

PREA Facility Audit Report: Final

Name of Facility: Northwest Correctional Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: 01/20/2022

Date Final Report Submitted: 05/24/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Debra D. Dawson	Date of Signature: 05/24/2022

AUDITOR INFORMATION	
Auditor name:	Dawson, Debra
Email:	dddawsonprofessionalaudits@gmail.com
Start Date of On-Site Audit:	12/06/2021
End Date of On-Site Audit:	12/08/2021

FACILITY INFORMATION	
Facility name:	Northwest Correctional Complex
Facility physical address:	960 State Rte. 212, Tiptonville, Tennessee - 38079
Facility mailing address:	

Primary Contact	
Name:	Jerri Lumley
Email Address:	Jerri.Lumley@tn.gov
Telephone Number:	731-253-0567

Warden/Jail Administrator/Sheriff/Director	
Name:	Kevin Genovese
Email Address:	Kevin.Genovese@tn.gov
Telephone Number:	731-253-5111

Facility PREA Compliance Manager	
Name:	Jerri Lumley
Email Address:	Jerri.Lumley@tn.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Leslie Jones
Email Address:	lejones@TeamCenturion.com
Telephone Number:	731-253-5021

Facility Characteristics	
Designed facility capacity:	1774
Current population of facility:	1657
Average daily population for the past 12 months:	1554
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	16 - 85
Facility security levels/inmate custody levels:	Minimum to Close
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	438
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	80
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	35

AGENCY INFORMATION	
Name of agency:	Tennessee Department of Correction
Governing authority or parent agency (if applicable):	
Physical Address:	320 Sixth Avenue North, Nashville, Tennessee - 37243
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Blake Pollock	Email Address:	Blake.H.Pollock@tn.gov

SUMMARY OF AUDIT FINDINGS

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

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

Number of standards exceeded:	
3	<ul style="list-style-type: none"> • 115.17 - Hiring and promotion decisions • 115.33 - Inmate education • 115.41 - Screening for risk of victimization and abusiveness
Number of standards met:	
42	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2021-12-06
2. End date of the onsite portion of the audit:	2021-12-08

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	W.A.R.P. Ms. Lyon Regional Violence Response Specialist and Facility Victim Advocate Counselor Stray,

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1774
15. Average daily population for the past 12 months:	1554
16. Number of inmate/resident/detainee housing units:	32
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1609
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	175
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	15
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	5
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	120
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	8
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	8
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	40
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	4
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	35
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	80
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	26
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Requested roster to identify inmates and their race, age, housing assignments and length of time at facility within 12 months and beyond 12 months
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	26
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	4
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Inmates identified with a cognitive or functional disability are designated to the Lois DeBerry Special Needs Facility</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Inmates identified as blind are designated to the Lois DeBerry Special Needs Facility</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>4</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>5</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>7</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>4</p>

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Per interviews with inmates who reported sexual abuse, they were not placed in segregation upon reporting the allegation. This was also verified during the review of their housing assignment after the allegation was reported. Per interviews with the PCM, Warden, Investigative Staff, inmates who report allegations of sexual abuse are not placed in segregation due to reporting a PREA allegation.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Conducted interviews with four of the seven juveniles housed at the facility
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	18
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	26
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input checked="" type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input checked="" type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input checked="" type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<ul style="list-style-type: none"> <input checked="" type="radio"/> Yes <input type="radio"/> No
<p>a. Enter the total number of VOLUNTEERS who were interviewed:</p>	<p>2</p>

<p>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input checked="" type="checkbox"/> Religious</p> <p><input type="checkbox"/> Other</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>4</p>
<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input checked="" type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input checked="" type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>No text provided.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	9	0	9	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	10	0	10	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	0	6	0
Staff-on-inmate sexual harassment	8	0	8	0
Total	14	0	14	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	1	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	3	4	2
Staff-on-inmate sexual abuse	0	0	1	0
Total	1	3	4	2

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	2	0	4
Staff-on-inmate sexual harassment	0	2	4	2
Total	0	4	4	6

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	25
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	10
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<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>14</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>

109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	8
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No
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AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 1283 815" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART (Sexual Abuse Response Teams) 3. TDOC Index 502.06 PREA Implementation, Education and Compliance 4. NWCX Organizational Chart and TDOC Organization Chart 5. NWCX Index 502.06.2-1 PREA Allegations, Investigations, and SART 6. NWCX Monthly PREA Inspection Reports 7. Interviews with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator b. NWCX PREA Compliance Manager <p data-bbox="240 846 1493 1137">115.11(a) The agency and facility have a comprehensive written policy that mandates zero tolerance toward all types of sexual abuse and sexual harassment. Index TDOC.502.06 states it is the policy of the TDOC to provide a safe, human, and appropriately secure environment, free from the threat of sexual abuse and sexual harassment for all inmates, by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged and substantiated sexual assaults and sexual harassment within its facilities. The Directive clearly outlines the agency's zero tolerance policy and identifies the agency's approach to the prevention, detection, and response to sexual assault incidents in their facility. The Directive includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment that are consistent with the PREA standards. The Directive also outlines sanctions for those that have participated in such prohibited behaviors to include staff, contractors, volunteers, and the inmate population.</p> <p data-bbox="240 1169 1477 1460">In addition to TDOC Index 502.06 PREA Implementation, Education and Compliance. The Department also developed TDOC Index 502.06.2 PREA Allegations, Investigations, and SART Sexual Abuse Response Teams (SART). The policy outlines the duties and responsibilities of staff designated to serve on an organized and structured team responsible for developing and maintaining a program of prevention, detection, response, investigation, and tracking of sexual assaults and the persons involved. The policies includes definitions pertaining to PREA, and procedures after receiving an allegation of PREA; multiple methods for inmate reporting, responsibilities of First Responders; SART Response; SART Investigations; Sexual Abuse Incident Review; monitoring for retaliation; administrative investigations; criminal investigations; reporting the status of allegations to inmates; disciplinary sanctions for inmates; sanctions for contractor and volunteers; and allegations occurring in other correction settings.</p> <p data-bbox="240 1491 1489 1720">TDOC 502.06 indicates each PREA Site Coordinator and /or PREA Compliance Manager shall ensure unannounced PREA-free walk (inspection) is conducted monthly in accordance with PREA Inspection Team Worksheet, CR-3821. This inspection shall be conducted to identify and deter sexual abuse and sexual harassment. By the 15th of each month, the Warden/Superintendent/Designee shall submit the facility's previous month's PREA Inspection to the Assistant Commissioner of Prisons. The Assistant Commissioner of Prison/designee shall compile all the facility reports and forward to each Assistant Commissioner, Deputy Commissioner, Inspector General, Statewide PREA Coordinator, and Director of Decision Support: Research and Planning for review.</p> <p data-bbox="240 1751 1493 2078">NWCX 502.06.2-1 was developed to establish standardized procedures in the reporting and investigations of all PREA allegations and role of the Sexual Abuse Response Team. The Head of Agency Designee, State-wide PREA Coordinator and NWCX PCM indicated monthly PREA walks, meetings, and reports are conducted in accordance with TDOC policy and inspection standards such as why an incident occurred in a particular area, and what corrective actions could be applied if applicable. SART reviews security equipment and submit recommendations for mirrors and video placement that would serve as an additional level protection for inmates from sexual assault or sexual abuse during the monthly walk-throughs. A work order is submitted as needed and is required to be completed within 30 days of submission. A member of SART also serve on the Sexual Assault Incident Review Team and designated members also serve as the facility's victim advocate. Copies of the monthly walk throughs throughout the review period was presented for review. These staff also document the review of standards 115.11 through 115.86.</p> <p data-bbox="240 2110 1390 2145">review of reports submitted to the Warden from Facility PREA Coordinator documenting the findings of the Monthly</p>

Unannounced PREA Walk Through /SART Meeting confirmed activities was beneficial to the facility. Specific members of the SART identified various PREA concerns that included recommendation of mirrors in blind spots while submitting work orders, presenting PREA related scenarios to various staff for response and awareness, and identifying security concerns to include unsecured doors with departmental staff

115.11(b) The agency has designated a State-wide PREA Coordinator with the Office of the Inspector General, who is assigned the duties of overseeing the agency's efforts regarding PREA in all its facilities. The agency's organizational chart shows the State-wide PREA Coordinator reports directly to the Director Compliance with the Office of the Inspector General. The auditor interviewed the State-wide PREA Coordinator and confirmed he has the time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities. Throughout the audit process to include pre-audit, on-site visit, post-audit phase and corrective action period, an open line of communication was maintained with the State-wide PREA Coordinator who demonstrated an active and productive role in providing guidance, training, and assistance to the NWCX PCM in her role as such while also providing assistance and follow through upon the request of documentation by this auditor.

115.11(c) The Associate Warden of Treatment (T) at each TDOC facility serve as the facility PREA Coordinator and reports directly to the Warden. All TDOC facilities also has an on-site PREA Compliance Manager (PCM) who works to ensure the facility's compliance with the DOJ PREA standards. The facility's organizational chart was provided for review. The chart shows the NWCX PCM position as a dedicated position who reports directly to the Warden. In her position as the NWCX PCM she reports directly to the Warden while maintaining an open line of communication with the Associate Warden (T) who is also the NWCX PREA Coordinator. The NWCX PCM also holds the position of Correctional Counselor 3. The auditor interviewed the NWCX PCM and confirmed that although being the PCM is a busy position, she is given the time to complete duties as the PCM. She has an open line of communication with the NWCX PREA Coordinator, and Warden to discuss any concerns regarding complying with PREA standards. She added the State-wide PREA Coordinator is always available to assist her while providing training and guidance that enables her to perform the duties as such. Any identified issues with complying with the PREA standards are discussed with the Warden, Facility PREA Coordinator and department head supervisor to address corrective actions.

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 767 640" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. Copies of contracts with private agencies 3. Contract facilities website PREA reports 4. Interviews with the following: <ol data-bbox="242 557 568 640" style="list-style-type: none"> a. State-wide PREA Coordinator b. TDOC Contract Monitor <p data-bbox="242 674 1484 869">NWCX does not contract for the confinement of its inmates. However, the Tennessee Department of Corrections does have 4 contracts for the confinement of inmates, and all are monitored by the Contract Monitoring Division within the Office of the Inspector General. Two TDOC contract monitors are located at each of the contract facilities. One holds the position of the Commissioner's designee and is assigned to monitor the facility's daily operational procedures. The second contract monitor is designated to monitor the contract between TDOC and the contracting agency for compliance with all requirements to include PREA standards.</p> <p data-bbox="242 898 1492 1059">Per an interview with the contract monitor, he oversees the daily operations and ensures all PREA allegations are logged into the TDOC PREA Allegation System (PAS) as required per the contract. He added an annual audit review is conducted for compliance with all PREA standards by TDOC staff. He continued in stating he conducts daily walks throughout the facility compound to identify any discrepancies that do not support compliance with any of the PREA standards. Any discrepancies noted, are immediately addressed with the Warden and a corrective action is taken.</p> <p data-bbox="242 1088 1489 1350">TDOC Index 502.06 states employees of privately managed facilities shall receive PREA training as part of the pre-service and in-service training requirements established by the contractor and approved by TDOC. The Director of Contracts Administration shall ensure that all new TDOC contracts or contract renewals include language requiring compliance with the PREA standards. The TDOC has entered 4 contracts for the confinement of inmates with a private agency (Core Civic). Interview with the State-wide PREA Coordinator who also conducts monitoring of the contract facilities states he maintains an open line of communication with the contracting agencies and contract monitors and addresses any concerns regarding maintaining compliance with all PREA standards. A review of the contracts indicated the requirement for each facility to maintain PREA certification as a condition of the contract is documented.</p> <p data-bbox="242 1379 1489 1541">The facilities' most recent PREA audits were submitted as the following: Hardeman County Correctional Facility on August 6, 2020; South Central Correctional Center on February 17, 2020; Whiteville Correctional Facility on September 16, 2020; Trousdale Turner Correctional Center most recent posted PREA audit is dated as August 21, 2021. Review of the contracts confirmed all contained language that required the contracted facility to comply with the requirements of the Prison Rape Elimination Act.</p> <p data-bbox="242 1570 1358 1632">Based on the review of the contracts, review of the agency's website, audit reports and interview, the facility has demonstrated compliance with all provisions of this standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 804 300">Evidence reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 979 987" style="list-style-type: none"> <li data-bbox="240 329 767 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 979 416">2. TDOC Index 502.06 PREA Implementation, Education and Compliance <li data-bbox="240 445 746 474">3. TDOC Index 506.22 Security Staff Assignments <li data-bbox="240 504 579 533">4. NWCX Annual Staffing Review <li data-bbox="240 562 523 591">5. Post Assignment Rosters <li data-bbox="240 620 727 649">6. Logbooks documenting unannounced rounds. <li data-bbox="240 678 523 707">7. Observation while on-site <li data-bbox="240 736 424 766">8. Interviews with: <ol data-bbox="240 795 632 987" style="list-style-type: none"> <li data-bbox="240 795 349 824">a. Warden <li data-bbox="240 853 461 882">c. NWCX PREA PCM <li data-bbox="240 911 608 940">d. Intermediate or Higher-Level Staff <li data-bbox="240 969 632 999">e. TDOC Statewide PREA Coordinator <p data-bbox="240 1016 1485 1312">115.13(a) TDOC Index 502.06 states the requirements of a facility staffing plan that provides for the adequate levels of staffing and monitoring to protect inmates against sexual abuse. These requirements contain the eleven requirements stated in this provision. This review shall be completed on the PREA Annual Staffing Review form CR-3964. Interviews with the agency TDOC State-wide PREA Coordinator, Warden and NWCX Associate Warden (T)/Facility PREA Coordinator indicated the facility does develop and comply with a staffing plan as outlined in TDOC Index 506.22. Furthermore, it was indicated that the facility does consider each element of provision and that upper-level administration as well as the PREA Coordinator review of the staffing plan. TDOC has been granted funding for the installation and upgrade of video monitoring for all facilities as needed within their agency. The NWCX Staffing Plan addresses the eleven requirements as indicated in this provision.</p> <p data-bbox="240 1344 1477 1771">Per an interview with the Warden, the staffing plan considers all elements and is based on critical posts that are required to be covered on each shift. He ensures mandatory/critical posts are never vacated when inmates are in the areas as some post assignments are split. These posts are supervised by staff and additional assistance is provided through video monitoring. He added, security staff must make 30 minutes checks on all inmates assigned to their area. He and his Associate Wardens randomly review video footage to ensure proper supervision is being conducted on all shifts. The Associate Warden of Security reviews the roster daily and per shift to ensure all critical posts are filled. He added there are often he, himself and the Associate Wardens have reported to the facility to be assigned to work the identified vacant critical post throughout the shifts to prevent the vacancies. An interview was conducted with the Chief of Security regarding managing the roster with a 200 staff shortage while ensuring all security critical posts are manned. He stated proper roster management is a must that requires reviewing the roster prior to every shift. Overtime is regularly paid to staff to provide security coverage. Non-security staff, and prior security staff often work overtime. However, there are restrictions on the assignment of posts they are authorized to work due to their experience and/or inexperience as working within the security department. Additionally, the management staff provides assistance in covering security post as needed.</p> <p data-bbox="240 1803 1482 2161">115.13(b) TDOC Index 506.22 indicates the Critical and Non-Critical post. The facility staffing plan is developed with minimum operations staffing levels in mind and a daily staff roster is reviewed to ensure adequate staff in accordance with the stated staffing plan. The daily rosters identify positions, the staffing requirements for those positions and reconciles staffing deployment in accordance with the position requirements outlined in the staffing plan. An interview with the Warden and Chief of Security there were 200 vacant positions within the security department. Overtime is constantly being utilized to fill the critical post assignments. They each stated with the recent raise throughout the TDOC, they are in hopes that more individuals will consider the job opportunities at the facility and throughout the Agency. Per the Warden, COVID-19 has played a major role in staff shortages. He added he reviews the rosters daily and makes necessary changes that includes mandatory staff placed on overtime, exchange of staff shifts, and all the executive staff, department heads, and other non-security staff fill vacate critical positions daily to meet compliance with the staffing plan. Staff who have not been certified as a previous correctional officer are not allowed to work alone, nor on a critical post, and must be assigned to work with a</p>

correctional officer in positions other than as the #1 officer. However, if they were a previous correctional officer, they are allowed to fill other positions. Any occurrence of non-compliance with the staffing plan must be reported to the Assistant Commissioner of Prisons for TDOC. The auditor requested a random selection of security staff post assignment rosters for Wednesday and Friday of various months throughout the review period. The review of these rosters did not indicate that a critical post was vacated during a period when inmates were allowed to be in the areas. During the on-site tour, it was noted that staffing was adequate and prevalent throughout the institution.

115.13(c) TDOC Index 502.06 states that by July 1st of each calendar year each facility shall assess, determine, and document whether adjustments are needed to the facility staffing plan. NWCX 502.06.1 states the staffing plans shall be reviewed annually during the budget cycle, when the organizational chart and shift rosters are approved by institutional and Central Officer personnel. TDOC Index 506.22 states the Warden shall identify on each post assignment schedule all critical posts. Posts that are critical to the security of the institution must be filled on each shift. NWCX 502.06.1 states the staffing plans shall be reviewed annually during the budget cycle, when the organizational chart and shift rosters are approved by institutional and Central Officer personnel. The staffing plan is approved by the Warden and TDOC Assistant Commissioner.

The staffing plan review is documented on an agency-wide standardized form. Interviews with the State-wide PREA Coordinator, Warden and NWCX PCM indicated that the facility does conduct a staffing plan review at least annually. NWCX provided a copy of the Staffing Plan. The NWCX Staffing Plan was reviewed for approval by the Chief of Security, Associate Warden of Security, Associate Warden(T)/ NWCX PREA Coordinator, TDOC State-wide PREA Coordinator and Warden with a final review on October 21, 2021. It was noted as reviewed by the TDOC State-wide PREA Coordinator on November 16, 2021. The form considers all the criteria required for a staffing plan review as required in this standard and provides areas for narrative, any recommendations, as well as space for signatures by the facility compliance manager and agency wide coordinator. Recommended changes were approved and signed by the NWCX Warden June 18, 2021, and by the TDOC Assistant Commissioner of Prisons on August 21, 2021.

115.13(d) TDOC Index 502.06 indicates that each PREA site coordinator and/or PCM shall ensure that an unannounced PREA-free walk (inspection) is conducted monthly in accordance with the PREA Inspection Team Worksheet, CR-3821. This inspection shall be conducted to identify and deter sexual abuse and sexual harassment. The Security Shift Corporal and above, Unit Managers, and Administrative Duty Officer shall conduct and document unannounced rounds. The unit logbook shall be annotated with Unannounced PREA Inspection/Security Check when signing into the unit.

Confirmation of supervisory rounds were also provided during interviews. All supervisory staff stated they alternate their rounds schedule, but they are constantly in and out of the areas and conduct various rounds per shift. The auditor reviewed all security officer's housing unit logbooks during the tour. Supervisory staff noted their rounds in red ink as "Unannounced PREA Inspection and/or Unannounced PREA Inspection/Security Check in the housing unit logs. Per interviews with supervisory staff who conduct these unannounced rounds, each state they do have a set schedule and/or pattern in when and/or they conduct their rounds. They only ensure the rounds are conducted and in a pattern that staff and inmates are unable to determine their anticipated arrival to the housing units and/or program areas. Logbook's entries confirmed a variety of times in which these rounds were conducted. Supervisory staff stated all staff are prohibited from advising others of supervisory rounds being conducted and the manner in which they are conducted does not allow staff nor the inmate population to be aware of their presence in advance.

Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 903 813" style="list-style-type: none"> <li data-bbox="242 329 767 356">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="242 387 903 414">2. TDOC Index 506.14.2 Housing, Programming of Youth Inmates <li data-bbox="242 445 571 472">3. Observation during onsite tour <li data-bbox="242 504 783 530">4. Review of Juvenile Housing Unit Program Schedule <li data-bbox="242 562 839 589">5. Observation of controlled movement of juvenile offenders <li data-bbox="242 620 555 647">6. Interviews with the following: <ol data-bbox="242 678 887 813" style="list-style-type: none"> <li data-bbox="242 678 692 705">a. Line Staff who Supervise Youthful Inmates <li data-bbox="242 736 887 763">b. Education and Program Staff who Work with Youthful Inmates <li data-bbox="242 795 437 822">c. Youthful Inmates <p data-bbox="242 844 1490 938">115.14 (a) n A review of the Juvenile Housing Unit Program Schedule, Tour of designated housing unit assigned to juveniles; Observation of controlled movement of juvenile offenders on the compound; Interviews with juvenile offenders, Line staff who supervise juvenile offenders, Education and Program Staff who work with youthful offenders</p> <p data-bbox="242 969 1490 1162">TDOC 506.14.2 Housing and Programming of Juvenile Offenders outlines the TDOC policy for housing and programs for youthful offenders throughout the Agency. The policy indicates for the purpose of the policy only, juvenile offenders are persons between the ages of 16 and 18 who are sentenced and committed to the TDOC by a court having adult criminal jurisdiction. NWCX has been designated to house youthful offenders only between the ages of 16 – 18 years. Eleven juveniles arrived at NWCX during the 12-month review period. Seven juveniles were housed at NWCX during the on-site visit and four were interviewed by the auditor.</p> <p data-bbox="242 1193 1490 1489">Juvenile offenders may be selectively double celled with other juvenile offenders with whom they are compatible and shall be designated as protective custody status in accordance with the provisions In Policy #404.09. Building #16 designated for juvenile housing has 21 cells. No offenders over the age of 17 are assigned to this housing unit. Upon a juvenile offender reaching his 18th birthday, he is no longer considered a juvenile offender and is afforded all rights, privileges, and obligations of adult inmates under the policies of the TDOC. On his 18th birthday, he is removed from the juvenile designated housing unit and is afforded a protective services review and enrolled in a program at NWCX for offenders between the age of 18 – 25. Per staff the juvenile count at NWCX has always allowed for single cell assignments and was observed as such during the on-site visit. The four juvenile offenders interviewed confirmed they have not been assigned to a double cell with another juvenile and have not been assigned to a housing unit that included adult inmates at NWCX.</p> <p data-bbox="242 1520 1481 1646">There are no shared dayrooms, common area space, shower area, or sleeping quarters utilized by both adult and juvenile offenders. Although the juvenile offenders and adult inmates utilize the same recreation area, their time of usage is different. At no time is any interaction between juvenile and adult inmates at NWCX. Interviews with line staff who supervise juvenile offenders and 4 juveniles confirmed interaction between adult inmates and juveniles is prohibited and has not occurred.</p> <p data-bbox="242 1677 1490 1839">115.14 (b) TDOC 506.14.2 states at no time shall a juvenile offender be involved in activities with adult inmates and any contact with adult inmates shall be no more than incidental (i.e., when it may be necessary to escort juvenile offender to another section of the institution when adult inmates may be in the general yard areas, or in the event of an emergency when juvenile offenders may have to evacuate the housing unit temporarily). In areas outside the housing units, staff shall provide direct supervision when juvenile offenders and adult inmates have sight and sound contact.</p> <p data-bbox="242 1870 1490 2063">The Warden/designee shall designate space that meets the physical, social, and emotional needs of the juvenile offender. The designated location shall include space for personal interaction and group-oriented activities. The programs provided in the specialized unit shall include a classification program that assesses the juvenile offender's level of risk and other needs. The back open area of the juvenile housing unit has been designated as the education and program area for the juvenile offenders. Education and program staff report to the juvenile housing to provide these programs. The juvenile offenders were attending an education class in preparation for their GED/HiSET testing during the auditor's tour of the juvenile unit.</p> <p data-bbox="242 2094 1473 2157">Medical services are provided to the juvenile offenders within their assigned housing unit by medical staff. In case of a medical emergency in which a juvenile has to be transported to the medical department, the compound is secured, all adult</p>

offenders are secured in their housing unit, program area and/or worksite away from the juvenile offenders.

The juvenile offenders are escorted outside their designated housing unit for outside recreation at one of the two recreation yards. Prior to the movement of the juvenile offenders, the compound is cleared, and all adult inmates are secured on their job sites and/or housing units. Staff maintain direct visual observation of the juvenile offenders during movement outside of their housing unit. Additionally, the officer's station within the housing unit is located in the center of the housing unit that allows a complete visual of the housing unit entry, program area, and common area.

115.14 (c) Per TDOC 506.14.2 states juvenile offenders are not placed in isolation unless they have committed a prohibited act of agency rules and are not held in isolation for more than 14 days. Interviews with line staff assigned to the juvenile housing unit, supervisory staff and the 4 juveniles interviewed, the juvenile are not removed from their designated housing unit assignment to an area of isolation for any circumstances. Juvenile offenders who have committed prohibited acts such as fighting are restricted from interacting with other offenders and are released for activities at a different time. These restrictions do not exceed three days. Youthful offenders receive all meals, educational programs, homework and personal time/showers, social skills groups, and medical care within their housing unit. Youthful offenders receive forty-five (45) minutes of recreation Monday – Friday during the am and pm shifts. They are escorted by security staff to the facility recreation area during a controlled movement when adult inmates are secured throughout the facility.

The designated housing unit, program areas within the housing unit and restricted controlled recreation movement allows the assurance of not compromising sight, sound, and physical contact with the adult inmates. On these occasions, adult male inmates are assigned to complete facility repairs within the juvenile offenders housing unit. During these times, the juvenile offenders are secured in their cells and are away from the area requiring repair. Staff always maintain direct supervision of the juvenile offenders and adult inmate workers who are with a supervisor. Any communication between juvenile offenders and the adult inmate population is prohibited. Line staff and the 4 juveniles interviewed confirmed no interaction between those inmates identified as adults and those identified as juvenile. Staff and the juveniles also acknowledge that this prohibited act included offenders who were previously identified as a juvenile and assigned to the juvenile housing unit (building #16).

Based on the tour of the housing unit for juveniles, operational procedures, interviews with staff and juveniles, and review of TDOC and NWCX policies, the facility has demonstrated compliance with standard 115.14.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 331 943 1099" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, Compliance 3. NWCX Index 112.08-1 Personal Hygiene Resources for Inmates 4. TDOC Index 112.08 Personal Hygiene Resources for Inmates 4. TDOC Index 305.03 Employee/Offender Interaction 5. TDOC Index 506.06-1 Searches 6. TDOC Index 113.37 Gender Dysphoria 6. TCA Lesson Plan- Personal Searches 7. Training records 8. Observation while on-site 9. Interviews with: <ol data-bbox="242 958 612 1099" style="list-style-type: none"> a. Random staff b. Inmates Identified as Transgender c. Health Services Administrative <p data-bbox="242 1133 1485 1491">115.15(a) TDOC Index 502.06-1 states that security staff shall be trained on how to conduct cross-gender frisk searches, and searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. TDOC Index 113.37 states that should circumstances allow, staff should consult with a transgender or intersex inmate before conducting a search to determine the inmate's preference in the gender of the officer conducting the search. TDOC Index 506.06-1 Searches states routine strip searches and/or visual body cavity searches will occur in authorized areas. Searches based on reasonable suspicion require the Warden's authorization. Staff interviews did not indicate any cross-gender strip or cross-gender visual body cavity searches of inmates, including any exigent circumstances, conducted by security or medical staff. The PAQ listed zero cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months. NWCX houses male inmates in addition to members of the LGBT. Inmates interviewed did not report being subjected to cross-gender viewing by staff during a strip search or visual cavity search.</p> <p data-bbox="242 1525 1485 1883">115.15(b) TDOC Index 506.06-1 states, "Female correctional officers may frisk search inmates of both genders." However, female security staff may conduct visual searches of male inmates upon being identified as transgender and/or intersex at the inmate's request. Male correctional officers may only frisk search and conduct a visual search of male inmates. Interviews with staff and inmate population confirmed the male inmate population is frisk searched by both male and female staff members. Inmates identified as transgender are awarded the option of being searched by male or female staff. There are no female inmates housed at NWCX. Interviews were conducted with 7 inmates identified as transgender at NWCX. The transgender inmate's choice of male or female staff conducting the frisk search and/or visual search varied in response as 6 preferred female staff and 1 had no objective to male staff conducting the searches. All states all stated they were offered the opportunity to be searched by the gender of staff they preferred. The interviewed transgenders also did not express any delay or being denied an opportunity to participate in out of housing unit activities due to a female security staff not being available to conduct the frisk search and/or visual search.</p> <p data-bbox="242 1917 1485 2107">115.15(c) Body cavity searches require prior written authorization from the managing official or designee before conducting a body cavity search. The facility reported zero cross-gender strip or cross-gender visual body cavity searches of inmates including any exigent circumstances, conducted by security or medical staff in the past 12 months. Staff and inmate interviews did not indicate any occurrence of cross-gender strip or cross-gender visual body cavity searches of inmates, including any exigent circumstances, conducted by security or medical staff to exceed during the review period of October 1, 2020, to September 30, 2021.</p>

115.15(d) TDOC 305.03 and TDOC 502.06-1 states, "Staff of the opposite sex announce their presence when entering a housing unit." Signage is noted on each housing door that opposite gender staff must announce themselves when entering the housing unit. This practice was observed during the tour in a loud enough manner that could be heard by all within. Additionally, during 52 formal interviews and 10 informal interviews with the inmate population, all acknowledged upon a female entering the housing unit, the announcement is made by the housing unit officer and/or by female staff entering. This practice was repeatedly observed throughout the auditor touring all housing units. There were no occurrences and /or inconsistencies in this practice identified. During the tour it was noted that the facility implemented procedures that allow inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. All housing units were observed to have two entries into the showers, and each has a shower curtain. Inmates are allowed to undress/dress between the two shower curtains prior to entering and exiting the shower station without being viewed by others to include inmates, female and/or male staff. The toilets designated for inmate use are located within a corner of their cell in which staff must make an effort to view. Inmate's restrooms in all the various program and operational departments are within a single use restroom enclosed by a full-size door that is observant and monitored by the staff assigned. Inmates indicated they were not able to be viewed by opposite gender staff when using the toilet, showering, or changing clothes.

115.15(e) TDOC Index 506.06-1 Searches regarding strip searches of transgender and intersex inmate's states, "A strip search of a transgender or intersex inmate may not be conducted for the sole purpose of determining the inmate's genital status." If an inmate's status is unknown, it may be determined by conversation with the inmate, a review of available medical records, or as part of a broader medical examination conducted in private by a licensed medical professional. TDOC 506.06 states if there is uncertainty as to a person's gender, the responsible officer shall use best judgment as to how the person presents, as male or female, and shall arrange for an officer of the gender to conduct the search. If the subject of the search, then objects based on gender, an officer of the person's apparently preferred gender shall conduct the search. All staff interviewed reported the facility prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining genital status. There were no inmates identified as intersex at the facility during the review period and/or interview phases. An interview with the Associate Warden (T)/Facility PREA Coordinator, an inmate identified as intersex and/or transgender would be reviewed and interviewed by the Gender Dysphoria, Transgender, Transsexual, Intersex, Gender Non-Conforming Accommodation Review Committee. The inmate would acknowledge their preference of staff gender for visually strip searches.

Interviews were conducted with the 7 of the 8 transgender inmates assigned at NWCX during the on-site visit. The transgender inmate's length of time serving at NWCX varied from 4 years to 1 month. However, all stated they have not encountered any instances of inappropriate searches to include frisk and/or visual searches to include for the sole purpose for determining their genital status at NWCX.

115.15(f) TDOC Index 506.06-1 defines the term "Frisk Search" as a search not requiring the removal of all clothing. It is conducted by running your hands across clothing to detect hidden objects." Policy notes that frisk searches may be conducted by female staff on male inmates. Strip searches are performed exclusively by staff of the same gender this including a provision for transgender or intersex inmates who may prefer to be searched by a specific gender of staff. The facility provides training on LGBTI and Frisk/ Body Searches, Restraints, and Scanning Devices. Training topics, including definitions, were found to be consistent with the definitions contained in the standards. The Pre-Audit Questionnaire noted that 100% of staff have been trained. Random staff interviews indicate they received training regarding cross gender, transgender, and intersex search procedures as identified during in-service training. The training course PREA is taught on Day 4 during in-service for security staff and includes Personal Search Training. This training course outlines instructions when conducting Searching Transgender and Transsexual Individuals. The training includes a slide presentation, a practical exercise, and a curriculum that states, "Officers should always address inmates as "inmates." Despite possible challenges to their own beliefs and attitudes. Officers shall consistently maintain a professional and dignified manner in interacting with the individual being searched." Rosters noting staff signatures as completion was provided for review. Inmates identified as transgender, identified no negative concerns in the method of being searched by staff that includes frisk and/or visual search. These searches are conducted by female staff as identified as the inmate's preference. However, 1 transgender stated she had no preference in which gender conduct searches. There were no inmates identified as intersex at the facility during the on-site visit for interview.

Based on the review of policies, documents, search training, appropriate shower curtains for privacy, interviews conducted with staff, transgender inmates, and other inmate population, and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 1477 600">115.16(a)(b) TDOC Index 502.06 states all inmate entering the TDOC system shall receive verbal and written information concerning sexual abuse within 24 hours. Each facility shall take appropriate steps to ensure the inmates with disabilities (including inmates who are deaf or hard of hearing, 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 the facility's effort to prevent, detect, and respond to sexual abuse and sexual harassment. Facility staff shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skill, or who are blind or have low vision. Agency policy also requires that, except under limited circumstances where a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of the first responder duties, or the investigation of an inmate's allegation; inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive for other inmates.</p> <p data-bbox="240 629 1485 790">TDOC Index 103.10.1 policy indicates during the take process, offenders requiring language or literacy assistance will be offered a Language Identification ("I Speak) Guide to determine if the offender has a literacy or language deficiency. The names of those offenders requiring LEP services will be documented and reported to the LEP Coordinator immediately. An interpreter will be provided through utilization of institution staff, volunteers, or contract interpreters to determine the extent of their proficiency.</p> <p data-bbox="240 819 1490 1417">The NWCX Plan for Providing Inmates with Limited English Proficiency Access to Program and Activities (As required by the Civil Rights Act Of 1964) was provided for review. Per the plan an assessment is completed by the Property Officers upon an inmate's arrival to NCWX for their ability to speak/understand English. Any inmate who cannot understand verbal instructions will be presented with the Language Identification Flashcard to determine which language the inmate speaks if he has a literacy problem. The names of inmates who have Limited English Proficiency will be given immediately to the office of the Associate Warden (T). The records office will review files and the inmate's judgment order. The inmates identified as having LEP will be interviewed utilizing institution staff interpreters or an assisting agency's interpreters to determine the extent of their proficiency. The use of an interpreter will be documented on TOMIS Conversation LCDG (Contact Notes) and will include the interpreter's name and the reason for the contact. The office of the Associate (T) will notify other departments of the inmate's LEP status and/or his need for an interpreter for services. During the orientation process, should the unit management staff notice the inmate's knowledge is insufficient to understand what is being discussed, an interpreter will be provided as soon as possible. A staff interpreter must be considered first. The services will be documented on TOMIS Conversation LCDG (Contact Notes). The NWCX Plan is updated as needed and lists authorized staff to serve as translators and inmates identified to be Limited English Proficiency. The LEP list was last updated on September 15, 2021. A copy of the NWCX LEP Plan (English and Spanish) are required to be maintained in all unit manuals, etc. for staff awareness. NWCX has 3 bi-lingual staff members who have been approved to serve as certified translators. Two staff duty assignments are at site 1 and one staff member is assigned at site 2. However, they provide translation services throughout the complex as needed during their shifts.</p> <p data-bbox="240 1447 1477 1944">The TDOC has a designated institution (DeBerry Special Needs Facility) for inmates with severe disabilities such as deaf, cognitive disability, and are visually impaired to the degree of blind. Therefore, 0 inmates were designated at NWCX identified as deaf, blind and or with a cognitive disability. However, 5 inmates were identified with various disabilities that included: 1 hard of hearing, 3 with physical disabilities to include loss of limb, previous stroke, and wheelchair bound; and 1 Limited English Proficient (LEP). The inmate identified as hard of hearing indicated although he is hard of hearing, he was provided a hearing aid. He stated he was able to read the PREA material presented to him in addition to the PREA information posted throughout the facility. The 3 inmates with physical disabilities, all stated they received PREA information upon arriving at NWCX in a manner that they could clearly understand. They acknowledged reviewing the PREA video in their language and receiving an Inmate Orientation Handbook that covers the agency's zero-tolerance policy. Each added the PREA topics included the agency's zero-tolerance policy; how to report sexual abuse and sexual harassment; agency policy regarding sexual abuse and sexual harassment; and inmate rights regarding sexual abuse, sexual harassment, and retaliation. The video presentation has audio and is also available in Spanish in addition to the Inmate handbook is also available in Spanish. They were also aware of the PREA posters throughout the facility and how to report PREA allegations and stated their disabilities does not interfere with their understanding of the PREA education provided to them and the PREA information is on posters that are accessible to them throughout the facility.</p> <p data-bbox="240 1973 1490 2134">A staff translator assisted the auditor when conducting an interview with the inmate identified as LEP. The staff member who conducted the translation service is certified by the state of Tennessee and provides translation services for criminal and civil court cases. The LEP inmate stated he was provided PREA education in the written format of Spanish and the PREA posters are also provided in his first language Spanish. He was aware of various ways to report PREA allegations. All inmates identified stated they have a clear understanding of the PREA education posted throughout the facility on the inmate bulletin</p>

boards in housing units, on walls, inmate telephones, and in the inmate handbook. An Interagency agreement between the State of Tennessee Department of Corrections and Tennessee Foreign Language Institute has been established for the contractor to provide qualified language interpreter services for non-English speaking inmates. The TDOC has a contract to provide sign language services through Statewide Visual Communication Services.

Per the Agency Head Designee, TDOC has established procedures to provide inmates with disabilities and inmates who are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. She added, while these programs can always be strengthened, TDOC strives to ensure that all offenders regardless of disability or ability to speak English are afforded equal opportunities to all aspects of the Agency' PREA program. Contracts exist for medical, mental health and translation services to provide services to these offenders.

115.16(c) TDOC Index 502.06 states, "Inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates, except under limited circumstances where a delay in obtaining an effective non-inmate interpreter would compromise the inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegation. Contact Note LCDG shall be posted identifying the name of the assistor and their organization. During interviews with 18 random staff, they indicated they were aware that inmate interpreters should not be used regarding a PREA allegation as the facility has staff and other services available. Staff was aware of the official staff members assigned to provide translation services.

Confirmation in the use of staff interpreters were presented through documentation via emails and through the Contact Note LCGD.

Based on the review of policies, observation, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.17	Hiring and promotion decisions
	<p data-bbox="242 145 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 813 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 327 981 817" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 301.04 Job Requirements 3. TDOC Index 502.06 PREA Implementation, Education and Compliance 4. TDOC PREA Self Declaration Form 5. TDOC PREA Questionnaire for Prior Institution Employees 6. Hiring and Promotional Records 7. Criminal History Background Records Check Documentation 8. Interviews with: <ol data-bbox="242 786 678 817" style="list-style-type: none"> a. Administrative (Human Resources) Staff <p data-bbox="242 844 1484 1205">115.17(a) TDOC Index 301.04 states all applicants for employment or promotions, all contract employees, and all volunteers who may have any contact with inmates shall sign PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 to ensure compliance with PREA Standards which states that the agency shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage 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. The human resource staff indicated background checks are on all new applicants to include all TDOC employees, volunteers and contractors prior to being hired. The applications are forwarded to a sister TDOC West Tennessee State Penitentiary where staff completes the background checks and return the findings to the facility. The human resource staff verified that the agency prohibits the hiring or promotion of anyone who does not meet the requirements of this provision. It also prohibits the acquisition of services from any contractors and services from volunteers who do not meet the requirements of this provision.</p> <p data-bbox="242 1238 1484 1361">115.17(b) TDOC Index 301.04 states, "The HRSD shall consider incidents of sexual harassment when determining to hire or promote an employee or contract with a service provider if the individual may have contact with an inmate." Human resources staff reported that incidents of sexual harassment are considered during the application, interview, background investigation, and orientation processes. Human resources staff indicated this was also true for contractors.</p> <p data-bbox="242 1395 1484 1653">115.17(c) (d) (e) TDOC Index 301.04 indicates that a NCIC criminal history record check shall be conducted on all prospective departmental, contract, and TRICOR employees' fingerprints shall be taken and processed on all new or prospective staff assigned to a safety sensitive position. The NIC criminal history record check shall be conducted prior to employment. Per an interview with human resource personnel, background checks for all TDOC new hires, annual background checks, volunteers and contract staff are forwarded to a sister TDOC facility, West Tennessee State Penitentiary. Due to the shortage of staff throughout the agency, new applicants are now able to apply on-line and await to be connected for an interview or upon reporting to the NWCX, they may complete an application and be interviewed by human resource staff. However, no staff are hired until the return of the completed background check and proper clearance.</p> <p data-bbox="242 1686 1484 1977">TDOC Index 301.04 also states consistent with Federal, State, and local law, the TDOC will make its best effort to contact all prior institutional employers for information on substantiated allegation of sexual abuse or any resignation during a pending investigation allegation of sexual abuse. An interview with the human resource personnel, he stated the department staff always complete the PREA Questionnaire and forward to applicants' former employers, requesting information on any prior allegations or sexual abuse or sexual harassment. He stated they rarely receive a completed form back. He added background checks are conducted on all contract workers prior to being allowed to work at the facility through their contracting agency. The human resource staff conducts annual background checks on contracts such as Centurion for medical and mental health, in addition to Aramark and Tricor in July of each year. He stated the department completes a full background check every birthdate month annually for all TDOC staff in addition to during their initiation hiring.</p> <p data-bbox="242 2045 1484 2134">Forty-three new employees were hired at NWCX during the review period. At the auditor's request, she was provided with a variety of background checks for TDOC staff, contract staff, and volunteers that included: 2 Aramark (food service); 4 Centurion (medical); 4 Centurion (mental health); 9 volunteers; 10 TDOC staff pre-employment; and 7 annual background</p>

checks. Background checks are conducted annually in July for all contract workers.

115.17 (f) (g) TDOC Index 301.04 states all applicants for employment or promotions, all contract employees, and all volunteers who may have any contact with offenders shall sign PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 to ensure compliance with PREA Standard 115.17 which states the agency shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of an any contractor, who may have contact with inmates, who: a) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution. b) 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; c) Has been civilly or administratively adjudicated to have engaged in the activity described in (b); d) The Department shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates

An interview with human resource personnel indicated human resource staff forwards an email to all TDOC staff during their birthday month to complete an updated Sexual Abuse/Sexual Harassment, CR-3819. Upon receipt of the completed form, a new background check is conducted. Background checks for all contract staff are conducted annually in July at which time they are required to submit an updated of Sexual Abuse/Sexual Harassment, CR-3819.

