PREA AUDIT: AUDITOR'S SUMMARY REPORT COMMUNITY CONFINEMENT

			Inte	erim X Fina	al Report		
Auditor Informat	Auditor Information						
Auditor name:	Katherir	ne Brown					
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Telephone numb	er: 7	727-470-4123					
Date of facility v	isit:	September 29,	2015				
Date report sub	mitted:	October 1, 201	5				
Facility Informa	tion						
Name of facility:	•	Columbus Transiti	on Cent	er			
Physical address	5:	3900 Schatulga Ro	ad Colu	mbus, GA 31907			
Facility mailing address:		SAA					
Telephone numb	er:	706-565-3400					
Columbus Trans	ition	☐ Military		☐ County	☐ Federal		
Center is:		☐ Private for pr	ofit	☐ Municipal	X State	☐ Private	not for profit
Facility Type:		☐ Community treatment center				☐ Mental Health I Cother Community	
Name of facility'	s Chief E	xecutive Officer	: Mic	chael Cannon		Title:	Superintendent
Number of staff			ansitio	on Center in the	last 12 months	:: 37	
Designed facility	•						
Current populati							
Facility security			vels:	Minimum			
Age range of the							
Name of PREA C	omplian	ce Manager:		rry Grier		Title:	Lieutenant
Email address:	_		<u>haı</u>	rry.grier@gdc.ga.	.gov	Telephone #	706-565-7855
Agency Informa							
Name of agency		Georgia Departme	nt of Co	rrections			
Governing author parent agency:	ority or	Georgia Departme	nt of Co	rrections			
Physical address	5 :	300 Patrol Rd. For	syth, GA	31029			
Mailing address:	ŀ	N/A					
Telephone numb		478-992-5101					
Agency Chief Ex							
Name: Hom	ner Bryson			Title:	Commissioner		
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Agency-Wid	de PREA Coordinator		
Name:	Sharon Shaver	Title:	GDC Statewide PREA Coordinator
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AUDIT FINDINGS

NARRATIVE:

The audit of Columbus Transition Center was conducted on September 29, 2015 by Katherine Brown, Certified PREA auditor. The areas toured were a total of 3 wings, plus the kitchen, laundry, programs area, and work areas.

An entrance meeting was held with facility staff. The following people were in attendance: Superintendent Michael Cannon; Lt. Harry Grier and Melvin Butts, Statewide PREA Coordinator.

Following the entrance meeting I toured the Columbus Transition Center from 10:30 - 10:45. On the tour with me was, Superintendent Michael Cannon; Lt. Harry Grier and Melvin Butts, Statewide PREA Coordinator.

I asked for an alpha listing of all residents housed at Columbus Transition Center and randomly selected 10 resident to interview. I also asked for any residents who were limited English speaking or had hearing/vision impairment to be interviewed. There were no limited English speaking or hearing/vision impairment residents at the facility at the time of the audit. I also asked for any resident who was transgender/intersex, there were none. I asked for a shift roster and randomly selected staff to interview on both shifts.

There were no sexual assault/harassment allegation cases.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Columbus Transition Center is located at 3900 Schatulga Road Columbus GA. 31907 in Muscogee County. Columbus Transition Center is located approximately 90 miles from Atlanta. It houses 140 medium/minimum level security residents. There are three wings A Wing has 13 rooms each housing 4 residents to a room. 12 of these rooms have an adjoining bathroom and shower. One room has a private bathroom. B Wing is the safe house wing and has 20 rooms, each room housing 4 residents to a room. There is an adjoining bathroom and shower. The rooms closest to the Sergeants office are used as the safe rooms. C Wing has 7 rooms each housing 6 residents to a room with an adjoining bathroom and shower area. There are no segregation cells.

SUMMARY OF AUDIT FINDINGS: (39)

Number of standards exceeded:

Number of standards met: 38

Number of standards not met:

Number of standards not applicable: 1

Zero tolerance of sexual abuse and sexual harassment; PREA coordinator §115.211 ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard Reviewed GDC 208.06 IV. A. 1; Columbus Transition Center Organizational Chart and Georgia Organizational chart. Based on interviews with PREA Coordinator and PREA compliance manager. Georgia Department of Corrections has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlines Georgia Department of Corrections' approach to preventing, detecting, and responding to such conduct. Georgia Department of Corrections employs or designates an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. §115.212 Contracting with other agencies for confinement of residents ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard Based on interview with agency's contract compliance manager. All contracts include the entity's obligation to adopt and comply with the PREA standards. Any new contract or contract renewal provides for agency contract monitoring to ensure that the contractor is complying with the PREA standards. **§115.213 Supervision and monitoring** ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. A. 3 and Staffing Plan. Based on interview with Superintendent: PREA Compliance Manager and PREA Coordinator.

