimization/aggressiveness screening tool was updated to include all required components and implemented at the facility.

Standard

§115.42 – Use of screening information

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

PREA Sexual Victimization/Sexual Aggressor Classification Form

Inmate Records

Staff Interviews

Staff interviews indicate that information from the PREA Sexual Victimization/Sexual Aggressor Classification Form is used to assist with housing decisions. Each housing decision is also based on other factors. Agency policy requires bi-annual review of all transgender and intersex inmates housing and programming. All inmates are given the right to shower separately from all other inmates.

Standard

§115.43 – Protective Custody

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Agency policy prohibits the use of involuntary segregated housing unless there is no other option for keeping an inmate who is vulnerable to victimization separate from aggressive inmates. All placement in involuntary segregated housing is documented. Participation in programs, privileges, education and work opportunities may be restricted due to security issues; however all efforts are made to provide certain programming within the segregated housing. All restrictions are documented. Policy requires a review every 30 days for continued restriction/placement.

Standard

§115.51 – Inmate reporting

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Inmate Handbook

PREA Pamphlets

Staff Training

Staff Interviews

Inmate Interviews

The agency allows for the reporting of any knowledge, suspicion or information through internal and external sources. Externally, inmates can mail a letter to The State Board of Pardons and Paroles, which is not a part of the Department of Corrections agency. Internally, inmates are provided two methods to report sexual abuse or sexual harassment: *7732 on the phone goes directly to the State-wide PREA Coordinator or they may notify any staff member. This information is within the Inmate Handbook as well as posted in the facility. Staff may report any knowledge, suspicion or information regarding sexual abuse or sexual harassment by following the chain of command, EAP resources, Hotline or writing to the external State Board of Pardons & Paroles or Ombudsman. Staff are provided methods to report privately and anonymously.

Standard

§115.52 – Exhaustion of administrative remedies

Overall Determination:

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

X Not Applicable

Auditor Comments (including corrective actions needed if it does not meet standard)

This standard is N/A for this institution.

Standard

§115.53 – Inmate access to outside confidential support services

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

E-mail communication with Georgia Network to End Sexual Assault (GNESA)

The State-wide PREA Coordinator is currently working with an agency to provide services. Communication between the Georgia Department of Corrections and the Georgia Network to End Sexual Assault was reviewed. During the corrective action period, the facility has implemented flyers for inmates that include the services of The Circle of Hope and the Rape Response, Inc., advocacy services for sexual assault victims.

Standard

§115.54 – Third-party reporting

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

<http://www.dcor.state.ga.us/Divisions/ExecutiveOperations/PREA.html>

Staff Interviews

The agency website provides for three separate reporting options for the receipt of third-party reports of sexual abuse or sexual harassment. They may contact the State-wide PREA Coordinator, the Ombudsman, or Victim Services. Both the Ombudsman and Victim Services will report information directly to the State-wide PREA Coordinator who will inform the Warden. Any reports made directly to the facility will be investigated as per staff interviews.

Standard

§115.61 – Staff and agency reporting duties

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Training Curriculum

Staff are prohibited by policy from sharing information regarding an allegation of sexual abuse or sexual harassment with individuals who are not identified as a part of the investigative team. All medical and mental health staff are mandated reporter of sexual abuse in the facility and so inform inmates. Staff interviews do not address knowledge of mandated reporting laws for youthful offenders and vulnerable adults. The SART team is the responsible party for all investigations of sexual abuse and sexual harassment.

During the corrective action period, the agency updated their training curriculum to include mandated reporting requirements for youthful offenders and vulnerable adults. The facility provided this updated training in April of 2015 to all staff.

Standard

§115.62 – Agency protection duties

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

All allegations of imminent sexual abuse is taken seriously and steps are taken immediately to protect the alleged victim. Notification is immediately made to the SART team who will investigate.

Standard

§115.63 – Reporting to other confinement facilities

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Any allegations of sexual abuse that are received that have occurred in another institution are required by policy to be reported to the Director/Warden of that facility. This information is documented. Policy requires that any receipt of such allegations from another institution shall be investigated similar to if the allegation was made while the inmate was housed at the facility.