Fifty -nine staff were identified as being promoted throughout the 12-month review period. The auditor randomly selected 14 TDOC staff for the review of PREA Self-Declaration Sexual Abuse/Sexual Harassment forms, 7 TDOC annual in addition to the selection of 2 Aramark (food service); 4 Centurion (medical); 4 Centurion (mental health); for confirmation. Records indicated applicants were required to complete a Self-Declaration questionnaire regarding all the elements of this standard. There were no discrepancies noted in the selected individuals.

115.17 (h) TDOC Index 301.04 states Material omission regarding such misconduct of a history of sexual abuse and/or sexual harassment, or false and fraudulent information provided regarding criminal history may disqualify the applicant/employee from further consideration for employment and, if employed, shall result in termination of employment. Additionally, the Self-Declaration Application Form states "I hereby certify that to the best of my knowledge and belief, all the information I provide in this form is true, complete, and made in good faith. I understand that false and fraudulent information provided herein may disqualify me from further consideration for employment and, if employed, may result in termination of employment if discovered later." Per human resource personnel, any staff to include contractor, volunteer and/or TDOC staff employment would automatically be terminated immediately for providing false information. He concluded that he was unaware of such occurrences during his tenure in the department.

115.17(h) TDOC Index 301.04 states that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute. Interviews human resource staff confirmed the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work upon receiving a question are from another correctional facility. The questionnaire is forward to the facility investigator for completion. Upon completion, the questionnaire is returned to the inquiring facility by the HRM. The staff member seeking employment must give prior approval before the questionnaire can be forward for inquiry of their previous employment. A PREA Questionnaire for Prior Institution was documented as completed that notes the inquiry of prior sexual abuse/sexual harassment allegations and the signature of the applicant acknowledging the release of information.

Based on the review of policies, documentation, interviews and analysis, the facility has demonstrated they exceed the requirement to conduct background investigation at least every 5 years. Specifically, TDOC policy requires the facility to ensure a background check is completed every year on all staff during their birth month. An annual background check is also conducted all contract staff in July. Additionally, on a yearly basis each staff member is required to sign a new Self Declaration form.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 813 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 770 412" style="list-style-type: none"> <li data-bbox="240 331 770 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 580 412">2. Observation during on-site visit <p data-bbox="240 445 400 472">Interviews with:</p> <p data-bbox="240 506 379 533">Agency Head</p> <p data-bbox="240 566 325 593">Warden</p> <p data-bbox="240 624 1481 875">115.18(a) TDOC Index 108.01 states, "When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion, or modification upon the Department's ability to protect inmates from sexual abuse. The Warden explained when planning substantial modifications to facilities the agency considers PREA requirements to relevant blind spots in building plans. Per an interview with the Warden, since the last PREA audit on-site visit in December 2018, a new educational building was added to Site 2 that provides additional vocational programs. He added the design of the building was taken into consideration to PREA standards and the American Correctional Association (ACA) while providing a safe environment for both staff and inmates that includes the prevention and detection of sexual abuse.</p> <p data-bbox="240 909 1481 1133">An interview with the Agency Head Designee indicated when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, The ACA and PREA standards are given consideration. All recommendations are processed through the chain of command to the Commissioners. She continued in stating the Commissioners does not approve the recommendations without communicating with the Director of Compliance with the Office of the Inspector General and reviewed by the State-wide PREA Compliance Manager of the Office Inspector General. All facilities have cameras and mirrors installed. Additionally, a budget has been awarded to add and upgrade cameras throughout all TDOC facilities.</p> <p data-bbox="240 1167 1490 1256">115.18 (b) An interview with the Warden and OIC Institution Investigator indicated there has not been any additional cameras added to the facility since the previous PREA audit. However, the facility has been approved for a camera upgrade, and effort to enhance the safety of staff and inmates will be of the utmost importance.</p> <p data-bbox="240 1290 1437 1350">Per the Agency Head Designee, the agency utilized video recording systems to monitor and record activities within the facility. This tool is utilized to cover blind spots, to verify allegations, and to hold individuals accountable for their actions.</p> <p data-bbox="240 1384 1461 1444">Based on the review of policies, observation, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Office of Investigation and Compliance Evidence Protocol 3. TDOC Index 502.06.3 Medical, Behavior Health, Victim Advocacy and Community Support Services for PREA Victims 4. TDOC Index 502.06.2 PREA Allegations, Investigation and Sexual Abuse Response Team (SART) 5. NWCX Index 502.06.2-1 PREA (SART) 6. MOU with Wo/Men’s Resource & Rape Assistance Program (W.R.A.P.) 7. Review of PREA Investigative Case Files 8. Interviews with: <ol style="list-style-type: none"> a. Jackson Madison County General Hospital Clinical Manager b. NWCX Facility Victim Advocate c. W.R.A.P. Sexual Assault Response Specialist d. Warden e. OIC Special Agent and OIC Institution Investigator <p>115.21 (a) TDOC Index 502.06.2 state it is the policy of the TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines (Title 28 CFR Part 115). The Agency employs investigators who have received special training in conducting sexual abuse investigations in confinement settings. The Office of Investigations and Conduct Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence. An OIC Institution Investigator is assigned to conduct administrative investigation at all TDOC facilities. The OIC Special Agent is authorized to conduct administrative and criminal investigations. Interviews with the Warden, OIC Special Agent and OIC Institution Investigator identified both administrative and criminal investigations are conducted by TDOC OIC Investigators. Operational Protocol #008 dated July 27, 2019 identifies the Notification and Response Procedure stating “It shall be the protocol of the Investigations Unit to appropriately respond to incidents and/or allegations of sexual abuse which occur on TDOC institutional property. When notification is made in a timely manner, Agents will respond as the situation mandates to the site of examination for the purpose of evidence collection and preservation. The Department’s response to sexual assault follows the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” dated April 2013, or the most current version. (1) Upon notification of alleged sexual abuse within any TDOC institution, the institution shall immediately have the alleged victim examined by qualified medical personnel. After the initial examination and collection of clothing for potential evidence, the alleged victim will be transported to the nearest Emergency Room. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit provided by TBI. This kit will be retained by the ER staff until received by an IU Agent. (2) The responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. (3) Upon evaluation of all information and evidence obtained, IU staff shall deliver evidence obtained from the investigation to the TBI Crime Laboratory for evaluation as possible evidence.</p> <p>115.21(b) TDOC has developed an appropriate protocol to coordinate appropriately with the most recent edition on the U.S. Department of Justices’ Office on Violence Against Women Publication. The TDOC Operation Protocol was revised on July 27, 2019. The Notification and Response Procedure identify the following: (1) It shall be the protocol of the Investigations Unit to appropriately respond to incidents and/or allegations of sexual abuse which occur on TDOC institutional property. When notification is made in a timely manner, Agents will respond as the situation mandates to the site of examination for the purpose of evidence collection and preservation. The Department’s response to sexual assault follows the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic</p>

Examinations, Adults/Adolescents,” dated April 2013, or the most current version. (2) Upon notification of alleged sexual abuse within any TDOC institution, the institution shall immediately have the alleged victim examined by qualified medical personnel. After the initial examination and collection of clothing for potential evidence, the alleged victim will be transported to the nearest Emergency Room. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit provided by TBI. This kit will be retained by the ER staff until received by an IU Agent. (3) The responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. (4) Upon evaluation of all information and evidence obtained, IU staff shall deliver evidence obtained from the investigation to the Tennessee Bureau of Investigations (TBI) Crime Laboratory for evaluation as possible evidence. (5) The Agent will present all evidence in the case to the appropriate District Attorney for review, adoption, and prosecution of any suspects.

115.21 (c) TDOC 502.06.3 indicate upon receiving a report of an alleged sexual abuse within the 72-hour time frame members SART that includes medical staff and the OIC institution Investigator shall determine if SAFE/SANE response is indicated at an outside medical facility. If the services of an outside medical facility are determined to be warranted, the victim shall be transported by security to an outside medical facility with SAFE/SANE personnel for a forensic examination at no cost to the victim. Upon receiving a report to an alleged sexual abuse outside of the 72-hour time frame, SART members shall determine if SAFE/SANE response is indicated at an outside medical facility with SAFE/SANE personnel. The alleged victim shall be transported only to medical facilities trained and equipped with SANE personnel. If SAFE/SANE personnel cannot be made available, the forensic examination can be performed by other qualified medical practitioners. The medical member of the SART shall document the efforts to provide SANE services. Interviews with the NWCX PCM, medical staff and mental health staff each confirmed the facility is scheduled to utilize the local Jackson Madison County General Hospital in Jackson TN for all forensic examinations. One inmate was transported for a forensic medical examination during the review period after alleging he was forced to perform sexual activities that included sexual penetration. The forensic examination was completed by a SANE Nurse. Confirmation of the completed forensic examination was reviewed by the auditor through medical records. An interview was conducted with the Clinical Manager at Jackson Madison County General Hospital who confirmed the hospital conducts forensic medical examinations for the local community and NWCX. She stated although the hospital has SANE personnel who performs forensic medical examinations, there are not enough SANE personnel to schedule regular duty on all shifts. Therefore, they are also scheduled for on-call duty and report to the hospital as needed. She added the hospital also has qualified staff such as mid-level practitioners who collect the forensic evidence when a SANE is not available.

115.21(d) (e) TDOC and NWCX have established a Memorandum of Understanding (MOU) with W.R.A.P. a sexual assault center that provide services for 19 counties in TN. The MOU is dated April 15, 2017 and per the W.R.A.P. Sexual Assault Response Specialist, TDOC State-wide PREA Coordinator and the NWCX PREA PCM the MOU remain in effect and continued services are provided. TDOC Index 502.06.3 indicates a PREA victim advocate shall be made available to the alleged victim, when requested, to accompany and support the victim through the forensic medical examination and the investigation process. The MOU states (1) As requested by the victim, allow a victim advocate to accompany and support the victim through the forensic examination process, investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. An interview with the Clinical Manager at Jackson Madison County General Hospital stated upon the arrival of a sexual abuse victim to the hospital medical staff contacts the W.R.A.P. for a victim advocate who reports to the hospital and provide the victim advocate services.

For continued services by W.R.A.P. the facility will provide the victim with a W.R.A.P. release of information form and then fax or email the completed form to W.R.A.P. permitting an advocate to provide continued services to the victim within the facility to include virtually. An interview was conducted with a Sexual Assault Response Specialist with W.R.A.P. She stated if an inmate calls the crisis center and identify an immediate need to speak with a victim advocate to the listener, the listener immediately contacts the on-call Sexual Assault Response Specialist who then reports to the facility. She confirmed her agency have responded to the facility on several occasions over the years to provide advocate services to individual inmates who are survivors of sexual assault, victims of domestic violence and other crisis incident services. She concluded in stating, the frequency of visits with the inmate population depends on the needs of the victim. During the heavy COVID periods, meetings with the inmate population was conducted virtually.

115.21 (f) TDOC 502.06.2 states Sexual Abuse Response Teams (SART) members/investigators who have received special training in conducting sexual abuse investigation in confinement setting shall investigate all allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively, including third-party and anonymous reports. Investigations Unit Special Agents shall be contracted immediately when circumstances warrant further actions pursuant to criminal findings. Per interviews with the OIC Institution Investigator and OIC Special Agent the Office of Investigations and Compliance are responsible for conducting both administrative and criminal investigations for the agency. A review of the PREA investigative cases files reported during the review confirmed the investigations were completed by TDOC staff, not an outside agency.

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

115.21 (h) In addition to victim advocate services provided to the inmate population by W.R.A.P., the NWCX Warden has designated the position of Chief Counselor to serve as the facility victim advocate. The Chief Counselor has completed sufficient training through the National Correctional Institution to serve in the position. A copy of his training certificate documenting his completion of PREA: Behavioral Health Care for Sexual Assault Victim in a Confinement Setting was provided. Additional interviews were conducted with the victim advocate and inmates who had previously alleged sexual abuse who confirmed the facility victim advocate is accessible to them and they have met with him on numerous occasions.

Based on the review of policies, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 948 815" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigation and SART 3. NWCX Index 502.06.2-1 PREA Allegations, Investigation and SART 4. PREA PAS Tracking log (PREA Allegation System) 5. Review of PREA Investigative Case Files 6. Interviews with: <ol data-bbox="240 674 504 815" style="list-style-type: none"> a. OIC Investigators b. Warden c. Agency Head Designee <p data-bbox="240 846 1490 1238">115.22(a) TDOC Index 502.06.2 states, "It is the policy of the TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner. The facility shall coordinate actions taken in response to an incident of alleged sexual abuse or harassment among staff first responders and Sexual Assault Response Team (SART), which includes medical and behavioral health practitioners, institutional investigator, and facility leadership. These investigations shall be conducted within 72 hours of receiving the allegation. Interviews with the OIC Institution Investigator and OIC Special Agent indicated normally the initial investigation begin on the same day of the reported allegation as it required to be documented in the PREA Allegation System within 24 hours of being reported. Per the review of PREA Allegation Report (tracking report), interview with OIC Investigator, State-wide PREA Coordinator, NWCX PCM and review of PREA investigative files, 19 PREA allegations were reported during the 12-month review period of October 1, 2020, through September 30, 2021. An administrative investigation was completed for 18 of the reported allegations that included sexual abuse and sexual harassment allegations. One inmate on inmate sexual assault investigation remained open pending results of the forensic medical examination.</p> <p data-bbox="240 1270 1490 1498">An interview with the Agency Head Designee indicated TDOC conduct both administrative and criminal investigations. An Office of Investigations and Compliance (OIC) Institution Investigator is assigned at all TDOC facilities to conduct administrative investigations and Office of Investigation and Conduct Special Agents are assigned and authorized to conduct both administrative and criminal investigations. The OIC Special Agent's office is not on-site at the facility. All PREA allegations are required to be documented and uploaded in the PREA Allegation System (PAS) within 24 hours of being reported. There are times when the District Attorney's Office will accept a criminal case for prosecution but not all criminal cases are accepted, it is determined on the circumstances and sufficient evidence.</p> <p data-bbox="240 1529 1490 1792">115.22(b) TDOC Index #502.06.02 and interviews with the Warden, OIC Institution Investigator and OIC Special Agent noted that all allegations of sexual abuse or sexual harassment are investigated by Investigators and Agents employed within the Tennessee Department of Corrections. The OIC Special Agent Investigators has the legal authority to conduct all reported TDOC investigations to include sexual abuse regardless of whether the allegation involves potentially criminal behavior. The OIC Special Agent and OIC Institution Investigator confirmed when a sexual abuse investigation determines there is a possibility of criminal charges within the reported allegation, the case is immediately referred to the OIC Special Agents for completion. If the investigation reveals criminal charges, the OIC Special Agent then refer to the State Assistant District Attorney for prosecution as applicable.</p> <p data-bbox="240 1823 1474 1982">Per the Agency Head Designee, if a PREA allegation is made, an investigation is completed and documented the PREA Allegation System. Both types of investigations are completed in the same way initially by the OIC Institution Investigator. After the initial response of separating, securing the scene, and collecting evidence, both the victim and aggressor are interviewed. Corroborating evidence is sought, and a determination is made regarding the level of the allegation could possibly be a criminal case, the case is referred to the OIC Special Agent for additional review and prosecution if applicable</p> <p data-bbox="240 2013 1490 2139">The auditor reviewed the TDOC website at www.TennesseeDepartmentofCorrections. TDOC included a section regarding investigation of sexual assault and sexual misconducts. The department is dedicated to producing quality investigations of alleged sexual abuse incidents. All investigators receive specialized training specific to sexual assault in correctional institutions. The TDOC Law Enforcement Unit, in consultant with the department legal office, aggressively refer substantiated</p>

cases of sexual assault by offenders or employees to the local district attorney's office for criminal prosecution.

115.22(c) TDOC is responsible for conducting all sexual abuse and sexual harassment investigations. Therefore, this provision is not applicable.

115.22 (d) Auditor is not required to audit this provision.

Based on the review of policies, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 331 986 757" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. TCA PREA Training Lesson Plans 4. PREA Training Documentation 5. Interviews with: <ol data-bbox="242 618 480 757" style="list-style-type: none"> a. NWCX PCM b. NWCX Training Staff c. Random staff <p data-bbox="242 790 1493 1115">115.31(a) TDOC Index 502.06 states, "The Tennessee Correction Academy (TCA) will be responsible for the development and distribution of the course lesson plans annually. All lesson plans or materials utilized for pre-service and in-service training on inmate sexual abuse and sexual harassment shall be approved by State-wide PREA Coordinator and TDOC General Counsel. The TDOC Academy Program Curriculum course code GEN-4-18 Lesson Title PREA Inmate Sexual Abuse/Assault is a two-hour course for developed for both pre-service and in-service. The course includes lecture and guided group discussion. The course includes the course objective, the PREA of 2003, definitions, inmates' right to be free from sexual abuse and sexual harassment, retaliation, understanding the dynamics of sexual abuse/sexual harassment in confinement, vulnerable populations, detecting signs of sexual abuse/harassment and the appropriate reporting response, how to avoid inappropriate relationships with inmates, effective professional communication with inmates to include lesbian, gay, bisexual, transgender, intersex or gender nonconforming and reporting of PREA allegations to outside authorities.</p> <p data-bbox="242 1149 1493 1473">115.31 (b) (c) TDOC Index 502.06 states, "Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa." Training is designed for officers to be able to function in both female and male facilities. NWCX houses male inmates; however, staff may transfer to any facility in the system. PREA training is part of the annual training curriculum. TDOC utilizes the TCA PREA lesson plans. This training is utilized during both pre-service and in-service and is tailored to both the male and female inmate population. The lesson plans cover the 10 topics specified in this provision. There were no staff identified as transferred from a facility that housed only female inmates to NWCX where male inmates are housed. Therefore, no additional training was required. However, the training developed for the TDOC Academy Program Curriculum course code GEN-4-18 Lesson Title PREA Inmate Sexual Abuse/Assault was developed for both staff assigned to work with both male and female inmates.</p> <p data-bbox="242 1507 1493 1966">A review of staff training records confirm staff completed the required PREA training. Random staff interviews (18) that included maintenance, education, programs, clerical, mail room, security staff, religious services, warehouse, Job Coordinator, and additional contract workers all reported they complete PREA training annually during in-service training. 100% of the random staff interviewed reported the in-service training contains all the information required by this provision. Although PREA training is completed annually, the fiscal year for TDOC is July 1st through June 30th of the following year. Staff are scheduled throughout this period to attend training. Anyone who does not complete training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) are required to complete the training upon their return to work and prior to the end of the fiscal year. New hires continue to complete PREA training during their orientation in Day 1 CORE Training. All security staff complete annual refresher PREA training while attending group classroom sessions. Non-security staff complete annual refresher PREA training individually via computer through NIC. In an effort to determine staff's knowledge and understanding of the PREA education received, the auditor presented staff with a variety of scenarios during the interview process. The 18 staff selected for random interviews and all facility appointed specialized staff were knowledgeable of their responsibilities as a staff member in response to a report and/or knowledge of PREA violations that included as a first responder and their duty to report.</p> <p data-bbox="242 2000 1493 2157">115.31(c) (d) The Department shall provide each employee with refresher training annually to ensure that all employees know the Department's current sexual abuse and sexual harassment policies and procedures. The auditor requested and received an LMS computer generated roster of all staff completion of PREA training. This computer-generated noted staff completion of PREA training to include for July 1, 2020, throughout June 1, 2021. This list also includes contract staff. In addition to the auditor receiving the Learning Management System (LMS) training, the sign-in rosters with staff signatures</p>

were presented confirming completion of PREA training.