Georgia Department of Corrections has developed, documented, and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring, to protect residents against sexual abuse.

In circumstances where the staffing plan was not complied with, Columbus Transition Center documented and justified all deviations from the plan.

Georgia Department of Corrections completes an annual review, in consultation with the PREA coordinator required by § 115.11, to assess, determine, and document whether adjustments are needed.

§115.215 Limits to cross gender viewing and searches

	□ Exceeds Standard ((substantially	exceeds rec	auirement d	of standard)
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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 does not meet standard

Reviewed GDC 208.06 IV. A. 5 (a-g); lesson plan; PowerPoint and Training Rosters.

Columbus Transition Center does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances. Columbus Transition Center documents all cross gender strip searches and cross gender visual body cavity searches, pat down searches of female residents.

Columbus Transition Center has policies and procedures that enable residents 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering a resident housing unit.

Columbus Transition Center does not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. If the resident's genital status is unknown, it is determined during conversations with the resident, 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.

Georgia Department of Corrections trains security staff in how to conduct cross-gender patdown searches, and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

§115.216 Residents with disabilities and limited English speaking

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV.A.6 (a&b); PREA Pamphlet English/Spanish and Language Line contract. Based on random resident and staff interviews.

Georgia Department of Corrections takes appropriate steps to ensure residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of Georgia Department of Corrections' efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. There were no disabled or limited English speaking residents at this facility at the time of the audit.

Georgia Department of Corrections does not rely on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety. None have been used or required.

§115.217 Hiring and promotion decisions

☐ Exc	eeds S	Stand	lard	(su	bstantial	y exceed	ls requ	iirement	of	stand	lard)
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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 does not meet standard

Reviewed GDC 208.06 IV. A. 7 (a-d); reviewed personnel files. Based on interview with Human Resource Director and review of personnel files.

The HR Director at Rutledge State Prison is also responsible for Columbus Transition Center. All personnel files are maintained at Rutledge SP.

Georgia Department of Corrections does not hire or promote anyone who may have contact with residents, and does not enlist the services of any contractor who may have contact with residents, who has engaged in sexual abuse in any criminal justice facility, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above.

Georgia Department of Corrections considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.

Georgia Department of Corrections performs a criminal background records check before enlisting the services of any contractor who may have contact with residents performs a records check at least every five years of current employees and contractors who may have contact with residents. Reviewed 5 year background check.

§115.218 Upgrades to facilities and technology

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. A. 8 Based on interview of agency head and Superintendent.

When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, Georgia Department of Corrections considers how such technology may enhance Georgia Department of Corrections' ability to protect residents from sexual abuse. There have been no substantial or modifications to existing facilities.

§115.221 Evidence protocol and forensic medical exams

 Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. B.1 (a-f); SANE Nurse Call Roster – Global Diagnostic. Based on interview with SANE/SAFE staff and PREA compliance manager.

To the extent Georgia Department of Corrections is responsible for investigating allegations of sexual abuse; Georgia Department of Corrections follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions

Georgia Department of Corrections offers all victims of sexual abuse access to forensic medical examinations through Global Diagnostic, without financial cost, where evidentiary or medically appropriate. Such examinations are be performed by Sexual Assault Nurse Examiners (SANEs) where possible.

Georgia Department of Corrections makes available to the victim a victim advocate in house by a trained staff member or there is an outside one available through the Sexual Assault Support Center.

As requested by the victim, the victim advocate or qualified agency staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and are provide emotional support, crisis intervention, information, and referrals.

§115.222 Policies to ensure referrals of allegations for investigations

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV.B.1. Based on interview with agency head and investigative staff.

Georgia Department of Corrections ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

Georgia Department of Corrections has a policy that ensures allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. Georgia Department of Corrections publishes such policy on its website www.dcor.state.ga.us. Georgia Department of Corrections documents all such referrals.