Standard

§115.64 – Staff first responder duties

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

Agency policy addresses all components of the standard. First responder are required to protect the victim, address the preservation of evidence and to preserve the crime scene. All non-security staff are trained to provide the victim with protection and to make an appropriate report to the Warden.

Standard

§115.65 – Coordinated response

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Coordinated Response Checklist

Staff Interviews

The institution has a Coordinated Response Checklist that did not address all requirements of the PREA standards in response to allegations.

During the corrective action period, the facility coordinated response was updated to reflect facility specific information and to address all required components of the standard.

Standard

§115.66 – Preservation of ability to protect inmates from contact with abusers

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

This standard is not applicable.

Standard

§115.67 – Agency protection against retaliation

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

Agency policy addresses practices to protect both staff and inmates who report sexual abuse or sexual harassment from retaliation. Various protection method are identified, including housing changes, transfers for both inmates and staff, as well as emotional support services. Retaliation is monitored for a minimum of 90 days, with periodic status checks. The

policy does not address the protection of individuals who assist in the investigation.

During the corrective action period, the agency updated the policy to include protections for persons who assist in an investigation of sexual abuse/harassment but who are not the victim.

Standard

§115.68 – Post-allegation protective custody

Overall Determination:

X Exceeds Standard (substantially exceeds requirements of standard)

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

Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if it does not meet standard)

Administrative Segregation

Staff Interviews

Inmate Interviews

Agency policy meets all requirements of PREA Standard 115.43. Additionally, any inmate who has suffered sexual abuse and is placed in Administrative Segregation (Protective Custody) is seen every seven (7) days by a counselor who documents their status and provides this to the Warden. Additionally, the classification team reviews all placements in Administrative Segregation every thirty (30) days.

Standard

§115.71 – Criminal and administrative agency investigations

Overall Determination:

Exceeds Standard (substantially exceeds requirements of standard)

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

Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Investigators specialized training

Investigation Files

SART information

Staff Interviews

The agency conducts its' own administrative and criminal investigations. All investigators have received specialized training as required pursuant to PREA standard 115.34. All evidence available is gathered and preserved. Prior reports involving the same perpetrator or victim are reviewed. Credibility of any person identified during the investigation is individually based and no polygraph examination or other truth-telling device is offered as a condition of continuing the investigation. SART conducting an initial investigation and the administrative investigations. Administrative investigations include addressing staff actions, credibility and investigative facts and findings. Any investigations where there appears to be criminal activity is referred for prosecution, and no interviews are conducted without consulting the Office of Investigations and Compliance. Criminal investigations are conducted by the Office of Investigations and Compliance. Both administrative and criminal investigations are documented and include narrative of the evidence collected. Criminal investigations that involve staff are turned over to the Office of Professional Standards for further administrative investigation and disposition.

Standard**§115.72 – Evidentiary standards for administrative investigations****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Agency policy imposes no standard higher than a preponderance of the evidence in determining whether allegations are substantiated.

Standard**§115.73 – Reporting to inmate****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Inmate Interviews

Policy requires, and investigative files indicate, that inmate are advised by a SART team member at the conclusion of an investigation. Furthermore, policy requires information on the progress of the case. This notification is documented.

Standard**§115.76 – Disciplinary sanctions for staff****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Agency policy requires disciplinary sanctions, up to and including termination, for staff who violate agency policy regarding sexual abuse and sexual harassment. All disciplinary actions are reviewed based upon the nature and circumstances of the allegation and disciplinary action on prior comparable offenses. There were four separate allegations in the past 12 months, and all four staff members were terminated or resigned prior to the conclusion of the investigation. Any staff terminations for violation of the agency zero-tolerance policy are reported to the Georgia Peace Officer Standards and Training Council (POST).

Standard**§115.77 – Corrective action for contractors and volunteers****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Staff Interviews

Agency policy requires that any contractor or volunteer who violates the zero-tolerance policy are prohibited from any contact with inmates. If applicable, the actions of the contractor or volunteer will be reported to the licensing body. There were no incidents of sexual abuse or sexual harassment by a contractor or volunteer.