TDOC Index 502.06 states, "The TCA Department and facilities shall document, through employee signature or electronic verification, that employees understand the training they have received using Employee PREA Training Acknowledgement, CR-3965. An interview with the training staff, she confirmed on the staff 1st day of employment, they are shown the PREA video, and the instructor presents a two hour course that include the following topics: TDOC zero-tolerance policy on sexual abuse and sexual harassment; definitions related to PREA; Inmates right to be free from sexual abuse and sexual harassment; retaliation; understanding the dynamics of sexual abuse/sexual harassment in confinement; vulnerable populations LGBTI); detecting sign of sexual abuse/harassment and the appropriate reporting response, how to avoid in appropriate relationships with inmates, effective professional communication with inmates; and reporting of PREA allegations to outside authorities.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance of this standard. The facility provides refresher PREA training for employees annually rather than every two-year requirement. Additionally, there is PREA education on bulletin boards and throughout the institution, and all staff to include security, non-security, contractor and volunteers are issued PREA refresher cards that are attached to their identification in addition to staff responses during the interview process confirms the commitment of NWCX to TDOC policies and the Department of Justice PREA standards with continuous PREA education.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 986 757" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. TDOC Volunteer Services Power Point Presentation 4. PREA Training Records 5. Interviews with: <ol data-bbox="240 618 379 757" style="list-style-type: none"> a. Volunteers b. Chaplain d. Contractors <p data-bbox="240 790 1493 1149">115.32 (a), (b) (c) TDOC 502.06 identifies the definition of employee as any full-time or part-time staff member, TRICOR employees, volunteer, vendor, intern, contractor, or employee of a contractor. TDOC Index 502.06 states each facility shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under TDOC's sexual abuse and sexual prevention, detection and response policies and procedures. Volunteers shall receive their PREA training in accordance with Policy #115.1. Training acknowledgement, for volunteers and contractors shall be documented through signature, on CR-3965, notating that they understand the training received. TDOC Index 110.01 states that part-time employees, volunteers, contract staff and other transferring employees, part-time employee, volunteer, contract staff and employees who are permanent transferring from one location to another shall receive a minimum of 20 hours of work site orientation appropriate to their assignment that includes PREA (TDOC-curriculum or National Institution of Corrections (NIC) on-line course. Volunteers and contractors who have minimal inmate contact receive the pre-service training in addition to PREA training annually.</p> <p data-bbox="240 1182 1493 1641">Per an interview with the NWCX Chaplain he identified prior to the effects of COVID-19 in March 2020, the facility had 185 volunteers. However due to COVID -19, volunteers were not allowed entry into the facility until May 2021. As of the on-site visit, the Chaplain identified 48 previous volunteers who have requested to return and have completed the entry process to include receiving PREA training. He continued in stating prior to their return, they are required to receive institution and PREA training as a new volunteer. A copy of the TDOC Volunteer Services Lesson PowerPoint presentation was provided to the auditor for review that included a session of PREA. The auditor reviewed 10 individual files created for volunteers. These files were extremely organized by the Chaplain and maintained confirmation of PREA training by the volunteer's signature of understanding the PREA training provided to include the Volunteer Confidentiality and Policy Agreement Training Certification received. The auditor conducted interviews with two religious service volunteers who had returned upon being allowed re-entry. Both volunteers acknowledged receipt of PREA training and were aware of their responsibility as a volunteer to report immediately to NWCX security staff and the NWCX Chaplain information regarding any information reported to them and/or they became aware of suspicious and/or known PREA allegations. Both stated they have served as volunteers for well over 10 years and have never become knowledgeable of any PREA allegations but have received PREA training from the various facility Chaplains during their tenure as volunteers at NWCX.</p> <p data-bbox="240 1675 1493 1899">The auditor interviewed 7 contract staff that included the following departments: mental health, medical, food service (Aramark) and TRICOR. As of the on-site visit contract workers for each department were identified as the following: medical = 64; mental health = 18; Aramark = 12; TRICOR = 3. All contract workers confirmed they initially received PREA training during pre-service and complete refresher PREA training annually through an NIC course. The fiscal year training cycle determined by TDOC is July 1st through June 30th of the following year. All contract staff complete PREA training during pre-service and annually that is monitored for completion and documented by the TDOC Training Specialist. Additionally, supervisory staff within these departments maintain completion of staff PREA training.</p> <p data-bbox="240 1933 1493 2157">115.32(c) Each volunteer and contractor receive their training at the facility. Interviews were conducted with newly hired contract staff and seasoned contract staff. Contract employees acknowledged receiving training through the facility and via computer. Training staff is responsible for monitoring the completion of contract employee's training and includes it on the LMS. Various departments also maintain a roster with staff signatures acknowledging completion of annual PREA training. The NWCX Chaplain is responsible for providing all training to the religious service volunteers. Completion of training that includes PREA, each volunteer acknowledges their understanding of the presentation by signing the TDOC Volunteer Confidentiality and Policy Agreement Training Certification.</p>

An interview with the training staff, she confirmed on the staff 1st day of employment, new hires are shown the PREA video, and the instructor discusses the PREA policy that includes staff prohibited relationships with inmates, inmate families/friends and immediately reporting any knowledge, suspicion of sexual abuse and/or sexual harassment. The PREA training slide shown includes the PREA definitions.

Interviews with contract staff confirmed they attend the Non-Academy Pre-service Orientation training for new employees and attend annual in-service training through the on-line PREA training course through NIC.

The auditor requested and received a Learning Management System (LMS) computer generated roster of staff completion of PREA training as the LMS include training for contract staff in addition to TDOC staff. This computer-generated list noted NWCX staff completion of PREA training in 2020 and 2021.

The auditor reviewed a sample of documentation which indicated contractors and volunteers received training based on the services they provide and level of contact they have with inmates.

Based on the review of policies, training lesson plans, completion of training documentation, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. NWCX Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities (As required by the Civil Rights Act of 1964) 4. PREA Hotline signs (English and Spanish) 5. NWCX Inmate handbook 6. PREA Sexual Assault Awareness Brochure (English and Spanish) 7. Inmate TDOC Orientation Acknowledgement Forms 8. Observation on site 9. Interviews with: <ol style="list-style-type: none"> a. NWCX PCM b. Intake Staff/Staff Who Conduct Risk Screening c. Random inmates <p>115.33(a)(b) (c) TDOC Index 502.06 states all inmates entering the TDOC system shall receive verbal and written information concerning sexual abuse within 24 hours of intake. Each facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. An interview with 2 Intake Staff, indicated within minutes of the inmates' arrival, they are shown the PREA video titled "PREA: What You Need to Know." At the completion of viewing the PREA video, inmates are individually screened for risk screening by the intake counselors in a private area. During the risk screening process, each inmate is asked if they understood the information provided to them in the PREA video and asked if they had questions regarding it. Upon completion of the risk screening conducted by the intake staff/counselors, inmates are issued a TDOC NWCX Inmate Rules and Regulations Handbook and a PREA pamphlet. The TDOC NWCX Inmate Rules and Regulations handbook is available in both English and Spanish. The PREA information within the handbook advises the inmate population that a DVD, i.e. "What you need to know?" with PREA information is shown weekly in English and Spanish on Tuesday evenings via the institutional CCTV channel 6, in addition to information on how to make a confidential and free report on the PREA Tip Line by dialing :*9222 or contacting the NWCX Inmate PREA Victim Advocate (Chief Counselor) or making a confidential and free reports to outside agencies by writing to: W.R.A.P. @ 512 Roland Avenue Jackson, TN 38301 or by dialing *9555, is listed as various avenues to report allegations of sexual abuse and sexual harassment. Each inmate acknowledges their signature on a TDOC Orientation Acknowledgement that they have received all noted PREA material information prior to reporting to their assigned housing unit. Documentation is maintained by staff in the inmate's file. Per interviews with counselors, the counselors maintain an electronic copy of the PREA pamphlet on their computers, and additional copies are provided to any inmate upon their request.</p> <p>All inmates who depart the facility over 24 hours for medical appointments and/or court appearances are required to watch the PREA video again prior to returning to their housing unit while acknowledging the review. This was confirmed by inmates during the interview process as several stated they have observed the PREA video numerous times as they have departed and returned to the facility outside 24 hours.</p> <p>Per the PAQ and NWCX PCM, 674 inmates were admitted to the facility during the 12-month review period. There were 670 inmates whose length of stay in the facility was for 72 hours or more and 662 whose length of stay was longer than 30 days during the review period. The auditor randomly selected 77 inmates from a roster of inmates arriving throughout the 12-month review period of October 1, 2020, through September 30, 2021, for confirmation of receipt of PREA training. A review of the inmate's arrival and departure confirmed numerous inmates reviewed had been designated to NWCX prior to their return during the 12-month review period, however, they were required to observe the PREA video and receive PREA information again upon their returned designation at NWCX. The auditor observed the intake process during the on-site visit for 5 inmates in the inmate visitation room where the intake process is completed. Observation of the PREA video is the first step required by the incoming inmates upon arrival at NWCX prior to completing the risk screening process. Amongst these</p>

5 inmates were inmates who transferred from other TDOC facilities. The review of the identified inmates confirmed all inmates acknowledged receiving PREA education on the day of arrival, and additional PREA information from their assigned Counselors as also stated during 52 formal inmate interviews and 12 informal inmate interviews.

115.33 (d) (e) TDOC Index 103.10 and TDOC Index 502.06 states, "The Department shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Interpreter services are available and documented in the Contact Note LCDG. NWCX has assigned bi-lingual staff who serve officially as translators as needed for the Spanish population inmates. TDOC Index 103.10 states that inmates will be provided orientation information in formats accessible for all inmates. Inmates are provided with a Sexual Abuse Brochure in both English and Spanish. A 16 minutes PREA video titled "PREA: What You Need to Know" is played in the intake area upon the inmate's admission and is available in English and Spanish. The NWCX Plan for providing inmates with Limited English Proficiency Access to Program and Activities (As required by the Civil Rights Act Of 1964) was provided for review. An assessment is completed by the Property Officers the upon arrival to NCWX for their ability to speak/understand English. Any inmate who cannot understand verbal instructions will be presented with the Language Identification Flashcard to determine which language the inmate speaks of if he has a literacy problem. During orientation should the unit management staff notice that an inmate's knowledge is insufficient to understand what is being discussed, an interpreter will be provided as soon as possible. A staff interpreter must be considered first. The services will be documented on TOMIS Conversation LCDG (Contact Notes). Inmates with extreme disabilities such as deaf, visually impaired other than the requirement of eyeglasses, are not assigned to NWCX. Inmates with disabilities as such are assigned to the TDOC DeBerry Special Needs Facility. However, the auditor did conduct interviews with 3 inmates with various limited physical disabilities and 1 who required a hearing aid. These inmates acknowledged they receive PREA education in a manner they could understand without difficulty to include the PREA video, written material in the handbook, PREA education posted throughout the facility on walls, posters, phones and bulletin boards. Overall inmates reported having received comprehensive orientation was completed within 30 days of their arrival.

115.33(f) The auditor observed PREA information to be continuously and readily available to the inmate population throughout the facility. PREA signage containing hotline contact information and sexual abuse information was noted as being posted throughout the institution. Signage was observed to be available in both English and Spanish. Inmates acknowledge being provided with personal copies of PREA pamphlet and the facility inmate handbook that includes information the inmate's right from sexual abuse and sexual harassment, how to report sexual abuse, sexual harassment, and their right to free from retaliation for reporting and/or cooperation with an investigation to reference as needed. They also identified the PREA information as shown weekly in English and Spanish on Tuesday evenings via the institutional CCTV channel 6. Additionally, during formal and informal interviews with the inmate population, all acknowledged awareness of the abundant amount of PREA education posted throughout the complex at all sites.

Based on the review of policies, inmate files that contains acknowledgment of PREA education through the PREA video, Inmate Handbook, inmate interviews acknowledging receipt of PREA education presented from staff in numerous methods and a continuous awareness of PREA via posted PREA posters, numerous times in observance of the PREA video shown by intake and screening to include returning from a medical stay, PREA information on the walls, inmate tv channel, inmate telephones, and analysis, the facility has demonstrated a rating of Exceeds Standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 1414 734" style="list-style-type: none"> <li data-bbox="240 329 767 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 927 416">2. TDOC Index 502.06.2 PREA Allegations, Investigation, and SART <li data-bbox="240 445 1414 506">3. TDOC Index 107.01 Office of Investigation and Compliance Unit Authority, Responsibility, Personnel Selection and Training <li data-bbox="240 535 903 564">4. Documentation of Specialized Training for Agency Investigators <li data-bbox="240 593 424 622">5. Interviews with: <ol data-bbox="240 651 772 734" style="list-style-type: none"> <li data-bbox="240 651 772 680">a. OIC Institution Investigator and OIC Special Agent <li data-bbox="240 710 810 734">b. Special Agent in Charge Western Region (Supervisor) <p data-bbox="240 763 1490 1093">115.34(a) TDOC Index 502.06.2 states SART team members/investigators who have received special training in conducting sexual abuse investigations in confinement settings shall investigate all allegations of sexual abuse and sexual harassment. Unit Special Agents shall be contracted immediately when circumstances warrant further actions pursuant to criminal findings. TDOC 107.01 states: All newly selected OIC Special Agents will attend and successfully complete at a minimum, an accredited law enforcement academy (e.g., Tennessee Correction Academy, Tennessee Bureau of Investigation, Memphis Police Academy, Walter State Community College, etc.) by Tennessee Police Academy, Tennessee Bureau of Investigation and the online PREA training titled: Conducting Sexual Abuse Investigations in a Confinement Setting through the National Correction Institution (NIC). An interview was conducted with the OIC Special Agent for NWCX and the OIC Institution Investigator. Both have completed the online PREA training titled: Conducting Sexual Abuse Investigations in a Confinement Setting through the National Correction Institution (NIC).</p> <p data-bbox="240 1122 1490 1417">NWCX has an OIC Institution Investigator who conducts administrative investigations. The OIC Special Agents conduct all criminal investigations and those cases that could possibly result in criminal charges. The OIC Institution Investigator assigned at NWCX and the OIC Special Agent assigned for NWCX have completed the National Institution of Corrections Training title "Conducting Sexual Abuse Investigations in a Confinement Setting" that certifies them to conduct investigations for alleged sexual abuse and sexual harassment. Information covered during investigator training included but was not limited to evidence collection, interviews, documentation, and evidentiary standards. An interview with the designated NWCX OIC Institution Investigator and review of the 18 completed administrative PREA case files confirmed staff who completed the administrative cases had at a minimum completed the required training to conduct the administrative PREA investigations that included "PREA training titled: Conducting Sexual Abuse Investigations in a Confinement Setting."</p> <p data-bbox="240 1447 1490 1644">However, upon a review of the 18 completed investigative files, the auditor concluded the investigative staff did not collect and/or maintain documentation that confirmed all avenues of possible evidence were reviewed and/or retained when determining the investigative findings. The investigative files did not include interview notes from the alleged victim and/or aggressor, did not include and/or discuss possible witnesses within the area to include other inmates and staff, video footage, pictures of affected areas, telephone monitoring, and/or mail monitoring as a means in determining the investigation findings.</p> <p data-bbox="240 1673 1490 1935">The OIC Special Agent in Charge for the Western Region (OIC supervisory staff) was advised of the auditor's findings with the investigative case files and reported to the facility to aid OIC Institution Investigation in retrieving documentation; however, efforts were unsuccessful. A meeting was held with the OIC Special Agent in Charge, OIC Institution Investigator, State-wide PREA Coordinator, Director of Compliance with the Inspector General Office and the assigned PREA auditor. The auditor identified items and documentation that should have been reviewed and included in the investigative files while recommending additional training for the NWCX OIC Institution Investigative staff. Additional training was provided to staff assigned to the NWCX Office of Compliance Investigation staff and other TDOC OIC Investigative staff by the Special Agent in Charge of the Western Region and the State-wide PREA Coordinator on December 15, 2021.</p> <p data-bbox="240 1964 1490 2159">115.34(b) An interview with the OIC Special Agent indicated the specialized training for the OIC Special Agents is mandatory and is through the Tennessee Police Training Academy, Tennessee Bureau of Investigations, and the Tennessee Law Enforcement Academy. as the OIC Special Agents are sworn law enforcement officers for the TDOC and have arresting authority. The lesson plan is intended for use with Department personnel assigned to investigate an allegation of misconduct that involves a sex related offense. This training gives participants information they will need to conduct criminal and administrative investigations compliant with the Prison Rape Elimination Act standards. Training includes the definition,</p>

purpose, history of PREA, definitions, first responder duties, medical examinations, comprehensive investigations, evidence collection, interviewing the victim, suspect and witnesses, Miranda rights, Garrity rights, and handling false accusations. The OIC Institution Investigator also identified the inclusion of this provision in the Conducting Sexual Abuse in a Confinement Setting training presented through the NIC. Due to no criminal investigations completed by the Special Agent, the auditor was unable to review an investigative case file completed by him.

115.34(c) The Department shall maintain documentation that agency investigators have completed the required specialized training "PREA training titled: Conducting Sexual Abuse Investigations in a Confinement Setting" through the National Correction Institution (NIC). Certificates of completed training for the OIC Special Agent and OIC Institution Investigative staff were presented to the auditor.

Recommended refresher specialized PREA investigation training to all NWCX OIC Institution Investigative staff in addition to other TDOC OIC Investigators on December 15, 2021. Evidence review, documentation collection and retention of evidence was included in the refresher training provided by the Special Agent in Charge for the Western Region and the TDOC State-wide PREA Coordinator.

Based on the review of training lesson plans, training records, interviews, in addition to refresher PREA training conducted during the post-audit process, investigative staff have received the specialized training and confirmation of training was provided that allows compliance with all the provisions of this standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. NWCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06 PREA Implementation, Education and Compliance
3. TDOC Index 502.06.3 Medical, Mental Health, Victim Advocacy, and Community Support Services for PREA Victims
4. PREA Resource Center Lesson Plan – Specialized Training: PREA Medical/Mental Health Care Standards
5. Medical and Mental Health Staff Training Certificates
6. Interviews with:
 - a. Health Services Administrator and Behavior Health Staff
 - b. Training Specialist

115.35(a) TDOC Index 502.06 states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment. Medical and mental health staff are contract employees who must complete the agency's PREA training and medical and mental health specialized training received from designated supervisory instructor contract staff within the department. The policy states all full and part-time medical and mental health care practitioner who work regularly in the facility shall be trained in : (a) How to detect and assess signs of sexual abuse and sexual harassment; (b) How to preserve physical evidence of sexual abuse; (c) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; (d) How and to who report allegations or suspicions of sexual abuse and sexual harassment; (e) This training shall be documented on the TDOC training Roster, CR-2245, and copies provided to the facility training specialist.

Interviews with the NWCX Health Services Administrator and Behavior Health Administrator confirmed medical staff and mental health staff are required to complete Specialized Training for medical and mental health. Per their interviews, they acknowledged completing the Specialized Training: PREA Medical and Mental Care Standards a 4-hour course presented by the National PREA Resource Center. Per both supervisors, all staff within the departments are required to complete the specialized training upon beginning employment in the department and annually. The training material includes four modules: Module 1 - Detecting and Assessing Signs of Sexual Abuse and Harassment (55 minutes); Module 2 - Reporting and the PREA Standards (50 minutes); Module 3 - Effective and Professional Responses (30 minutes) and Module 4 - The Medical Forensic Examination and Forensic Evidence Preservation (60 Minutes).

115.35(b) TDOC Index 502.06.3 stated upon receiving a report of an alleged sexual abuse within the 72-hour time frame SART members shall determine if SAFE/SANE response is indicated at an outside medical facility. If the services of an outside medical facility are determined to be indicated, the victim shall be transported by security to an outside medical facility with SAFE/SANE personnel for a forensic examination at no cost to the victim. Per interviews with medical staff, all forensic examinations are performed off-site at the local medical facility, Jackson Madison County General Hospital located at 620 Skyline Drive Jackson, TN 38301.

115.35(c) TDOC 502.06 documents that medical and mental health specialized be documented on the TDOC Training Roster, CR-2245, and copies provided to the facility training specialist. The auditor was provided with a training roster, CR-2245 noting completion of specialized training for both medical and mental health staff.

115.35 (d) TDOC Index 502.06 definition of an employee as any full-time or part-time staff member, TRICOR employees, volunteer, vendor, intern, contractor, or employee of a contractor. Each facility shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under TDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Training acknowledgment for contractors shall be documented through signature, on CR-3965, noting that they understand the training received. The auditor reviewed training records showing medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31 and §115.32. Per the NWCX Training Specialist, all medical and mental health staff are required as other TDOC staff to attend and pass the TDOC PREA training. NWCX has 64 contract medical staff, and 18 mental health contract staff. Training is required upon hiring and again annually. As stated by both medical and mental health supervisors, staff complete annual PREA training on-line through the National PREA Resource Center. Confirmation of mental health and medical staff completion of mandated PREA training as TDOC staff was provided via the copies of the Learning Management System (LMS) with entries made by the NWCX training specialist. Course documentation is also maintained by the department supervisor.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of this Standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed, (documents, interviews, on-site visit)</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. Inmate Arrival/Departure History 4. PREA Screening Documentation <p>Interviews with:</p> <ol style="list-style-type: none"> a. Staff Who Conduct Intake Screening/Staff who Conduct Risk Screening b. Chief Counselor c. TDOC Statewide PREA Coordinator d. Formal and Informal Inmates Interviews <p>115.41(a) TDOC Index 502.06.1 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the TDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. The agency uses the PREA Screening System Application located on the TDOC intranet to assess an inmate's risk of sexual victimization and risk of sexually abusing other inmates. Interviews with the Intake Staff and unit management staff indicated the PREA Screening System is utilized to conduct screening for the risk of sexual victimization and abusiveness. 100% of the sample was screened using the PREA Screening form. The initial risk screening assessment is completed upon arrival to NWCX by the intake staff (counselors). The auditor attended the inmate intake screening process during the on-site visit and observed the counselors conduct screening for the risk of victimization and abusiveness. The risk screening process was begun within an hour of the inmates' arrival at NWCX.</p> <p>Per interviews with staff who conduct risk screening (counselors) when an inmate departs the facility and return after 24 hours to include hospital stays, court, etc., these inmates are re-screened upon their arrival. The auditor randomly 77 inmates for confirmation of risk screening within 72 hours and re-screened within 30 days and observed 15 of these selected inmates were also screened again upon returning to NWCX after their departure of over 24 hours for medical and/or court appearances.</p> <p>115.41(b) TDOC Index 502.06.1 directs that classification or unit management teams from diagnostic classification units will interview and evaluate all inmates for sexually aggressive/victim tendencies utilizing the PREA Screening System Application within 72 hours of arrival at a facility. The PAQ indicated that 670 inmates were admitted with a stay longer than 72 hours during the 12-month review. A review of the random selected 77 inmates' risk screening revealed all were screened with 72 hours of normally on their day of the arrival.</p> <p>The auditor conducted 52 formal inmate interviews and 10 informal interviews. All confirmed they were asked questions related to the PREA Screening System form at least once and several of these inmates acknowledged being asked more than once while at NWCX.</p> <p>115.41(c) (d) TDOC Index 502.06.1 requires authorized users to utilize the PREA Screening System Application located on the TDOC intranet. User security access to this system is authorized by the Associate Warden of Treatment and TDOC State-wide PREA Coordinator. The PREA Screening System Application form is the agency-approved standardized screening instrument. The PREA Screening form assigns a numerical point value to questions regarding risk of victimization and risk of abusiveness categories. The form considers the 10 separate inmate risk of victimization factors and risk of abusiveness factors noted in this provision. Each risk factor is assigned a numerical point value based on the information obtained from an interview with the inmate and information from the inmate record. The PREA Screening System Application does not consider whether the inmate is detained solely for civil immigration purposes. However, interviews with the Warden, and NWCX PCM, and review of documentation indicates that the TDOC does not house inmates solely for civil immigration purposes.</p> <p>115.41(e) The PREA Screening System Application factors considered in the risk of abusiveness category include prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. The instrument also considers a history of violent crimes including pending and current charges and a history of domestic violence including pending and current charges. A review of the PREA Screening System Application revealed that it does</p>

consider all the criteria required by this provision.