§115.231 Employee training

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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 does not meet standard

Reviewed GDC 208.06 IV. C. 2; Sexual Assault/Sexual Misconduct Acknowledgement Statement. Based on interview with random staff.

Georgia Department of Corrections trains all employees who have contact with residents on:

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

(10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The training is tailored to the gender of the residents at Columbus Transition Center. The employees receive additional training if the employee is reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa.

Georgia Department of Corrections documents, through employee signature, those employees understand the training they have received.

§115.232 Volunteer and contractors training

- ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV.C-3 (a-c); Sexual Assault/Sexual Misconduct Acknowledgement Statement for Supervised and unsupervised Volunteers/Contractors and Power Point. Based on interview with volunteer and contractors.

Georgia Department of Corrections ensures all volunteers and contractors who have contact with residents have been trained on their responsibilities under Georgia Department of Corrections' sexual abuse and sexual harassment prevention, detection, and response policies and procedures.

The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents, but all volunteers and contractors who have contact with residents are notified of Georgia Department of Corrections' zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Georgia Department of Corrections has documentation confirming that volunteers and contractors understand the training they have received.

§115.233 Resident education

- 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 does not meet standard

Reviewed GDC 208.06 IV. C. 4; PREA Pamphlet English/Spanish; Offender Orientation Checklist; Work Release Sexual Harassment Policy and PREA Acknowledgement Statement. Based on interview with random residents and intake staff.

During the intake process, residents receive information explaining Georgia Department of Corrections' zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment and their right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents. Columbus Transition Center shows all residents the "Speak Up" video during orientation.

Georgia Department of Corrections provides refresher information whenever a resident is transferred to a different facility.

Georgia Department of Corrections provides resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills. There were no disabled or limited English speaking residents at the facility at the time of the audit.

§115.234 Specialized training: Investigators

☐ Exceeds Standard	(substantially	exceeds requirement	t of standard)
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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 does not meet standard

Reviewed GDC 208.06 IV. C. 5. Based on interview with investigative staff.

In addition to the general training provided to all employees Georgia Department of Corrections ensures that the in house investigators have received training in conducting investigations in confinement settings.

Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Georgia Department of Corrections maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

§115.235 Specialized training: Medical and mental health care

Exceeds	Standard	(substantially	exceeds	requirement	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 does not meet standard

Based on review of NIC PREA Medical Health Care for Sexual Assault Victims in a Confinement Setting.

Georgia Department of Corrections ensures 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; preserve physical evidence of sexual abuse; respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Georgia Department of Corrections maintains documentation that medical and mental health practitioners have received the training.

Medical and mental health care practitioners also receive the training mandated for employees, contractors and volunteers.

§115.241 Screening for risk of victimization and abusiveness

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC 208.06 IV.D.1 (a-h); PREA Sexual Victim/Sexual Aggressor Classification Screening. Based on interview with random residents and intake staff responsible for screening. Only limited staff has access to the risk screening form only Medical, Mental Health and PREA Manager.

All residents are assessed during an intake screening and upon transfer to another facility for risk of being sexually abused by other residents or sexually abusive toward other residents.

Intake screenings take place upon arrival at Columbus Transition Center.

Columbus Transition Center uses an objective screening instrument.

The intake screening considers, at a minimum, the following criteria to assess residents for risk of sexual victimization:

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

The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to Georgia Department of Corrections, in assessing residents for risk of being sexually abusive.

Within 30 days from the resident's arrival at Columbus Transition Center, Columbus Transition Center reassesses the resident's risk of victimization or abusiveness based upon any additional, relevant information received by Columbus Transition Center since the intake screening.

A resident's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness.

Residents are not disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked.

Georgia Department of Corrections implements appropriate controls on the dissemination within Columbus Transition Center of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents.

§115.242 Use of screening information

□ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC 208.06 IV. D. 2 (a-d). Based on interview with PREA compliance manager and staff responsible for risk screening.

Georgia Department of Corrections uses information from the risk screening to decide housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive.

Georgia Department of Corrections makes individualized determinations about how to ensure the safety of each resident.

There were no transgender or intersex residents at the facility at the time of the audit, however there are policies in place to address the following:

In deciding whether to assign a transgender or intersex resident to a facility for male or female residents, and in making other housing and programming assignments, Georgia Department of Corrections considers on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether the placement would present management or security problems.