Standard**§115.78 – Disciplinary sanctions for inmates****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Inmate Handbook

Staff Interviews

Inmate Interviews

All inmates shall be subjected to appropriate disciplinary actions as per the PREA standards. Sanctions are commensurate with the nature and circumstances of the incident, the inmate's history and similar sanctions imposed for comparable offenses. An inmate's mental health is considered in the determination of sanctions. No inmate is sanctioned for contact with a staff member who consented to the contact. No inmate is sanctioned for good faith reporting. This agency prohibits all sexual activity between inmates.

Standard**§115.81 – Medical and mental health screenings; history of sexual abuse****Overall Determination:**

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Medical Management of Suspected Sexual Abuse

Medical Management of Suspected Sexual Assault, Abuse or Harassment

Staff Interviews

Agency policies require immediate services of medical and mental health services upon notification of sexual abuse or

sexual harassment. Confidential information of prior sexual abuse is shared only upon the consent of the inmate. Follow-up counseling is conducted within three (3) days and as necessary thereafter.

Standard

§115.82 – Access to emergency medical and mental health services

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Medical Management of Suspected Sexual Abuse

Medical Management of Suspected Sexual Assault, Abuse or Harassment

Staff Interviews

Inmates who report sexual abuse shall be immediately taken to medical. Those who report victimization within the past 72 hours will then be transported to the nearest hospital for SANE examination. Mental health services will begin immediately and followed up within three (3) days. Additional counseling services are available as necessary thereafter as well as requested by the victim. Pregnancy related and STD related information is provided. All treatment is offered at no cost to the victim, whether they identify the alleged perpetrator.

Standard

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

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Medical Management of Suspected Sexual Abuse

Medical Management of Suspected Sexual Assault, Abuse or Harassment

Staff Interviews

Agency policy provides for ongoing medical and mental health care for victims of sexual abuse, whether the incident occurred within an institution or in the community. All care is consistent with the community level of care. Follow-up care is provided within two (2) weeks and as requested by the victim. Pregnancy tests are provided if appropriate. Pregnancy information and timely services are available. STD testing and treatment is provided. There are no costs to an inmate for services as a result of sexual victimization.

Standard

§115.86 – Sexual abuse incident reviews

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

Incident Review Form

Staff Interviews

The agency requires an incident review for all allegations of sexual abuse where the findings were substantiated or unsubstantiated. The institution conducts an incident review for all sexual abuse and sexual harassment incidents. The current form does not address all participants or intake from all required participants. It is noted that there is a monthly incident report provided to the Warden that details all formal Incident Reviews for the month and includes any recommended corrective action.

During the corrective action period, the agency updated their Incident Review Checklist to meet the requirements of the standard.

Standard

§115.87 – Data collection

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

Policy 208.06

GA. Department of Corrections PREA Data Sheet

Staff Interviews

The agency maintains records and data on all allegations of sexual abuse and sexual harassment that captures information as identified by the DOJ-SSV. This information is aggregated annually and included in their annual report. The agency also obtains information from the agencies with whom it contracts for the confinement of inmates.

Standard

§115.88 – Data review for corrective action

Overall Determination:

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

Auditor Comments (including corrective actions needed if it does not meet standard)

The 2012 and 2013 reports are on the website; however the 2013 report does not address all areas required by the standards. The 2014 report is not yet completed.

During the corrective action period, the agency provided the 2014 Annual Report which meets the requirements of the standard.

Standard

§115.89 – Data storage, publication, and destruction

Overall Determination:

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

Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if it does not meet standard)

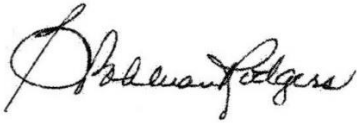
Policy 208.06

Records Management

The agency has publicized the 2012 PREA data on the website. The 2013 data is incomplete. The 2014 data is pending. The reports contain no personal identifiers. The Records Management policy identifies Investigation within the categories of records to be maintained; however it does not provide for a time limit for retention. During the corrective action period, the agency completed the 2014 Annual Report which meets the requirements of the standard. The agency also updated their current record retention policy to meet the standard.

AUDITOR CERTIFICATION:

The auditor certifies that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.



September 4, 2015

Auditor Signature

Date