Interviews were conducted with two counselors who conducts the intake screening process (72 hours) and the 30-day reassessment. Both stated they are regularly assigned to conduct the risk assessments and they utilize the appropriate PREA Screening System Application that contain the questions asked to the inmate while allowing the inmate to respond to each. The inmate's responses are documented in the system.

115.41(f) TDOC Index 502.06.1 requires unit management staff to re-assess each inmate within 30 days of the inmate's arrival at the facility using the PREA Screening Application. The PAQ and NWCX PCM indicated that NWCX admitted 662 inmates whose stay was longer than 30 days. Staff who perform risk screening re-assessments indicated they conduct 30-day reassessments on the 15th day of the inmates' arrival.

Staff who conduct risk screening indicated counselors are assigned to each of the housing units and are responsible for conducting the 30-day follow-up re-assessments for inmates assigned. They indicated the set period for conducting the reassessment are normally 15 days of the inmate's arrival. The risk screenings are conducted in a private area in the housing units where the inmate is screened by their assigned Counselor. Per interviews with the Chief Counselor and NWCX PCM each maintain a transport roster to monitor incoming inmates and their required 30-day reassessments. Staff are authorized to conduct the inmate's reassessment at the 15th day upon the inmates' arrival. The auditor requested a random sample of 77 inmate's Arrival/Departure and PREA Screening Results to review for compliance with the initial 72-hour and 30-day reassessments. No discrepancies were noted by the auditor.

The NWCX PCM maintains a PREA Screening Audit Tool where she monitors the completion of all incoming inmates initial 72-hour risk assessment screening and their 30-day risk reassessment screening. The PREA Audit Tool has columns that documents the inmates TDOC number, name, date of arrival, transfer reason, initial facility screening date; 48-hour review of initial screening and by whom completed; whether it was completed within 72-hour; 15-day review for 30-day reassessment and by whom completed; date of 30-day rescreening; date of mental health services and a column for comments. She stated she maintains the log to ensure all assessments and reassessments are completed within the TDOC guidelines and PREA standard 115.41.

115.41(g) TDOC Index 502.06.1 requires unit management staff to re-assess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or potential for abusiveness. The PREA Screening System Application is utilized to conduct all assessments and re-assessment. An interview with staff who perform risk screening indicated they complete an inmate's reassessment upon receiving new information, a referral is made, and/or new information to include awareness of sexual abuse to include within the facility.

115.41(h) TDOC Index 502.06.1 states inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions. Staff who perform risk screening reported inmates are not disciplined for refusing to respond to the questions and/or for not disclosing complete information. They continued in stating they advise the inmates a proper response in order to provide a safe environment for them. They concluded in acknowledging they have never had an inmate refuse to cooperative and provide responses. During inmate interviews, no inmate reported being disciplined for refusing to answer PREA risk screening questions.

115.41(i) TDOC Index 502.06.1 indicates screening information is strictly released on a need-to-know basis. Access to the PREA Screening System Application is controlled through authorized user security access. Unit Management staff will ensure screening information is entered in the PREA Screening System Application. Per the State-wide PREA Coordinator, Counselors have access to conduct the risk assessments but cannot review the responses in E-TOMIS after the input is upload. The counselors can only observe the inmate's score once uploaded. Per staff assigned to conduct risk screening, they indicated the information is on a need-to-know basis to provide the appropriate services to the inmate such as the inmate's counselor, the chief counselor, NWCX PCM and the designated DOJ PREA Auditor. Additionally, count room staff's access to E-TOMIS does not include the viewing of the inmate's responses to the assessment but only allow their viewing of the inmate scoring and their status of being incompatible.

Per an interview with the State-wide PREA Coordinator, a weekly report "Monitoring Due Report" is automatically forward to each TDOC institution via E-TOMIS that is generated to the NWCX PCM, Associate Warden (T), Chief Counselor and himself. The monitoring of victims and aggressors are conducted every 90 days for a minimum of 12 months, and each require approval by the State-wide PREA Coordinator for removal. The victim may request removal prior to 12 months of completion however, this option of removal from monitoring is not available to an aggressor. Negative conduct, additional sexual abuse allegations are some of the circumstances that may prolong an aggressor monitoring to extend beyond 12 months.

NWCX has established additional measures to ensure all incoming inmates receive a risk assessment at being sexually abused by other inmates and/or sexually abusive toward other inmates. Monitoring to ensure compliance is conducted by the Chief Counselor, NWCX PCM and the TDOC State-wide PREA Coordinator. The NWCX PCM presented a PREA Screening

Audit Tool where she monitors the completion of inmates' risk screening. The 15-day set time for the completion of the 30-day reassessments provides with an allowance time due to absence and/or other unforeseen incidents that a case a delay in the completion. Additionally, a weekly report "Monitoring Due Report" is automatically forward to each TDOC institution via E-TOMIS that is automatically generated to the NWCX PCM, Associate Warden (T), Chief Counselor and the State-wide PREA Coordinator that monitoring inmates' risk assessments. There were no noted discrepancies identified by the auditor during the review. Therefore, based on the documentation review, interviews, TDOC policies and NWCX monitoring procedures, NWCX meets EXCEED STANDARD 115.41.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 818 297">Evidence Reviewed, (documents, interviews, on-site visit)</p> <ol data-bbox="242 331 1331 528" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. TDOC Index 113.37 Gender Dysphoria, Transgender, Transsexual, Intersex, and Gender Non-Conforming 4. TDOC Index 112.08 Personal Hygiene Resources for Inmates <p data-bbox="242 562 400 589">Interviews with:</p> <ol data-bbox="242 622 740 875" style="list-style-type: none"> a. Agency Head Designee b. NWCX PCM c. Counselors assigned to conduct risk screening. d. Inmates identified as Transgender. e. Job Coordinator <p data-bbox="242 909 1490 1503">115.42(a) TDOC Index 502.06.1 states, "Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and identifies as a sexual aggressor or prior sexual victims are under the supervision the unit management/Associate Warden/Deputy Superintendent/Designee. Housing, cell assignments, work, education, and program assignments shall be made with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. Staff who perform screening reported inmates identified as at risk of sexual victimization are separated from inmates at risk of abusiveness based on the information collected that determines the and risk assessment score. They continued in stating, often the inmate's risk score can change due to information received and if they are the victim or aggressor in a PREA investigation. These inmates may be housed in the same housing unit, but never the same cell. The facility did not have the capability to run an inmate roster that identifies inmates as being a prior victim and/or those aggressors, however this information is maintained in the offender management program and is accessible to only those with authorization. The auditor did randomly review the bed assignments of inmates within these categories and discovered although some were in the same housing unit, they were not in the same cell. Confirmation of the facility's policy and practice to not allow inmates identified as a prior victim and those identified as prior aggressor are not placed in cells together was demonstrated by the auditor receiving a confidential letter from an inmate requesting to be selected for an interview during the on-site visit. The inmate stated he had submitted several requests to be housed with his stepson who is identified as a prior victim, and he is identified as a prior aggressor but have been informed by staff that they cannot and will not be housed together in the same cell nor housing unit. The two inmates would be listed as incompatible and the offender management program will not accept an entry to house them in the same cell.</p> <p data-bbox="242 1536 1490 1626">An interview with the Job Coordinator confirmed she does not assign inmates that are identified as incompatible on the same job assignment. She added if she attempts to assign inmates who are incompatible together on a job detail, she receives notification that they are incompatible and the E-TOMIS system will not allow the two inmates to be assigned to the same job.</p> <p data-bbox="242 1659 1490 1715">Additionally, per the NWCX PCM, inmates identified as prior victims and those identified as prior aggressors may be housed in the same housing unit but are never assigned as cellmates and job assignments together.</p> <p data-bbox="242 1749 1490 2141">115.42(b) TDOC Index 502.06.1 Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and are identified as Sexual Aggressors or Sexual Victims are the responsibility of the unit management team. This information is strictly need-to-know basis and housing, cell assignments, work, education and program assignments shall be made with a goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. If behavioral health intervention is indicated, a referral shall be made in accordance with Policy #113.82, utilizing Institutional Health Services Referral, CR-3431. No inmate will be double celled until the required screening has been completed. Inmates who are deemed sexual aggressors or sexual victims will be appropriately housed until assessed by behavioral health professionals or classification. Once an inmate is identified as a Sexual Aggressor or Sexual Victim at any time during his/her incarceration, the inmate shall be evaluated for appropriate housing and programs. Per interviews with staff who conduct risk screening and cell assignment, they make an individual determination to provide a safe environment for the inmates. They utilize information collected during the screening process for incoming and other information they may receive for inmates already assigned such as gang affiliation, transitioning to transgender etc.</p>

115.42(c) TDOC Index 502.06.1 states decisions to assign a transgender or intersex inmate to a facility for male or female inmates and in other housing and programming assignments are made on a case-by-case basis. TDOC Index 113.37 states the agency has a Gender Dysphoria Transgender, Transsexual, Intersex, and Gender Non-Conforming Accommodation Review Committee. This committee is composed of the TDOC Chief Medical Officer or designee, TDOC Director of Behavioral Health, Assistant Commissioner of Rehabilitative Services or designee Assistant Commissioner of Prisons or designee, TDOC State-wide PREA Coordinator, and the Administrative Directors of Medical and /or Behavioral Health for contractors(s) in order to address issues in the management of individuals diagnosed with gender dysphoria or who are identified as transgender, transsexual, intersex, or gender non-conforming. Facility and housing assignments shall be made on a case-by-case basis and documented on pages 1 and 2 of the PREA Housing and Program Review, CR-4086, considering the patient' health and safety, as well as potential management and security concerns. An inmates' own views regarding safety shall be solicited and considered. Inmates who have completed surgical sexual reassignment therapy prior to incarceration shall be placed in a correctional facility as determined by the Gender Dysphoria, Transgender, Transsexual, Intersex, and Gender Non-Conforming Accommodation Review Committee. For the purposes for facility placement, self-inflicted genital mutilation does not constitute surgical sexual reassignment therapy and does not qualify an inmate for placement in a facility for opposite-gender inmates.

Interviews with the staff who conduct the semi-annual assessment with the transgender inmates stated they assign the transgender inmates in housing units/cells that they feel comfortable while taking into consideration their health and safety. Each stated the transgender inmates are allowed to have input in their housing and program assignments. Per interviewed staff there has not been an inmate identified as intersex housed at NWCX.

Seven inmates identified as transgender was interviewed and confirmed they meet regularly with their counselors and are asked any concerns they many have for their safety. They continued in stating the counselors are in their assigned housing unit which makes them accessible to speak with. The inmates complemented their counselors and unit managers stating they are accessible, and approachable while addressing their concerns.

115.42(d) (e) TDOC Index 502.06.1 indicates inmates identified as transgender or intersex shall be reclassified every six months by the assigned counselor to review any threats to safety experienced by the inmate. Interviews with two counselors confirmed they conduct semi-annual reclasses with all transgender inmates assigned to their caseload. Both stated they have not had an inmate identified as intersex on their caseload nor were they aware of an inmate identified as intersex being assigned at NWCX during their tenure there. However, they were aware that inmates identified as intersex would be required to be reclassified semi-annually. NWCX identified 9 inmates who identified as transgender was housed at some point during the 12-month review period. Eight inmates identified as transgender was housed at NWCX during the on-site visit. Seven were interviewed by the auditor. A review of the 9 inmates screening classifications identified the following: 3 transgenders arrived at NWCX less than 3 months of the on-site visit. Therefore, semi-annual reclass was not required.

Transgender #4 arrived on 11/25/19. The semi-annual reclassifications were completed on 04/1/20; 10/7/20; 04/6/21 and 10/18/21.

Transgender #5 arrived on 11/28/18. The semi-annual reclassifications were completed on 05/30/19; 12/04/19; 06/04/20; 12/02/20; and 06/01/2021. This inmate was transferred on 10/25/21.

Transgender #6 arrived on 07/13/17. The semi-annual reclassifications were completed on 09/20-17; 09/05/2018; 09/03/2019; 09/10/20; 03/04/2021; 09/07/2021. The review indicated the transgender inmate was not reclassified semi-annually during the previous years prior to 09/10/20. However as of 09/10/20, documentation supports the inmate was reclassified semi-annually in accordance with TDOC policy and this standard provision.

Transgender #7 arrived on 05/30/19. The semi-annual reclassifications were completed on 12/04/19; 06//04/20; 12/02/20; 06/01/21. The next scheduled semi-annual was due in December 2021, however it was not necessarily required prior to the on-site visit.

Transgender #8 arrived 06/02/20. The semi-annual reclassifications were completed on 12/01/20; 06/01/21. The next scheduled semi-annual was due in December 2021, however it was necessarily required prior to the on-site visit.

Transgender # 9 arrival and departure log indicate the inmate was regularly transferred from NWCX to the DeBerry Special Needs Institution for medical treatment after designation to NWCX on 11/16/2018. The most recent semi-annual reclass was conducted 09/30/20; 11/19/20; 02/03/21; 08/11/21.

There were no discrepancies noted in the staff conducting the semi-annual reclassifications for all transgenders housed at NWCX during the 12-month review period. Additionally interviews with 7 of the 8 transgender inmates designated at NWCX during the on-site visit confirmed they have not only met with their counselors semi-annually for reclass but also noted the counselors are accessible to them at any time to discuss any issues to include safety concerns they may have.

115.42(f) NWCX 112.08-1 indicates transgender and Intersex inmates are given the opportunity to shower separately from other inmates, perform bodily function, change clothing without non-medical staff of the opposite gender viewing their private

parts as all institutional showers are single staff with privacy curtains and doors. All institution cells are equipped with doors that provide necessary privacy required except in emergency situations. The auditor observed all showers are in individual stalls that are separated by walls and have appropriate shower curtains and/or doors that allow privacy during use during the housing units tour. The counselors who perform risk assessment indicated they were unaware of an inmate identified as intersex being designated at NWCX. However, inmates identified as intersex would have the same option as the transgender inmates at NWCX which is the opportunity to shower at a separate time from other inmates in the housing unit if they desired. Interviews with 7 inmates identified as transgender confirmed they are given the opportunity to shower during count time when other inmates are secured in their cells. However, one transgender inmate stated she prefers to shower when other inmates are showering as the walls and shower curtains provide sufficient privacy.

115.42(g) TDOC Index 113.37 Gender Dysphoria states, "Lesbian, gay, bisexual, transgender, or intersex inmates may not be placed in dedicated facilities, units, or wings solely based on such identification or status. The inmate bed assignment roster and interviews with 7 transgenders confirmed only 2 of the 8 transgender inmates at NWCX were housed in the same housing unit. The remaining 6 inmates were all in separate housing units. There were 0 inmates identified as intersex at NWCX during the on-site visit and/or reported to have been designated at NWCX in the past. Interviews with 2 inmates identified as bi-sexual and 1 identified as gay all confirmed they have also not been designated as a group to one housing unit. They each confirmed they have each been placed in separate housing units since their arrival as indicated by the inmate bed assignment rosters. Per an interview with the NWCX PREA Coordinator inmates identified as gay, bisexual, transgender, or intersex would not be placed in dedicated housing units. NWCX is a male facility and does not house female inmate (lesbian). TDOC and/nor NWCX are not pursuant to a consent decree, legal settlement, or legal judgment in the housing of inmates.

Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.43	Protective Custody
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <ol style="list-style-type: none"> a. Warden b. Staff who supervise segregation c. Inmates who reported allegations of sexual abuse <p>115.43(a) TDOC Index 502.06.2 states any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements set forth in this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241 shall clearly indicate the basis of concern for the inmate's safety and the reason why no alternative means of separation can be arranged. This housing assignment shall not ordinarily exceed a period of 30 days. The PAQ noted that there have been 0 inmates held in involuntary segregated housing in the past 12 months. An interview with the Warden revealed, he was aware of the requirements pertaining to the placement of inmates at high risk of sexual victimization in involuntary segregated housing, but this practice is not applicable to NWCX. The facility does not use involuntary segregated housing for inmates determined to be at a high risk of victimization. An interview with staff who supervise inmates in segregated housing also confirmed the facility does not use involuntary segregated housing for inmates who are identified at a high risk of victimization. Alternate housing arrangements would be made. Per interviews with staff who supervise segregation and the Warden, if the alleged aggressor is known, the aggressor would be placed in segregation pending the investigation and/or transferred to another housing or another institution if needed. Interviews were conducted with 4 inmates who reported sexual abuse allegations at NWCX during the 12-month review period. Neither inmate reported being placed in involuntary segregation upon reporting the alleged sexual abuse. A review of PREA investigative case files and inmate movement of the alleged victims indicated 1 alleged victim requested to be placed in protective custody and documented his request. He was later transferred.</p> <p>115.43(b) TDOC Index 502.06.2 states that inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If inmate access to programs, privileges, education, or work opportunities is restricted, the facility shall document what opportunities have been limited, the duration of the limitation, and the reasons for such limitations. This shall be documented on LCDG Contact Notes. An interview with staff who supervise inmates in segregated housing indicated no restrictions are imposed on inmates other than limited inmates being allowed to work due the security level for segregation and his safety. The inmate would have access to education (GED program), legal aid, minimum of 1 hour outside recreation in covered and secured recreation areas with telephone access. There were 0 inmates placed in involuntary segregation for high risk of victimization.</p> <p>115.43(c) The PAQ noted that 0 inmates were placed in and/or held in involuntary segregated housing for longer than 30 days in the past 12 months awaiting completion of assessment. The Warden indicated involuntary segregated housing is not used for inmates at high risk for sexual victimization. Upon the aggressor being identified, the aggressor would be placed in segregated housing, not the alleged victim. Staff may utilize other methods to include making alternate housing arrangements within other housing units for the alleged victim as needed. A review of the 18 completed and 1 pending PREA investigative case files, all inmates who alleged to be victims of sexual harassment and/or sexual abuse identified their alleged aggressor.</p> <p>115.43(d) An interview with the Warden stated the facility has not utilized involuntary segregated housing for inmates who are determined to be at a high risk of victimization and this process has not been utilized during the 1 1/2 years he has been at the facility. He added TDOC Index 502.06.2 does which states if an extension is necessary, the SART member shall clearly document in the PREA Allegation System application the basis for concern for the inmate's safety; the reason why no alternative means of separation can be arranged; and the need for emotional support services for inmates or staff who fear retaliation for reporting sexual abuse, or sexual harassment, or for cooperation with investigations. However, if the victim cannot identify the aggressor, the size and layout of the complex allow for separation if applicable to ensure the victim's safety. needed. it may be necessary for the alleged victim's safety, he would have to be housed in involuntary segregation for no more than 7 days and/or the completion of the investigation.</p> <p>115.43(e) TDOC Index 502.06.2 states every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Interviews with the Warden and staff assigned to supervise segregation, both were aware of the requirement for 30 days reviews, however, they stated the alleged</p>	

victim would remain on the compound and the alleged abuser would be placed in segregated housing pending an investigation. Alternate housing units and compounds would be utilized for the alleged victim if the alleged aggressor cannot be identified. Although the alleged victim has the option to request protective custody. Placement of an alleged victim has not occurred at NWCX. This was confirmed during interviews with 4 inmates who reported sexual abuse and a review of their housing unit assignments upon reporting the allegation.

Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 938 927" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. MOU Between TDOC and W.R.A.P. 4. TDOC Website 5. PREA Tip line Posters 6. PREA Posters 7. Inmate Handbook 8. Interviews with: <ol data-bbox="240 790 654 927" style="list-style-type: none"> a. Random staff b. NWCX PCM c. Formal and Informal Inmate Interviews <p data-bbox="240 960 1493 1285">115.51(a) TDOC Index 502.06.2 states the Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. These include but are not limited to: (a) written communication (includes electronic documents); (b) Reporting directly to staff (Verbally); (c) Third-party reporting; or (d) Facility PREA Tip Line. The TDOC NWCX Inmate Handbook, PREA video, and PREA posters contain information on how to report. Formal and informal inmate interviews indicated all inmates were aware of the available reporting options to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff neglect or violation of responsibilities that could have contributed to an incident of sexual abuse. Inmates indicated there is signage on walls for calling the PREA Hotline as the most common response. Random staff interviews indicate all staff were aware of the internal and external reporting options available to the inmates and themselves.</p> <p data-bbox="240 1319 1493 1644">115.51(b) TDOC Index 502.06.2 indicate TDOC and NWCX allow inmates to make a report of sexual abuse or sexual harassment to an outside governmental entity that is not affiliated with the agency or that is operationally independent from agency leadership. This information is made available through the Inmate Handbook and inmate bulletin boards throughout the facility. Specifically, inmates are advised they may make confidential and free reports to outside agencies by writing to: W.R.A.P. at 512 Roland Avenue Jackson, TN 38301 or by dialing *9555. calling Per an interview with to a Sexual Assault Response Specialist with W.R.A.P., she identified upon a victim contacting the center, a listener is always available to accept calls. She continued in stating the information provided by the victims is strictly confidential and cannot be shared unless authorized by the victim. She and facility staff confirmed that as the notice on the inmate phones states "the calls are confidential and are not recorded." The victims are not required to share any information that they do not wish to share to include their name.</p> <p data-bbox="240 1677 1018 1704">NWCX does not house inmates detained solely for civil immigration purposes.</p> <p data-bbox="240 1738 1449 1827">115.51(c) TDOC Index 502.06.2 indicates facility staff shall report all allegations of sexual abuse and sexual harassment, including third-party, and anonymous reports to the facilities designated investigator(s). However, TDOC policy does not require staff to document the reported information.</p> <p data-bbox="240 1861 1493 2152">the s b all staff are required to report immediately to their supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, even if not part of TDOC, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Inmates also have access to a toll-free hotline number which will refer to any reports for investigation. The 52 formal interviews and 12 informal interviews inmates were able to identify the two PREA hotline numbers to the auditor as *9222 internal and *9555 for external reporting. Each indicated the hotline numbers were posted throughout the facility and on each inmate telephone and walls throughout the facility. Inmate interviews indicated they were aware they could report sexual abuse or sexual harassment either verbally, in writing, anonymously or via third parties. The auditor did observe the PREA Hotline numbers posted throughout the facility accessible to all inmates and staff. The auditor tested the</p>

external reporting line *9555 during the on-site visit with no discrepancies noted.

All random staff interviewed reported inmates could report sexual abuse or sexual harassment either verbally, in writing, anonymously, and via third parties. However, although staff stated they would report the information received to their immediate supervisor, investigators and/or security supervisor on shift, they were not consistent in stating they would document the PREA allegations they became knowledgeable of to include verbal reports.

The auditor reviewed 18 completed PREA investigative case files. The review revealed there was NO documentation maintained in the investigative casefiles from staff and/or individuals who served as a first responder to an inmate's reported allegation of sexual harassment and/or sexual harassment. The OIC Facility Investigator failed to maintain and/or produce any statements and/or documentation of the initial reported PREA allegations made by the inmates and to whom the inmate first reported the PREA allegations. The investigative report only documented that the investigator was informed by the Warden and/or Associate Warden (T)/ NWCX PREA Coordinator reported the PREA allegation to him. Therefore, based on the circumstances that no documentation was available for review by the auditor of the verbally reported allegations of sexual abuse and /or sexual harassment, NWCX does not meet this provision of standard 115.51 (c)

115.51(d) TDOC Index 502.06.2 indicates that staff may privately report sexual abuse and sexual harassment of inmates to the Central Office PREA Tip Line (*9555). Interviews with random staff indicated they are aware how to privately report sexual abuse or sexual harassment. Most staff cited they would report in person and/or via phone to a ranking supervisor and/or call the PREA hotline as their primary methods to make a private report of sexual abuse or sexual harassment. The auditor noted all staff carry a PREA Refresher Card attached to their ID Badge that provides various methods to privately report PREA allegations.

Based on the review of policies, documentations, PREA investigative case files, website, interviews and analysis, the facility has not demonstrated compliance with all provisions of this standard. Staff stated they would report information received verbally, anonymously in writing, and from third-party but the investigative case files do not include documentation to identify to whom and/or how the PREA allegations were reported such as verbally, anonymously in writing, or from a third party. Specifically, the OIC Institution Investigators failed to maintain and/or produce any statements and/or documentation of the initial reported PREA allegations made by the inmates and to whom the inmate first reported the PREA allegations. The investigative reports only documented that the investigator was informed by the Warden and/or Associate Warden (T)/ NWCX PREA Coordinator via phone call or email advising him of the PREA allegation. Therefore, based on the circumstances that no documentation was available to support how the allegation of sexual abuse and/or sexual harassment was reported such as verbally, anonymously or in writing and to whom, NWCX does not meet the provision of standard 115.51 (c).

Corrective Action Completed:

Six PREA allegations were reported during the 120- day corrective action period. A review of each investigation casefile and summary of the investigative reports contains clear documentation that identifies the first responder whom the alleged victim of sexual abuse and/or sexual harassment reported their allegation. Written statements submitted by the receiving staff member were included in the case files and documented as such by the investigator. Each of the six reported PREA allegations were reported verbally by the alleged victim to a staff member. Written statements were also submitted by the alleged victims and maintained in the case files. The investigative reports did thoroughly document how the allegations were reported and to whom. Therefore, NWCX has successfully completed the corrective action period and meets the mandate of all standard provisions for standard 115.51 that includes 115.51 (c)

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 775 757" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 501.01 Inmate Grievance Procedures 3. Inmate Rules and Regulations Handbook 4. Email Correspondence 5. Interviews with: <ol data-bbox="240 616 536 757" style="list-style-type: none"> a. NWCX PCM b. OIC Institution Investigator c. Grievance Sergeant <p data-bbox="240 788 1466 947">115.52(a) TDOC Index 501.01 indicates the agency has an administrative remedy program that may be used to file an allegation of sexual harassment or sexual abuse. It states an inmate may submit a grievance alleging sexual abuse at any time. The Grievance Sergeant stated when she receives a grievance that pertains to PREA she immediately notifies the Associate Warden (T) /Facility PREA Coordinator who refers it to the OIC Institution Investigator, and an investigation is conducted.</p> <p data-bbox="240 978 1485 1308">Per the PAQ, NWCX PCM, Grievance Officer and review of the 17 PREA investigative casefiles, there were 0 grievances files during the review period to include emergency grievances alleging substantial risk of imminent sexual abuse filed during the review period for NWCX. However, the initial response and final decision would be provided within the PREA Allegation System (PAS) and shall document the facility's determination as to whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. Per the NWCX Grievance Sergeant all communication with an inmate who submits a PREA allegation through the grievance process is with the OIC Institution Investigator. The OIC Investigator conducts the investigation, and she has no interaction with the inmate. Per the OIC Institution Investigator, the allegation is required to be logged in the PREA Allegation System (PAS) within 24 hours and the investigation is required to be completed within 72 hours. The inmate is notified of the findings of the investigation upon completion of the investigation normally within 3 days of being reported.</p> <p data-bbox="240 1339 1485 1532">Although the Grievance Sergeant and NWCX PCM confirmed the facility did receive a grievance from an inmate reporting a PREA incident occurring at his previous institution after his arrival at TDOC. The grievance was immediately forwarded to the NWCX Associate Warden(T) who is also the Warden's designee to the affected TDOC Associate Warden(T) Warden's designee and the receiving TDOC OIC Institution Investigators for an investigation as the allegation was alleged to have occurred there. The trial of emails detailing conversations between both facilities staff to include OIC Institution Investigators, Associate Wardens(T) and the receiving facility Warden was provided for review by the auditor.</p> <p data-bbox="240 1563 1485 1722">115.52(b) TDOC Index 501.01 states applicable time limits shall apply to any portion of a grievance that does not allege an incident of sexual abuse. All reported allegations of sexual abuse and/or sexual harassment are required to be logged in the PREA Allegation System (PAS) within 24 hours and the investigation is required to be completed within 72 hours. The inmate is notified of the findings of the investigation being completed within 3 days of reporting. A review of the 18 reported PREA allegations revealed none was reported/submitted through the grievance process.</p> <p data-bbox="240 1787 1485 1881">115.52(c) TDOC Index 501.01 states that an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance shall not be referred to a staff member who is the subject of the complaint.</p> <p data-bbox="240 1912 1485 2105">115.52(d) TDOC Index 501.01 states a final decision on the merits of any portion of a grievance alleging sexual abuse shall be issued by the Associate Warden(T) within 90 days of the initial filing of the grievance. Computation of the 90-day limit shall not include time used by inmates in preparing the grievance. The inmate shall be notified by the Associate Warden (T) if an extension is needed. At any level of the grievance if the inmate does not receive a response within the time allotted to reply, including any extension, the inmate may consider the absence of a response to be a denial at that level. No PREA allegations were reported through the grievance process against NWCX staff and/or inmates.</p> <p data-bbox="240 2136 1390 2163">115.52(e) TDOC Index 501.01 states third parties shall be permitted to assist inmates in filing grievances related to</p>

allegations of sexual abuse and shall also be permitted to file such grievances on behalf of the inmate. If a third-party files such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed and document such on the Inmate Grievance form. The inmate shall be required to personally pursue any subsequent steps in the grievance process. The inmate may decline to have the grievance processed on his/her behalf and the decision shall be documented on the original Inmate Grievance.

115.52(f) TDOC Index 501.01 states after receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance to the Associate Warden of Treatment for any corrective action to be taken. The grievance chairperson will provide a response within 48 hours and a final decision within five calendar days.

115.52(g) TDOC Index 501.01 states an inmate may be disciplined for filing a grievance related to alleged sexual abuse only when it is demonstrated that the inmate filed the grievance in bad faith. An interview with OIC Institution Investigator explained that although policy allows disciplinary sanctions of inmates who file the grievance in bad faith, no inmates have received disciplinary actions for this action.

Random interviews with inmates identified they are aware of the grievance process and that they could file an emergency grievance and all PREA grievances will be investigated immediately. The grievance procedures are outlined in the inmate rules and regulations handbook and grievances forms can be received from the housing unit officers and/or unit team. Grievance boxes were observed in all inmate housing units, program buildings, and libraries accessible to the inmate population.

Based on the review of policies, documents, website, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. MOU with W.R.A.P. 3. NWCX Rules and Regulations Handbook 4. TDOC Index #502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 5. Interviews with: <ol style="list-style-type: none"> a. Random staff b. TDOC State-wide PREA Coordinator c. W.R.A.P. Sexual Assault Response Specialist <p>TDOC has established a Memorandum of Understanding (MOU) with the Sexual Assault Center of East Tennessee dated April 5, 2017 and remains in effect and provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. Language in the MOU documents the involvement of trained sexual assault advocates as a component of the standard response to a report to sexual assault and/or a request for help from a survivor of sexual assault. The MOU also agree to maintain confidentiality of survivors of sexual violence who are incarcerated in the facility while maintaining available crisis counseling through organization’s crisis hotline at any time and/or 24 hours a day and counseling may take place in person or by telephone. Prior to accessing services, inmates are informed to the extent to which their communications will be monitored. Each inmate upon arrival to NWCX is given a Rules and Regulations Handbook which outlines methods of reporting PREA allegations and staff responses to the report. The information is provided in English and Spanish. It states “NWCX will provide multiple ways for inmates to report sexual abuse or harassment and identify the inmates to include the following: PREA Hotline telephone number (*9222); confidential and free reports to outside agencies by writing to W.R.A.P. 512 Roland Ave. Jackson, TN, 38301 or by dialing *9555 (This call will not be recorded by TDOC.) This information is also posted on all inmate bulletin boards and program areas, dietary, work details and, recreational areas and in the inmate handbook.</p> <p>115.53 (b)TDOC 502.06.3 states the Facility PREA Coordinator shall ensure that inmates are informed, 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. The confidentiality of an inmate reporting PREA allegations is documented in the inmate’s Inmate Rules and Regulation Book. It states “Inmates who have information involving PREA activity of any type may report this information by leaving a voice message using the Inmate Telephone System (TS). To leave a message using the ITS, dial “1” for English when prompted, then dial *9222 and record our message. The ITS system will not identify you by PIN number, and you may remain anonymous. Interviews with random staff and inmates confirmed inmates are allowed to remain anonymous when using either phone number*9222 and/or *9555 to report PREA allegations as an inmates’ PIN number is not required to make these calls.</p> <p>115.53 (c) TDOC 502.06.3 states the TDOC shall attain memorandum of understand (MOU) or other agreements with community services providers that are to provide inmates with confidential emotional support services related to sexual abuse. MOUs are to be approved by the TDOC General Counsel. The agency does maintain a copy of the MOU with W.R.A.P. and presents a copy to the auditor for review. The MOU was dated as signed by the TDOC Commissioner on April 5, 2017, and identified as still in effect per interviews with the TDOC State-wide PREA Coordinator and W.R.A.P. Sexual Assault Response Specialist as the titles has recently changed from Sexual Assault Victim Advocate.</p> <p>Per an interview with a W.R.A.P. Sexual Assault Response Specialist she confirmed the organization provides services to the inmates as requested. She added W.R.A.P. has received calls from NWCX and the two agencies work very well together in providing requested services by the inmates. The Sexual Assault Response Specialist contact NWCX staff to schedule individual visits with the inmate victims to include previous sexual abuse incidents that occurred prior to incarceration. She continued in stating during the previous high COVID-19 restrictions in March 2020 through May 2021, contact with inmates were also conducted virtually.</p> <p>Based on the review of policies, documents, and analysis, the facility has demonstrated compliance with all the provisions of this Standard.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 331 940 757" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.06.2 PREA Allegations, Investigations, and SART 3. NWCX Inmate Rules and Regulation Handbook 4. TDOC PREA Pamphlet 5. TDOC website 6. Interviews with: <ol style="list-style-type: none"> a. Inmates b. Staff <p data-bbox="242 790 1493 949">115.54(a) TDOC Index 502.06.2 states, The Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment. It indicates that third-party reporting is included in a method to report. PREA posters are located throughout the facility that identifies inmates may make a confidential and free report on the PREA Tip Line by dialing: *9222; or may contact the NWCX Inmate PREA Victim Advocate (Chief Counselor) or may make confidential and free reports to outside agencies by writing to W.R.A.P. 512 Roland Avenue Jackson, TN 38301 or by dialing *9555.</p> <p data-bbox="242 983 1445 1072">The NWCX Inmate Rules and Regulations Handbook indicates that any NWCX employee may receive a report of sexual misconduct from many different sources, including outside persons or agencies. The reported incident may be in writing, verbal, anonymous or from third parties.</p> <p data-bbox="242 1106 1485 1265">The PREA pamphlet "Guide to Prevention and Reporting of Sexual Misconduct for TDOC" states Family member and friends of inmates and the general public who have knowledge of sexual abuse allegations within the TDOC system are encouraged to report allegations to the TDOC Statewide PREA Coordinator TDOC Central Office 6th Floor, Rachel Jackson Building 320 Sixth Avenue North Nashville, TN 377243-0465 @ (615) 253-8178. Additional PREA information is available on the TDOC website: www.TN.gov.correction.</p> <p data-bbox="242 1299 1434 1357">Interviews with inmates and staff revealed most were aware that a third-party such as family member, friend, or another inmate could report PREA allegations to include sexual abuse and/or sexual harassment.</p> <p data-bbox="242 1391 1326 1417">Based on the review of policies, documents, website, interviews, NWCX meets the mandate of this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 940 871" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 3. Interviews with: <ol data-bbox="240 557 638 871" style="list-style-type: none"> a. NWCX Warden b. TDOC State-wide PREA Coordinator c. NWCX PCM d. Random staff e. Medical and Mental Health Staff f. Inmates who Reported Sexual Abuse <p data-bbox="240 902 1490 1263">115.61(a) TDOC Index 502.06.2 states, "All staff are required to report immediately to their supervisor 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 TDOC, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Additionally, the policy notes Facility staff shall report all allegations of sexual abuse and sexual harassment, including third-party, and anonymous reports, to the facilities designate investigator (s). Observation during the on-site visit confirmed all staff to include TDOC, volunteers and contractors maintain PREA refresher cards attached to their name tags for reference as needed. Interviews with staff that included TDOC, volunteers and contractors confirmed their responsibility to report to the shift commander, their immediate supervisor, facility PREA Coordinator and/or other ranking staff while speaking verbally. The majority of staff interviewed did not acknowledge documenting the information received upon reporting it. Per the TDOC Index 502.06.2 staff are required to report immediately but do not dictate in what method such as verbally and/or written.</p> <p data-bbox="240 1294 1490 1453">115.61(b) TDOC Index 502.06.2 states staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. TDOC utilizes a PREA Allegation System (PAS) on their intranet. Selected staff have access. Staff interviewed was aware of the extent in which information of sexual abuse and/or sexual harassment should be shared only with authorized staff necessary to make treatment, investigation and other security and management decisions.</p> <p data-bbox="240 1485 1490 1881">115.61(c) TDOC Index 502.06.2 states, "Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse as outlined in this policy and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services." Interviews with the Health Services Administrator and Behavior Health Administrator confirmed medical and mental health staff are aware of their duties as required by this provision and this information is shared with the inmate upon the initiation of services on their limitation of confidentiality and their duty to report. The Health Services Administrator stated medical staff discusses with the inmate his limited right to privacy and make a referral to mental health. Medical and mental staff indicated they are required to receive a signed consent form from the inmate prior to releasing information but they have a duty to report. Both stated as members of the NWCX Sexual Assault Response Team (SART) they are made aware and are involved in the notification and services provided to the inmate. Both stated upon becoming of an alleged sexual abuse allegation themselves or by staff within their department becoming a first responder they would immediately to the Shift Commander, Warden, Associate Warden (T)/SART Coordinator.</p> <p data-bbox="240 1912 1490 2139">115.61(d) NWCX does have a youthful program for youth under the age of 18 years old. However, if an alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the Department shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws. TDOC receives guidance from Adult Protective Services which indicates that TDOC may investigate within their facilities. Per the Health Services Administrator and Behavioral Health Administrator, as it pertains to youthful offenders under the age of 18 years old, per Tennessee law and as a requirement to maintain their professional license they are required to immediately report any juvenile's involvement in sexual abuse. Youthful offenders are not required and/or obligated to sign a consent</p>

form prior to staff releasing the information of sexual abuse to local and state officials.

115.61(e) TDOC 502.06.2 states, Facility staff shall report all allegations of sexual abuse and sexual harassment, including third-party, and anonymous reports, are directly to the OIC Institution Investigator for an investigation. Per an interview with the Warden all allegations of sexual abuse and/or sexual harassment to include 3rd party, and anonymously are reported to the OIC Institution Investigator. The auditor used a variety of scenarios regarding staff awareness of PREA allegations to include by third-party within the community, and /or by an inmate and/or an anonymous phone call during interviews with staff, volunteers and contract workers. All interviewed responded they would report sexual abuse and/or sexual harassment information they became aware of to include directly, through a third-party, and/or anonymously to their Supervisor, Shift Commander, OIC Institution Investigator, NWCX PCM, Associate Warden (T)/SART Coordinator and/or higher-ranking staff. Per interviews with the Warden, OIC Institution Investigator, and OIC Special Agent, all PREA reported allegations are conducted in the same manner regardless of how the incident was reported.

A review of the 17 complete PREA investigative case files noted in the summary that the OIC Institution Investigation was made aware of the allegations by other staff (supervisory staff). There was no documentation to identify to whom and/or how the initial report was made such as anonymously, PREA Hotline, third-party such as inmate family member, another inmate, and/or alleged victim of sexual harassment and /or sexual abuse. During interviews with inmates who alleged sexual abuse, the auditor's method of identifying the 1st responder was by having the inmate identify the staff member during the interview. This information was not included in the investigative case files nor in the summaries of the investigations. Therefore, the auditor could not conclude how the allegations were reported as the trail of events in the reporting process was not documented/or maintained. Based on the review of policies, documents, interviews, and analysis on the findings in provision 115.61(e) NWCX "DOES NOT MEET" compliance with the standard 115.61 (e).

Corrective Action Completed:

Six PREA allegations were reported during the 120- day corrective action period. A review of each investigation casefile and summary of the investigative reports contains clear documentation that identifies the first responder whom the alleged victim of sexual abuse and/or sexual harassment reported their allegation and the third-party staff member identified as reporting to the OIC Institution Investigators. All third-party reporting individuals were identified as security and non-security staff who reported directly to the Associate Warden (T). The investigative case files did not indicate an allegation reported by a third-party outside the facility such as via the PREA Hotline, correspondence to the Central Office State-wide PREA Coordinator, friends or family members of an inmate, emails to the NWCX Warden, and/or by another inmate. However, the investigative reports did thoroughly document how the allegations were reported.