Placement and programming assignments for each transgender or intersex resident is reassessed at least twice each year to review any threats to safety experienced by the resident.

A transgender or intersex resident's own views with respect to his or her own safety are given serious consideration.

Transgender and intersex residents are given the opportunity to shower separately from other residents.

Georgia Department of Corrections does not place lesbian, gay, bisexual, transgender, or intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such residents.

§115.251	Resident reporting	

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC 208.06 IV. E. 1 (a-e); PREA pamphlet; Staff Guide on the Prevention and Reporting of Sexual Misconduct. Based on interviews with random staff and residents.

Georgia Department of Corrections provides multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Georgia Department of Corrections provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of Georgia Department of Corrections, and that is able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials, allowing the resident to remain anonymous upon request.

Staff accepts reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports.

Georgia Department of Corrections provides a method for staff to privately report sexual abuse and sexual harassment of residents.

§115.252 Exhaustion of administrative remedies

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on review of SOP II. B.02-0001 and SOP II. B.05-0001.

Georgia Department of Corrections does not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.

Georgia Department of Corrections does not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.

Georgia Department of Corrections ensures that a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint.

Georgia Department of Corrections issues 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.

Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, are permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and are also be permitted to file such requests on behalf of residents.

Georgia Department of Corrections has established procedures for the filing of an emergency grievance when the resident is subject to a substantial risk of imminent sexual abuse.

After receiving an emergency grievance alleging a substantial risk of imminent sexual abuse, Georgia Department of Corrections immediately forwards 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 is taken, and provides an initial response within 48 hours, and issues a final agency decision within 5 calendar days. The initial response and final agency decision documents Georgia Department of Corrections' determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Georgia Department of Corrections may discipline a resident for filing a grievance related to alleged sexual abuse only where Georgia Department of Corrections demonstrates that the resident filed the grievance in bad faith.

§115.253 Resident access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC 208.06 IV. F. Based on interview with random residents.

Columbus Transition Center provides residents with access to outside victim advocates through Sexual Assault Support Center for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations. Columbus Transition Center enables reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.

Columbus Transition Center informs residents, 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.

Columbus Transition Center has a memoranda of understanding with the Sexual Assault Support Center to provide residents with confidential emotional support services related to sexual abuse.

§115.254 Third party reporting

- ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. E. 4. Georgia Department of Corrections has a method to receive third-party reports of sexual abuse/harassment and distributes publicly, information on how to report sexual abuse and sexual harassment on behalf of a resident.

§115.261 Staff and agency reporting duties

□ Exceeds Standard ((substantially	exceeds requirement of	of standard)
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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)

Reviewed GDC 208.06 IV. F. 1 (g-i); Response Procedure for Sexual Assault, Contact and Harassment. Based on interviews with random staff; Superintendent and medical/mental health staff.

Georgia Department of Corrections requires 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 Georgia Department of Corrections; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Apart from reporting to designated supervisors or officials, staff does not reveal 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.

If the alleged victim is considered a vulnerable adult under a State or local vulnerable person's statute, Georgia Department of Corrections reports the allegation to the designated State or local services agency under applicable mandatory reporting laws.

Columbus Transition Center reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to Columbus Transition Center's designated investigators.

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard Based on interviews with random staff, and Superintendent. Immediate action is taken to protect residents when Georgia Department of Corrections learns that a resident is subject to a substantial risk of imminent sexual abuse. §115.263 Reporting to other confinement facilities ☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard Reviewed GDC 208.06 IV. F.3 (a-d). Based on interview with agency head and Superintendent. Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of Columbus Transition Center that received the allegation notifies the head of the facility where the alleged abuse occurred. Such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented. **§115.264** Staff first responder duties ☐ Exceeds Standard (substantially exceeds requirement 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)

§115.262

Agency protection duties

Auditor comments, including corrective actions needed if does not meet standard

Reviewed GDC 208.06 IV. F. 4. Based on interview with security staff who are first responders, random staff.

Upon learning of an allegation that a resident was sexually abused, the first security staff member to respond separates the alleged victim and abuser; preserves and protects any crime scene until appropriate steps can be taken to collect any evidence; and if the abuse occurred

within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and if the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

If the first staff responder is not a security staff member, the responder request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

SCCu	Tity Staff.
§115.265	Coordinated response
	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for e relevant review period)
	Does Not Meet Standard (requires corrective action)
Aud	itor comments, including corrective actions needed if does not meet standard
	ewed GDC 208.06 IV. F. 5; Coordinated Response Plan. Based on interview with erintendent.
resp	mbus Transition Center has a written institutional plan to coordinate actions taken in onse to an incident of sexual abuse, among staff first responders, medical and mental th practitioners, investigators, and facility leadership.
§115.266	Preservation of ability to protect residents from contact with abusers
	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard r the relevant review period)
	Does Not Meet Standard (requires corrective action)
Х	Not applicable Standard
Aud	itor comments, including corrective actions needed if does not meet standard
Base	ed on interview with agency head, GDC does not have collective bargaining.
§115.267	Agency protection against retaliation
	Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. F. 6 (a-e). Based on interview with agency head, Superintendent, and designated staff member responsible for monitoring retaliation.

Georgia Department of Corrections has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff, and designate which staff members or departments are charged with monitoring retaliation.

Georgia Department of Corrections has multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

For at least 90 days following a report of sexual abuse, Georgia Department of Corrections monitors the conduct and treatment of residents or staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff, and act promptly to remedy any such retaliation. There is periodic status checks performed. Items Georgia Department of Corrections should monitor include any resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Georgia Department of Corrections continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

If any other individual who cooperates with an investigation expresses a fear of retaliation, Georgia Department of Corrections takes appropriate measures to protect that individual against retaliation.

§115.271 Criminal and administrative agency investigation

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. G.3. Based on interview with investigative staff

Columbus Transition Center has not had any PREA allegations.

When Georgia Department of Corrections conducts its own investigations into allegations of sexual abuse and sexual harassment, it does so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

Where sexual abuse is alleged, Georgia Department of Corrections uses investigators who have received special training in sexual abuse investigations.

Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged

victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

When the quality of evidence appears to support criminal prosecution, Georgia Department of Corrections conducts compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person's status as resident or staff. No agency requires a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that contain a thorough description of physical, testimonial, and documentary evidence, the reasoning behind credibility assessments, and investigative facts and findings, and attaches copies of all documentary evidence where feasible. All administrative investigations are conducted by GDC Internal Affairs.

Substantiated allegations of conduct that appears to be criminal are referred for prosecution.

Georgia Department of Corrections retains all written reports for as long as the alleged abuser is incarcerated or employed by Georgia Department of Corrections, plus five years.

The departure of the alleged abuser or victim from the employment or control of Columbus Transition Center or agency does not provide a basis for terminating an investigation.

§115.272 Evidentiary standard for administrative investigation

□ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV.G.14. Based on interview with investigative staff

Georgia Department of Corrections imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

§115.273 Reporting to residents

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. G. 15. Based on interview with Superintendent and investigative staff;

Following an investigation into a resident's allegation that they suffered sexual abuse in an agency facility, Georgia Department of Corrections informs the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

If Georgia Department of Corrections did not conduct the investigation, it requests the relevant information from the investigative agency in order to inform the resident.

Following an resident's allegation that a staff member has committed sexual abuse against the resident, Georgia Department of Corrections subsequently informs the resident (unless Georgia Department of Corrections has determined that the allegation is unfounded) whenever the staff member is no longer posted within the resident's unit; the staff member is no longer employed at Columbus Transition Center; Georgia Department of Corrections learns that the staff member has been indicted on a charge related to sexual abuse within Columbus Transition Center; or Georgia Department of Corrections learns that the staff member has been convicted on a charge related to sexual abuse within Columbus Transition Center.

Following a resident's allegation that they had been sexually abused by another resident, Georgia Department of Corrections subsequently informs the alleged victim whenever Georgia Department of Corrections learns that the alleged abuser has been indicted on a charge related to sexual abuse within Columbus Transition Center; or Georgia Department of Corrections learns that the alleged abuser has been convicted on a charge related to sexual abuse within Columbus Transition Center.

All such notifications or attempted notifications are documented.

An agency's obligation to report under this standard is terminated if the resident is released from Georgia Department of Corrections' custody.

§115.276 Disciplinary sanctions for staff

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. H

Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

§115.277 Corrective action for contractors and volunteers

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Reviewed GDC 208.06 IV. H. 2. Based on interview with Superintendent.