The review of the six completed investigations during the corrective action period, confirmed the investigative staff has a clear understanding of thoroughness when documenting the circumstances of receiving information that is required in an investigative report. Therefore, NWCX has successfully completed the corrective action period and meets the mandate of all standard provisions for standard 115.61 that includes 115.61 (e)

115.62	Agency protection duties
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 940 640" style="list-style-type: none"> <li data-bbox="242 329 767 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="242 387 940 416">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="242 445 424 474">3. Interviews with: <ol data-bbox="242 504 507 640" style="list-style-type: none"> <li data-bbox="242 504 507 533">a. Agency Head Designee <li data-bbox="242 562 349 591">b. Warden <li data-bbox="242 620 403 649">c. Random staff <p data-bbox="242 674 1469 734">TDOC Index 502.06.2 states "If facility staff receives information that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. The auditor interviewed random and specialized staff.</p> <p data-bbox="242 741 1485 902">They all stated that they would remove the inmate from the area of threat immediately and/or remain with the inmate until the appropriate staff arrived to assist in the separation of inmates due to the custody level of some. They continued in stating they would immediately notify the Shift Commander. Staff to include contract and volunteers are issued and carry a PREA Refresher Training card on their badge which list the steps to take to protect an inmate. The facility stated in the PAQ that there have been 0 instances where an imminent threat of inmate sexual abuse was reported.</p> <p data-bbox="242 931 1493 1093">An interview with the Agency Head Designee indicated TDOC has an immediate response system in place as sexual safety is taken seriously. The first step would be to separate the at-risk individual from the potential risk and protect them from harm. There are specific areas of the compound that are designated as protective custody (PC). A protective custody investigation will be initiated, and any issues identified. The offender will remain housed in PC until the risk is eliminated by a transfer of the potential threat or until the offender expresses that they are no longer fearful and want to return to the compound.</p> <p data-bbox="242 1122 1485 1384">The Warden stated staff are immediately remove the inmate from the area of threat, initial an investigation while interviewing the inmate to gather as much information as they can to identify why he is subject to a substantial risk of imminent sexual abuse. The inmate would be housed in a different housing unit away from the area and/or individuals that pose a threat. He indicated with the various housing units and the layout of the complex, alternate housing would be utilized for the inmate and the aggressor would be placed in segregation pending the completion of an investigation by the OIC Institution Investigators. Further actions would be based on the evidence obtained during the investigation. Other available options in addition to alternate housing, could be the transfer of the aggressor or inmate identified as subject to a substantial risk of imminent sexual abuse as needed.</p> <p data-bbox="242 1413 1449 1473">There were 0 incidents reported where an inmate was identified as subject to a substantial risk of imminent sexual abuse that required immediate action from staff.</p> <p data-bbox="242 1503 1469 1563">Based on the review of policies, documents, lesson plan, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.63	Reporting to other confinement facilities
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 940 640" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Allegation Logs and Case Files 4. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. Warden <p data-bbox="242 672 1485 833">115.63 (a)(b) (c) (d) TDOC Index 502.06.2 states that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden of the facility that received the allegation shall notify the head of the facility where the alleged abuse occurred. The notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation and documented that the notification was made. The Warden who receives such notification shall ensure that the allegation is investigated in accordance with TDOC policy.</p> <p data-bbox="242 864 1485 1025">An interview with the Agency Head Designee indicated if another agency or a facility within another agency refers allegations of sexual abuse or sexual harassment that occurred within one of the TDOC facility the point of contract is the Statewide PREA Coordinator. The Statewide PREA Coordinator in turn will notify the Warden, the Facility PREA Coordinator, and the OIC Institution Investigator. She continued in stating TDOC does have examples of outside agency referrals as the TDOC routinely receive referral from outside Rape Crisis Centers.</p> <p data-bbox="242 1057 1485 1151">An interview with the Warden, indicated upon an inmate reporting an allegation of sexual harassment and /or sexual abuse upon his arrival from another TDOC facility and/or other agency, the information obtained would be documented and forward to the head of the affected facility. The documented information would be shared through a phone call.</p> <p data-bbox="242 1182 1485 1341">Per the PAQ, interview with the Warden and review of the 17 PREA case file reports the facility has not received any notifications where an inmate reported an allegation of sexual abuse while confined at another TDOC or any other correctional facility. Although the method of notification on how the allegation was reported, the summary of the cases clearly notes the NWCX OIC Investigators within hours of awareness interviewing the identified inmates and continuing with the investigation.</p> <p data-bbox="242 1373 1485 1666">However, 1 inmate reported via grievance an allegation of sexual harassment having occurred at his previous institution. Per an interview with the NWCX Associate Warden (T)/PREA Coordinator/Warden designee he made contacted via telephone to the Associate Warden (T)/PREA Coordinator who is also the Warden Designee at the affected TDOC facility of the grievance filed by the inmate. The thread of emails between both institutions' investigative staff, Associate Warden (T) and Warden acknowledging receipt to the reported allegation was provided. A copy of the investigation was submitted for review. However, due to the absence of the OIC Institution Investigators at the affected institution, the OIC Special Agent for that facility worked with the OIC Institution Investigator at NWCX to complete the investigation. The NWCX OIC Investigator was noted as completing the investigative summary. However, the OIC Special Agent's interview conducted with the identified aggressor (staff member) at the affected facility was included in the investigative summary.</p> <p data-bbox="242 1697 1453 1756">Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.64	Staff first responder duties
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 1295 698" style="list-style-type: none"> <li data-bbox="242 329 767 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="242 387 938 416">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="242 445 1295 474">3. NWCX Index 502.06.2-1 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART) <li data-bbox="242 504 424 533">4. Interviews with: <ol data-bbox="242 562 644 698" style="list-style-type: none"> <li data-bbox="242 562 405 591">a. Random staff <li data-bbox="242 620 568 649">b. Non-Security First Responder <li data-bbox="242 678 644 707">c. Inmates Who Reported Sexual Abuse <p data-bbox="242 730 1485 925">115.64(a) TDOC Index 502.06.2 states if the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander. The alleged victim and abuser shall be instructed not to wash their hands, shower, brush, teeth, change clothes, urinate, defecate, drink, or eat. The security shift supervisor who is notified of the allegation shall initiate the Sexual Abuse Incident Check Sheet, CR-37776. Security shall separate the alleged victim and abuser. Security shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. Security staff shall notify SART.</p> <p data-bbox="242 954 1485 1050">NWCX Index 502.06.2-1 indicate the first staff responder is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander. The alleged victim will be instructed not to shower, brush teeth, change clothes, urinate, defecate, drink, or eat.</p> <p data-bbox="242 1079 1465 1308">115.64(b) TDOC Index 502.06.2 states, "If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander. All staff interviewed, including non-custody staff, were aware of their responsibilities as first responders. All reported they would immediately separate inmates and maintain sight of a victim, do what they could to preserve a crime scene including advising involved inmates not to shower, change clothing, brush teeth, eat, drink, or use the toilet. All staff are trained as first responders and wear a pocket card on their badge that list the steps to take when responding to an allegation that an inmate was sexually abused.</p> <p data-bbox="242 1337 1493 1700">An interview was conducted with a non-security staff member who an inmate identified as his first responder. The non-security staff reported the inmate had already been separated from the alleged aggressor and removed from his cell when he reported to her office. She immediately contacted her supervisor (Unit Manager) who contacted the Shift Commander and the OIC Institution Investigator. She stated the inmate victim remained in her office, until he was escorted for further interviews with her supervisor and the OIC Institution Investigator. During an interview with the OIC Institution Investigator, he stated the cell was secured and treated as a crime scene. Various clothing items were removed and held as possible evidence. The victim reported he had not bath since the latest incident occurrence he had a sexual encounter with the alleged aggressor against his free will. However, the aggressor had on every occasion. The victim was transported to the local hospital where he received a forensic medical examination by a SANE. Additionally, cases in which inmates alleged sexual abuse, did not include penetration but actions such slapping on the buttocks. The collected items are being maintained by the OIC Special Agent due criminal actions were alleged.</p> <p data-bbox="242 1729 1469 1789">Based on the review of policies, interviews and analysis, the facility demonstrated compliance with all the provisions of this standard.</p>

115.65	Coordinated response
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 963 526" style="list-style-type: none"> <li data-bbox="242 329 767 358">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="242 387 963 416">2. NWCX Index 502.06.2-1 PREA Allegations, Investigations, and SART <li data-bbox="242 445 371 474">3. Interviews <ol data-bbox="242 504 349 533" style="list-style-type: none"> <li data-bbox="242 504 349 533">a. Warden <p data-bbox="242 562 1485 1288">115.65 Per an interview with the Warden, he identified a SART consisting of members who are responsible for responding to all reports of sexual abuse from the initial allegation being reported. The members are department head staff the PCM and OIC Institution Investigators who follow policy as outlined in NWCX 502.06.2-1 throughout the response of reported sexual abuse allegation. NWCX Index 502.06.2-1 identifies procedures to follow upon notification of a reported PREA allegation. The policy outlines the responsibilities of the first responder within the first 72 hours, preserving and protecting the crime scene until appropriate steps can be taken to collect any evidence while making notification to the Shift Commander who shall notify the SART (Sexual Abuse Response Teams) Coordinator who is also the Associate Warden (T)/ PREA Coordinator. The SART is a coordinated response team of medical and behavioral health practitioners, facility investigator, and facility security leadership. At NWCX, the SART consists of the Associate Warden (T), the Health Services Administrator, the Behavioral Health Administrator, the Chief of Security, Chief Counselor, PREA PCM and the OIC Institutional Investigator. The policy also outlines the initial responsibility of the first responder duties of separating the victim from the abuser; preserving evidence of the victim and crime scene; notifying SART Coordinator; transporting the victim to the Jackson-Madison County General Hospital for a forensic medical examination by a SANE nurse if the incident was reported to have occurred with 72-hours; determination of segregated housing, access to emergency care with medical and mental health; follow-up care for sexual abuse cases that include ongoing medical and behavioral health care for sexual abuse victims and abusers; testing for sexually transmitted infections and sexually transmitted infections prophylaxis; treatment services for the victim without financial cost and regardless of whether the victim names the abuser or cooperates with the investigation; the inmates access to facility and outside confidential support services; preliminary administrative investigations and criminal investigations documented in the PREA Allegation System within 24 hours of receiving the allegation; completing the Sexual Abuse Incident Check Sheet, CR-3776; notifying the inmate of the investigative findings and conducting an incident review within 30 days of the conclusion of a sexual abuse investigation for all substantiated and unsubstantiated sexual abuse allegations.</p> <p data-bbox="242 1317 1406 1346">Based on a review of the policy, interviews and analysis, the facility has demonstrated compliance with this standard.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. Tennessee Code Annotated 50-1-207 3. Interview with: <ol style="list-style-type: none"> a. Agency Head Designee <p>115.66 (a) TCA Code 50-1-207 states "Prohibition against requiring any employer or employee to waive their rights under the National Labor Relations Act or require acceptance or agreement to any provisions that are mandatory or non-mandatory subject of a collective bargaining under Federal law. The Agency Head designee reported that TDOC does not have any collective bargaining agreements for NWCX nor has the agency entered into any collective bargaining agreements since August 2012.</p> <p>Based on a review of the code, interviews and analysis, the facility has demonstrated compliance with this standard.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <ol data-bbox="240 271 940 645" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Retaliation Monitoring forms for Staff and Inmates 4. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. Warden c. NWCX PCM / Staff Charged with Monitoring Retaliation <p data-bbox="240 674 1477 835">115.67 (a) TDOC Index 502.06.2 indicates that inmates and staff who are involved in reporting sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other inmates or staff. Appointed members of the facility SART shall monitor staff and inmates for protection from retaliation utilizing PREA Retaliation Review (Inmates) for inmates, CR-3963, and PREA Retaliation Review (Staff), CR-3982, for staff. The NWCX PCM is the designated retaliation monitor at NWCX.</p> <p data-bbox="240 864 1477 992">115.67(b) TDOC Index 502.06.2 indicates that the facility shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p data-bbox="240 1021 1489 1182">The Agency Head Designee identified multiple methods in which the Department protect inmates and staff from retaliation for sexual abuse or sexual harassment allegations. Methods of protection include the TDOC monitor victims and aggressor for retaliation on a 30-, 60-, and 90-day time frame. In addition, TDOC offers the victim the ability to transfer facilities. Should the victim decide to remain, the aggressor is transferred to another facility. At a minimum, the victim and an aggressor are listed as incompatible and prohibited from being housed together.</p> <p data-bbox="240 1211 1473 1440">Per interview with the Warden, he would immediately deal with any retaliation suspected and/or confirmed. An investigation would immediately be conducted that include observation of available video, any disciplinary infractions, change in duties, housing assignment, staff shift assignments. However, regarding staff, the review of their evaluations, work schedules, any write-ups and or disciplinary actions would be monitored. Any changes in an inmate's housing, job assignment, disciplinary, would be reviewed. Any staff and or inmate found to display retaliation actions would be disciplined. If necessary, a staff member and/or inmate may be transferred to another TDOC facility, housing assignment, and job assignment, that would eliminate retaliation actions and provide a safe environment for any individual experiencing retaliation.</p> <p data-bbox="240 1469 1477 1697">115.67(c) (d) TDOC Index 502.06.2 states, "For at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse. Departmental monitoring shall involve looking for any changes that may suggest possible retaliation by inmates or staff. Institutional SART members shall act promptly to remedy any such retaliation. TDOC Index 502.06.2 also states that monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. This monitoring shall include, but not be limited to inmate disciplinary reports; inmate housing or programming changes; or negative performance reviews or reassignments of staff.</p> <p data-bbox="240 1727 1477 1989">The NWCX PREA PCM has been designated to conduct retaliation monitoring for both staff and the inmate population. The auditor conducted a review of the 19 PREA case files for confirmation of completed retaliation monitoring of the alleged victims, and/or those who assisted with the investigation. Of the 19 cases, the NWCX PCM documented conducting retaliation monitoring with all alleged victims and alleged aggressors at the 30-day, 60-day, and 90-day mark with the exception of those inmates who were released from TDOC custody. She documents notes on her meeting with the inmates and /or staff retaliation monitoring was applicable to. The date of release from TDOC was noted on the retaliation monitoring form. As of the on-site visit, the NWCX PCM continued to conduct retaliation monitoring of a pending sexual abuse case awaiting DNA sampling for as long as 120 days.</p> <p data-bbox="240 2018 1477 2145">Retaliation monitoring was documented as completed for 90 days for the 1-staff-on-inmate sexual abuse determined as Unsubstantiated. The remaining PREA investigations were either sexual harassment and/or determined as Unfounded. The retaliation monitoring form included inmate name and case number, the facility, victim, alleged aggressor, report date, retaliation monitor and preliminary protection measures. The tracking portion of the form identifies housing changes,</p>

programming changes, disciplinary record, etc., as items to monitor, and provides an area for reporting at 30 days, 60 days, final 90 days, and space for extended monitoring if required. It also includes a column for the retaliation monitor to include notations regarding negative interactions with staff or inmates.

Per the Agency Head Designee, retaliation for cooperation is not tolerated in TDOC. If the individual is an offender, they would be granted protective custody status until the aggressor was removed from the compound and the retaliation could be addressed. If the individual is a staff member, steps are instituted to ensure that retaliation is recognized and addressed appropriately (i.e. termination of aggressor, staff transfer of retaliator, or re-assignment of retaliator).

With the exception of the pending DNA sampling results for one alleged sexual abuse case, all PREA investigations were documented as completed within 72 hours. However, the NWCX PCM continued with retaliation monitoring to include Unfounded investigations.

Based on the review of policies, retaliation forms, interviews and analysis, the facility has demonstrated compliance with all provisions of this standard.

form. As of the on-site visit, the NWCX PCM continued to conduct retaliation monitoring of a pending sexual abuse case awaiting DNA sampling for as long as 120 days.

Retaliation monitoring was documented as completed for 90 days for the 1-staff-on-inmate sexual abuse determined as Unsubstantiated. The remaining PREA investigations were either sexual harassment and/or determined as Unfounded. The retaliation monitoring form included inmate name and case number, the facility, victim, alleged aggressor, report date, retaliation monitor and preliminary protection measures. The tracking portion of the form identifies housing changes, programming changes, disciplinary record, etc., as items to monitor, and provides an area for reporting at 30 days, 60 days, final 90 days, and space for extended monitoring if required. It also includes a column for the retaliation monitor to include notations regarding negative interactions with staff or inmates.

Per the Agency Head Designee, retaliation for cooperation is not tolerated in DCO. If the individual is an offender, they would be granted protective custody status until the aggressor was removed from the compound and the retaliation could be address. If the individua is a staff member, steps are instituted to ensure that retaliation is recognized and addressed appropriately (i.e. termination of aggressor, staff transfer of retaliator, or re-assignment of retaliator).

With the exception of the pending DNA sampling results for one alleged sexual abuse case, all PREA investigations were normally documented as completed within 72 hours.

Based on the review of policies, retaliation forms, interviews and analysis, the facility has demonstrated compliance with all provisions of this standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Interviews with: <ol style="list-style-type: none"> a. Warden b. NWCX PCM c. Staff who Supervise Segregation d. Screening Staff <p>115.68 (a) TDOC Index 502.06.2 indicates that any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241, shall clearly indicate the basis of concern for the inmate's safety and the reason why no alternative means of separation can be arranged. Every Protective Custody placement is, by policy, reviewed every 30 days. Inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If inmate access to programs, privileges, education, or work opportunities is restricted, the facility shall document what opportunities have been limited; the duration of the limitation; and the reasons for such limitations. This shall be documented on LCDG Contact Notes. Per the Warden and Staff assigned to supervise segregated housing NWCX has a variety of housing units and recreation yards where inmates are secured from others and have no interaction to include site and sound. Therefore, alternate housing is an option. The auditor conducted interviews with 4 inmates who reported allegations of sexual abuse. Neither inmate reported they were placed in segregation after reporting an allegation of sexual abuse. Per the PAQ and interviews with the Warden, staff who supervise segregation and NWCX PCM there has been 0 inmates who alleged to have suffered sexual abuse placed in involuntary segregated housing the past 12 months.</p> <p>Based on the review of policies, interviews and analysis, the facility has demonstrated compliance with this standard.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 1187 640" style="list-style-type: none"> <li data-bbox="240 329 767 356">1. NWCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 938 414">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="240 445 762 472">3. TDOC PREA Allegation Documentation Checklist <li data-bbox="240 504 424 530">4. Interviews with: <ol data-bbox="240 562 1187 640" style="list-style-type: none"> <li data-bbox="240 562 1187 589">a. Office of Investigations and Compliance (OIC) Special Agent and OIC Institution Investigator <li data-bbox="240 620 691 647">b. NWCX PCM, PREA Coordinator, Warden <p data-bbox="240 672 1485 931">115.71(a) TDOC 502.06.2 states it is the policy of TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines (Title 28 (CFR Part 115). Staff shall accept reports made verbally, in writing, anonymously, and from third parties. Allegations shall be documented within 24 hours of becoming known to facility staff in the PREA Allegation System (PAS). These investigations shall be conducted within 72 hours of receiving the allegation. SART team members/investigators who have received special training in conducting sexual abuse investigations in confinement settings shall investigate all allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p data-bbox="240 965 1485 1025">A review of the completed 18 PREA investigative reports confirmed the investigations were documented in the PAS within 24 hours of the investigator documenting his notification in the investigation report summary.</p> <p data-bbox="240 1059 1485 1319">Upon the auditor's review of the 17 completed and 1 pending PREA investigation, it was determined that the investigative files did not contain sufficient documents to support an investigation was thoroughly conducted. The investigation's case files did not include interviews conducted with individuals other than the alleged victim and the alleged aggressor. The case files did not contain interviews conducted with the alleged victims, alleged aggressors, review of video, review of phone monitoring, no prior history of the alleged aggressor, nor identify possible witnesses and or that no witnesses were identified. Investigative files did not contain documentation that identified to whom and/or how the allegation was initially reported too. Therefore, based on the lack of documentation presented, the auditor does not conclude that a thorough investigation was conducted. NWCX "DOES NOT MEET" this provision.</p> <p data-bbox="240 1352 1485 1910">115.71(b) TDOC 502.06.2 states, "where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations." A Sexual Abuse Response Team (SART member who have received special training in conducting sexual abuse investigations in confinement settings shall investigate. The OIC Institution Investigator is a member of the SART and conduct administrative investigations for the facility to include all sexual abuse and sexual harassment. The OIC Special Agent conducts both administrative and criminal investigations. Interviews were conducted with both the OIC Institution Investigator and OIC Special Agent. Administrative investigation is typically investigated by the OIC Institution Investigator. However, during the investigation, if the possibility of criminal charges is determined, the OIC Special Agent is notified and continues with the investigation. Training records noted both the OIC Institution Investigator and OIC Special Agent completed the required course of Conducting Sexual Abuse Investigation in a Confinement Setting. However, based on the lack of documentation maintained in the PREA investigative case files and the method in which the investigative reports were completed, the auditor is recommending the NWCX OIC Institution Investigative staff complete additional investigative training prior to the completion of future investigations. The OIC Special Agent in Charge reported to the facility during the on-site visit upon becoming aware of the discrepancies identified noted by the auditor. The recommendation for additional training was shared with the OIC Special Agent in Charge, TDOC State-wide PREA Coordinator and the Director of Compliance with the Office of the Inspector General during the on-site visit. Refresher PREA investigations training was presented to the NWCX OIC Investigative staff the following week of the on-site visit on December 15, 2022.</p> <p data-bbox="240 1944 1485 2136">115.71(c) TDOC Index 502.06.2 indicates that OIC Special Agents shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. A review of investigation files demonstrated that the investigator did not collect/retain all possible available evidence, documentation, memorandums, statements, interviews of inmates and/or staff within the identified housing unit/or area, video recordings, telephone monitoring, review of prior reports and complaints of sexual</p>

abuse involving the suspected perpetrator. There is no documentation of the aforementioned noted in the narrative of the completed investigative reports by the OIC Institution Investigators.

However, regarding the 1 pending sexual abuse case that was referred to the OIC Special Agent, the auditor was presented a chain of custody for clothing collected from the alleged victim. These clothing was for DNA testing.

Based on the lack of documentation within the PREA investigative casefile to support the collection of evidence reviewed during the investigative process, NWCX is determined as "DOES NOT MEET" standard 115.71 provision (c).

115.71(d) TDOC Index 502.06.2 states when the quality of evidence appears to support criminal prosecution, the Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. An interview with the OIC Special Agent indicated as a sworn law enforcement officer, the OIC Special Agents are not required to consult with the prosecutor prior to conducting compelled interviews. However, when there is sufficient evidence to substantiate a crime, the case is reviewed by the State Assistant District Attorney to determine if the evidence presented is sufficient for prosecution.