Any contractor or volunteer who engages in sexual abuse is prohibited from contact with residents and are reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Columbus Transition Center takes appropriate remedial measures, and considers whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

§115.278 Disciplinary sanctions for residents

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 does not meet standard

Reviewed GDC 208.06 IV. H. 3. Based on interview with medical/mental health staff

Residents are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse.

Sanctions are commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories.

The disciplinary process considers whether a resident's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.

Georgia Department of Corrections disciplines a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Georgia Department of Corrections prohibits all sexual activity between residents and may discipline residents for such activity.

§115.282 Access to emergency medical and mental health services

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC SOP VH07-0001; PREA Medical Log; Nursing Assessment Form for Alleged Sexual Assault. Based on interview with medical and mental health staff.

Resident 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. All mental health services are provided at Rutledge State Prison.

If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health practitioners.

Resident victims of sexual abuse while incarcerated are 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.

Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

§115.283 Ongoing medical and mental health care for sexual abuse victims

]	Exceed	s S	tand	lard	(SU	ıbs	tani	tial	ly	excee	ds	requ	uire	emen	t o	S	tanc	lard)
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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 does not meet standard

Reviewed MH/MR Mental Health Evaluation for Services. Based on interview with medical/mental health staff and residents who reported sexual assault.

Columbus Transition Center offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. All mental health services are provided by Rutledge State Prison.

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.

Columbus Transition Center provides such victims with medical and mental health services consistent with the community level of care.

Resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Sexual abuse incident reviews

☐ Exceeds Standard (substantially exceeds requirement 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 does not meet standard

Based on review of GDC 208.06 IV. J and PREA Monthly Meeting. Based on interview with Superintendent, PREA compliance manager; incident review team.

Columbus Transition Center conducts 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. This review occurs within 30 days of the conclusion of the investigation. The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

The review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at Columbus Transition Center; and they examine the area in Columbus Transition Center where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

§115.287 **Data collection**

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

г	Does	Not	Meet	Standard	(requir	es corr	ective	action)
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Auditor comments, including corrective actions needed if does not meet standard

Reviewed 2014 Annual Report posted on web site. Based on interview with PREA Coordinator.

Georgia Department of Corrections collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually.

The incident-based data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Georgia Department of Corrections maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Georgia Department of Corrections obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents.

Upon request, Georgia Department of Corrections provides all such data from the previous calendar year to the Department of Justice no later than June 30.

Data review for corrective action

☐ Exceeds Standard (substantially exceeds requirement of sta
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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 does not meet standard

Reviewed 2014 Annual Report posted on web site. Based on interview with PREA Coordinator.

Georgia Department of Corrections reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as Georgia Department of Corrections as a whole.

Such reports includes a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of Georgia Department of Corrections' progress in addressing sexual abuse.

Georgia Department of Corrections' report is approved by Georgia Department of Corrections head and made readily available to the public through its website www.dcor.state.ga.us/pdf/GDC-Annual-PREA-Report-CY2014.pdf

§115.289 **Data storage, publication and destruction**

PREA AUDIT: AUDITOR'S SUMMARY REPORT

☐ Exceeds Standard (substantially exceeds requirement	of standard)
X Meets Standard (substantial compliance; complies in a the relevant review period)	ll material ways with the standard for
☐ Does Not Meet Standard (requires corrective action)	
Auditor comments, including corrective actions need	ded if does not meet standard
Reviewed 2014 Annual Report posted on web site. Based of	on interview with PREA Coordinator.
Georgia Department of Corrections makes all aggregate under its direct control and private facilities with which public at least annually through its website www.dco.ncorrections makes all aggregate under its direct control and private facilities with which public at least annually through its website www.dco.ncorrections with which public at least annually through its website www.dco.ncorrections was all aggregate under its direct control and private facilities with which public at least annually through its website www.dco.ncorrections was all aggregate under its direct control and private facilities with which public at least annually through its website www.dco.ncorrections was all aggregate.	it contracts, readily available to the
All reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires.	
AUDITOR CERTIFICATION:	
The auditor certifies that the contents of the report are accurate to conflict of interest exists with respect to his or her ability to conductor corrections under review.	_
Katherine Brown	October 1, 2015
Auditor Signature	Date