115.71(e) TDOC Index 502.06.2 states, "The credibility of a victim, suspect, or witness, shall be assessed on an individual basis, and shall not be determined by the person's status as inmate or staff. Inmates who allege sexual abuse shall not be required to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation." Review of investigation files did not indicate the use of a polygraph or other truth-telling device or examination. The OIC Investigators the credibility of an alleged victim, suspect, or witness is assessed on an individual basis. Additionally, neither investigator indicated any circumstance when an inmate victim would be required to submit to a polygraph examination. A review of the 18 PREA investigative case files did not reveal any indication that an alleged victim was requested to participate in a polygraph or other truth-telling device. An interview with inmates who reported allegations of sexual abuse stated they were not asked to submit to a truth-telling device upon reporting the allegation or throughout the investigation. Per interviews with the OIC Institution Investigator and OIC Special Agent a victim of sexual abuse would never to be required to submit to a truth-telling device.

115.71(f) TDOC Index 502.06.2 indicates that administrative investigations shall include an effort to determine whether staff actions or failures to act facilitated the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings. A review of administrative investigations did not include any statements/interviews and/or documentation that noted interviews, nor a review of video footage to include assigned staff's location/actions/behavior where the allegation was alleged to have occurred. Therefore, there were no noted entries within the investigative case file nor report that will allow one to determine if staff actions and/or failure in performing proper duties contributed to the reported PREA allegations.

115.71(g) TDOC 502.06.2 states that criminal investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence. A review of the PREA investigative case files and interviews with both the OIC Institution Investigator and OIC Special Agent all criminal investigations would include description of physical, testimonial and documentary evidence. There were 0 criminal cases completed during the review period to include the post-audit phase. The auditor requested to review an investigative criminal sexual abuse case having occurred at the facility outside the review period. However, the State-wide PREA Coordinator and other OIC Investigators were unaware of any criminal sexual abuse cases having occurred at NWCX to include in previous years. However, one sexual abuse investigation remained pending throughout the post-audit pending forensic testing results. This case is currently being handled by the OIC Special Agent.

115.71(h) TDOC Index 502.06.2 states, "Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. There were 0 criminal cases completed during the review period to include the post-audit phase. One sexual abuse allegation remains pending the completion of the forensic testing and further review. As of the audit report there was not sufficient evidence to support criminal charges.

115.71(i) TDOC Index 502.06.2 states that such investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five additional years. This practice was confirmed by the OIC Institution Investigator and OIC Special Agent in Charge. Administrative investigative case files are maintained in the PAS at the facility level and criminal investigations are maintained at the Office of Investigations and Conduct.

115.71(j) TDOC Index 502.06.2 states that the departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation. Interviews with both the OIC Institution Investigator and OIC Special Agent confirmed although staff may resign and/or an inmate is released/transferred, the investigation continues to include the arrest and prosecution of staff and/or inmate as applicable. A review of the investigative case files does not identify any aggressors and/or victim departure from the facility prior to the completion of the investigation. All investigations were completed prior to the either inmate departure as the investigations were normally completed on the allegation was made and not beyond 3 days of being reported. Both inmates involved in the pending sexual abuse case remain at NWCX but are housed at different sites and separate from each other.

115.71 (k)(l) The Office of Investigations and Conduct is part of the Tennessee Department of Corrections and conducts its own criminal as well as administrative investigations into cases of sexual abuse and sexual harassment. Therefore, this provision is not applicable.

Based on the review of policies, documents, interviews and analysis, the facility does not meet the provisions of (a) (c) based on the review of the 17 completed investigative PREA case files revealed the investigative reports and case files did not contain sufficient documentation to support the investigation was thoroughly completed in which all possible available evidence was reviewed and/or collected. The investigative files did not contain interview notes conducted with the alleged victim and alleged aggressor nor others identified within the affected area that could have served as possible witnesses. The files did not document an attempt to review available video footage, inmate telephone monitoring, or the review of prior reported complaints against the suspected perpetrator. The investigative case files and reports only included the written summary completed by the investigator and interviews stated to have been conducted by the investigative staff with the alleged victim and alleged aggressor. Allegations against the aggressor nor any evidence collected for review that was utilized to support the investigative findings. Therefore, it is concluded by this auditor that NWCX "DOES NOT MEET" standard 115.71 provisions (a) and (c).

CORRECTIVE ACTION: On December 15, 2022, one week after the auditor's on-site visit and recommendation for additional PREA investigation training to the NWCX OIC Investigators, refresher training was held. The training was presented by OIC Special Agent in Charge and the TDOC State-wide PREA Coordinator and the corrective action phase began immediately. The TDOC State-wide PREA Coordinator forward completed PREA investigative case files to the auditor for review and will continue for a continued corrective action period of 120-days upon the release of the interim report.

Corrective Action Completed:

The facility received 6 reported PREA allegations during the corrective action period that included both sexual abuse and sexual harassment. Each of the case files contained sufficient documentation that supported a thorough investigation conducted. Specifically, the investigative case files contained the following: how the allegations were reported and to whom; initial and follow-ups interviews with parties identified; written statements by the alleged victims; documented verbal statements by the alleged aggressors; hand written statements by all parties involved; recorded interviews of all parties identified; the availability and documentation of video observance for identified areas; photographs of alleged victims and alleged aggressors; inmates' prior criminal history, history of PREA allegations; medical documentation for alleged abuse victims as applicable; attempted interviews with non-cooperative inmate witnesses; and summary of the investigative methods taken and evidence collected to support the investigative findings. The review of the available video monitoring also assisted the investigative staff in determining whether staff actions contributed to the occurrence of the alleged incidents. In each of the investigative cases, there was no evidence to support either of the allegations as Substantiated. The reported allegations included: 2 – inmate on inmate sexual abuse cases with an investigative finding of Unsubstantiated; 1 inmate on inmate sexual abuse case each with an investigative finding of Unfounded; 2 staff -on inmate sexual harassment each with an investigative finding of Unfounded; and 1 inmate on inmate sexual harassment allegation with an investigative finding as Unfounded. Each of the investigations were thoroughly completed and contained supporting documentation that supported their investigative findings based on the review and collection of all available evidence.

Based on the supporting documentation collected and maintained in each of the 6 PREA investigation case files reported and completed during the 120-day corrective action period, the facility has successfully met the mandate of all provisions within standard 115.71 to include 115.71 (a) and (c). The investigative case files and the investigation report contain sufficient evidence to support thorough investigations were completed and the investigative findings was determined based solely on the evidence collected.

115.72	Evidentiary standard for administrative investigations
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 938 586" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 4. Interviews with: <ol data-bbox="240 560 770 586" style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent <p data-bbox="240 618 1481 810">115.72(a) TDOC Index 502.06.2 states, "The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated." A review of the investigation documents indicates that the Department does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse and/or sexual harassment are substantiated. Per interviews with the OIC Special Agent and OIC Institution Investigative a preponderance of evidence is the standard necessary to substantiate an allegation of sexual abuse or sexual harassment.</p> <p data-bbox="240 842 1490 1137">However, based on the review of the 18 completed PREA case files conducted during the review period, the lack of evidence maintained by the investigator does not support compliance with this standard. Specifically, the investigative case files do not maintain documentation to support investigative staff conducted a thorough investigation. The investigative files did not contain interviews with possible witnesses and/or other inmates within the affected area, interviews with staff assigned to the area, review of possible video, identify who the inmate reported the allegation too such as the first responder, a review of inmate telephone calls after the incident, nor any other evidence utilized to determine the investigative finding. In many cases, investigative staff only documented conducting interviews with the alleged victim and the alleged aggressor while concluding an investigative finding. The gathering and maintaining of the evidence and/or a documented attempt to be collected such would give greater weight to the preponderance of evidence in determining the investigative findings.</p> <p data-bbox="240 1169 1453 1361">Upon the auditor identifying the mentioned discrepancies in the investigative casefiles during the on-site visit, and NWCX staff was immediately identified as "DOES NOT MEET" the standard. The OIC Institution Investigator's supervisor OIC Special Agent in Charge reported to the facility for a review of the investigative case files and a meeting with the TDOC State-wide PREA Coordinator, Director of Compliance with the General Counselor, PREA auditor and OIC Institution Investigator to discuss the documentation presented and documentation identified as missing. Due to the unavailability of required documentation, NWCX went into an immediate corrective action during the post audit phase.</p> <p data-bbox="240 1393 1469 1487">The OIC Special Agent in Charge and TDOC State-wide PREA Coordinator conducted a 2-hour training course title "PREA Investigations and Documentation" during the post audit phase on December 15, 2021. The NWCX Institution Investigative staff and OIC Special Agent for NWCX was amongst those who attended.</p> <p data-bbox="240 1518 491 1545">CORRECTIVE ACTION:</p> <p data-bbox="240 1576 1485 1966">Prior to the submission of the interim report, NWCX completed 3 PREA investigations. This information was forward to the auditor for review. These investigative files maintained written statements submitted by the first responder, alleged victim, alleged aggressor, identified witnesses, and staff who interacted with the alleged victim to include mental health. The investigative staff also documented and maintained the review and recording of the affected through the Vicon video, review and recorded interviews with the alleged victim, alleged aggressor and identified witness. The evidence reviewed, collected and maintained by the investigative staff supports they have received sufficient training to collect and maintain evidence to conduct a thorough investigation in which the investigative findings can be based on the preponderance of available evidence not just the statements made by the alleged victim and the alleged aggressor only. However, the facility will remain in the CORRECTIVE ACTION phase for an additional 120 days to ensure consistency in the manner evidence is reviewed, collected and maintain in the investigative files while determining an investigative finding. Therefore, based on the review of policies, investigative case files, documentation and analysis, it is determined by the auditor that NWCX "DOES NOT MEET" the standard.</p> <p data-bbox="240 1998 549 2024">Completion Action Completed:</p> <p data-bbox="240 2056 1465 2150">As noted in the interim report, NWCX completed 3 PREA investigations during the post audit period. An additional 3 PREA allegations were reported during the 120-day corrective action period. A review of the 6 completed PREA investigation reports confirmed training received by the OIC Institution Investigative staff was beneficial in the completion and</p>

documenting thorough investigative reports. A review of the case files supports the investigative findings were based on the preponderance of evidence collected. Evidence collected included video review, witness interviews and statement, statements of alleged victims and aggressors, and review of prior history. The investigative case files and summary of the investigative reports confirmed the investigative findings were based on the preponderance of all available evidence collected and not on statements only made by the alleged victim and/or aggressor. Therefore, NWCX meets the mandate of the standard provision.

115.73	Reporting to inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 940 696" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 4. TDOC PREA Status Notification CR-3984 5. Interviews with: <ol data-bbox="242 613 940 696" style="list-style-type: none"> a. OIC Institution Investigator, OIC Special Agent, OIC Clerical Officer b. Warden <p data-bbox="242 728 1485 990">115.73(a) TDOC Index 502.06.2 states following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing as to whether the allegation has been determined to be Substantiated, Unsubstantiated or Unfounded. Interviews with the OIC Special Agent, OIC Institution Investigator, and Warden identified at the conclusion of the PREA investigation, inmate victims receive notification of the investigative findings. There were 17 PREA completed investigations reviewed for the 12-month review period. Each of the investigative case files included confirmation that the inmate received notification of the investigative findings via their signature or a second staff member serving as witness when the inmate refused to sign on TDOC Inmate PREA Allegation Status Notification form. The notification was presented by NWCX OIC Clerical Officer.</p> <p data-bbox="242 1021 1430 1084">115.73(b) The agency conducts its own criminal as well as administrative investigations into cases of sexual abuse and sexual harassment. Therefore, this provision is not applicable.</p> <p data-bbox="242 1115 1490 1274">115.73(c) TDOC Index 502.06.2 states that following an inmate's allegation that a staff member has committed sexual abuse, the Department shall subsequently inform the inmate in writing whenever: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; and the staff member has been convicted on a charge related to sexual abuse within the facility. There were 0 PREA allegations Substantiated against a staff member during the review period.</p> <p data-bbox="242 1305 1461 1431">115.73(d) TDOC Index 502.06.2 indicates that following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing whenever the facility learns that an alleged abuser has been indicted on a charge related to sexual abuse within the facility. There were 0 Substantiated inmate-on-inmate PREA allegations that were determined to be criminal in nature during the 12-month review period.</p> <p data-bbox="242 1462 1477 1756">115.73(e) TDOC Index 502.06.2 states that all notifications shall be done in writing using Inmate PREA Allegation Status Notification, CR-3984, and the inmate shall acknowledge by signature that he/she has received such notification. The notification shall become part of the allegation file. If the inmate refuses to sign the acknowledgement, an additional staff member shall sign and date acknowledging the inmate refusal. Interviews with the OIC Institution Investigator and the OIC Clerical Officer indicated they provide the notifications of findings to the inmate population. A review of the 17 completed investigative PREA casefile revealed the inmate victims were notified of the investigative findings. In most cases the alleged victim documented their signature as being informed, however in cases where inmates refused to acknowledge being informed of the investigative findings, the notification was documented as given to the inmate and witnessed by the OIC Institution Investigator and the OIC Clerical Officer.</p> <p data-bbox="242 1787 1430 1850">Based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance with this standard.</p>

115.76	Disciplinary sanctions for staff
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 940 698" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigation Case Files 4. Interview with: <ol data-bbox="240 560 638 698" style="list-style-type: none"> a. Warden b. TDOC State-wide PREA Coordinator c. NWCX PCM <p data-bbox="240 730 1485 1160">115.76 (a-d) TDOC Index 502.06.2 states staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or PREA policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. Sanctions shall be 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 the Department's sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. Per interview with the Warden, employees are disciplined based on the outcome of sexual misconduct investigation. He continued in stating 0 staff have received discipline and/or were terminated for violating the agency's sexual abuse and/or sexual harassment against an inmate. The facility would use progressive discipline for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="240 1191 1449 1384">However, interviews with the TDOC State-wide PREA Coordinator and NWCX PCM, NWCX did include within their investigation count a PREA allegation reported at NWCX that occurred at the inmates' previous institution but reported at NWCX. An investigation was determined as Substantiated for sexual abuse due to the transportation officer requiring an inmate identified as transgender to be searched by a male officer that include the remove of the transgender's shirt after requesting to be searched by a female officer. The staff member received a counseling session and additional PREA training. No disciplinary actions were taken.</p> <p data-bbox="240 1415 1449 1509">Per the investigative staff, Warden, TDOC State-wide PREA Coordinator, and NWCX PCM investigative case files, and NWCX PAQ, there were 0 Substantiated PREA investigations of sexual abuse of staff-on-inmate for the 12-month review period. Therefore, 0 TDOC staff was disciplined for actions of such.</p> <p data-bbox="240 1541 1385 1568">Based on the review of policies, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement 4. PREA Investigative Case Files 5. Memorandum submitted by NWCX PREA PCM 7. Interviews with: <ol style="list-style-type: none"> a. Warden <p>115.77(a), (b) TDOC Index 502.06.2 states any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies and if found to have engaged in sexual abuse or sexual harassment of an inmate shall be prohibited from further contact with any inmate. TDOC Index 115.01 states if after an investigation it is necessary to limit the services of a volunteer, the approving authority shall notify the volunteer in writing of such action. The approving authority may terminate the services of a volunteer, and such termination shall apply to all institutions. Per an interview with the Warden, all volunteers and contractors would be prohibited from further contact with any inmates and prohibited from entering the facility and other TDOC facilities until the completion of the investigation. Further actions would be determined upon the investigative findings that include reporting the individual to relevant licensing bodies as applicable. There were 0 Substantiated allegations of sexual abuse and/or sexual harassment against contract employees and/or volunteers during the review period. However, the auditor was informed 1 contractor staff was terminated between the last PREA audit and the current on April 13, 2020. The contract worker was previously a TDOC employee and held the position of correctional officer. As a correctional officer, he received proper search training and was authorized to conduct inmate searches. However, as a contract worker he was not authorized to conduct inmate searches. A copy of the investigation was provided for review and the allegation was reported via the PREA Hotline on April 13, 2020. The incident was alleged to have occurred on April 9, 2020. During the investigation, the contract worker admitted to ordering the inmate to remove his clothing during a search for contraband. The contract staff was prohibited entry into the facility and other TDOC facilities upon the inmate reporting the incident and later terminated.</p> <p>Based on the review of policies, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 1485 600">115.78(a) TDOC Index 502.06 states, "Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Per the NWCX PAQ, review of PREA Case Log and review of 18 PREA investigative case files, there were 2 investigative findings of Substantiated allegations of sexual abuse and 0 Substantiated allegations of sexual harassment by an inmate during the review period. These 2 Substantiated sexual abuse allegations were reported upon the victims being hit on their buttocks by other inmates. These cases were completed as an administrative investigation. The aggressors did not receive disciplinary sanctions but were transferred to other TDOC facilities. One inmate reported an inmate-on-inmate sexual assault that resulted in penetration. This investigative case remained pending the results of the forensic medical examination. The OIC Special Agent is handling this case as criminal charges could result upon the findings. Thus far, there have been 0 PREA investigations with a criminal finding.</p> <p data-bbox="242 629 1485 790">115.78(b) & (c) TDOC Index 502.06.2 states that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The 2 inmates identified as aggressor in the 2 Substantiated cases of sexual abuse did not receive discipline but was placed in the segregation unit pending the completion of the investigation and transferred to other TDOC facilities.</p> <p data-bbox="242 819 1461 1048">115.78(d) TDOC Index 502.06.2 states, If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Per an interview with mental health staff, NWCX does not have a program for aggressors However a sexual offender program is offered at another TDOC facility (DeBerry Special Needs Facility). An inmate may request for enrollment into the program and will be transferred upon approval. One inmate was referred for the program and was transferred. She continued in stating most aggressors are in denial and refuse programs to include individual counseling.</p> <p data-bbox="242 1077 1461 1173">115.78(e) TDOC Index 502.06.2 states an inmate may be disciplined for sexual contact with staff only upon finding that the staff member did not consent to such contact.. No inmate was discipline under this provision as of the post-audit phase as there were no Substantiated investigative findings of sexual abuse and/or sexual harassment of inmate on staff.</p> <p data-bbox="242 1202 1485 1431">115.78(f) TDOC Index 502.06.2 states, "For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting and incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation." There were 0 inmates who received disciplinary sanctions for reporting a false allegation of sexual abuse and/or sexual harassment during the 12-month review period. Interviews with the NWCX PCM and OIC Institution Investigator and the review of PREA investigation case files indicated inmates often reported false PREA allegations due to debts owed to other inmates. However none have received disciplinary sanctions.</p> <p data-bbox="242 1460 1461 1621">115.78(g) TDOC Index 502.06.2 states, "Any prohibition on inmate-on-inmate sexual activity shall not consider consensual sexual activity to constitute sexual abuse." Per interview with the Warden, the facility does not consider consensual sexual activity between inmates to be sexual abuse. A review of the PREA investigative case files, and interviews with the Disciplinary Officer, and NWCX PCM there were no incidents where inmates were charged with sexual abuse upon being determined they involved in consensual sexual activity.</p> <p data-bbox="242 1650 1366 1680">Based on a review of policies, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 1469 871" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. TDOC 113.84 Clinical Assessments, Mental Health Appraisals, and Psychological Testing 4. Inmates Arrival Dates 5. PREA Mental Health Referrals 6. Interviews with: <ol data-bbox="242 674 1094 871" style="list-style-type: none"> a. NWCX PCM b. Medical and Behavioral Health Staff c. Counselors/Staff who Perform Screening for Risk of Victimization and Abusiveness d. Inmates that disclose victimization during PREA Screening <p data-bbox="242 902 1489 1496">115.81 (a) (b) (c) TDOC Index 502.06.3 states that, "If the screening process indicates that an inmate has experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a referral to a medical and behavioral health provider within 14 days of the screening. TDOC Index 113.84 states that each mental health appraisal conducted as part of the initial classification or reclassification process shall be documented on Mental Health Intake Appraisal, CR-3772. The PAQ indicated that 100% of inmates that reported prior sexual victimization were offered a follow-up meeting with a mental health provider. The NWCX PCM and mental health staff identified all inmates who arrived at NWXC with a prior history of sexual victimization and those identified as a history of prior sexual victimization and/or previously perpetrated sexual abuse whether inside an institutional setting or in the community are referred to mental health. The NWCX PCM a PREA Screening Audit Tool where inmates are monitored for the 14-day follow-up with mental health. Sixty inmates were identified as arriving to NWCX during the 12-month review period and accepting mental health services. The auditor randomly selected 21 for review. Interviews with counselors and Behavior Health staff confirmed the inmates are seen by Behavior Health staff within a few days after the referral are made. The auditor randomly selected 21 inmates to review for confirmation of their 14-day follow up with mental health. All inmates were documented as seen by mental health and/or declining to be not later than the 5th day after the referral was noted. Although all inmates did not elect to receive services from mental health they are required to personally advise upon meeting with mental health. Their refusal is documented on mental health intake appraisal while noting the date. Four inmates who reported prior victimization was interviewed and each stated they were seen on the day of arrival and/or within a week of their arrival.</p> <p data-bbox="242 1527 1489 1756">115.81(d) TDOC Index 502.06.3 indicates that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and behavioral health practitioners and other staff, as necessary, to make informed treatment plans and security and management decisions, including housing, bed, work, education, and programs assignments, or as otherwise required by Federal, State, or local law. Per interview with the NWCX PCM (Counselor) and fellow Counselors indicated the specific details related to sexual victimization or abusiveness is strictly limited. Staff have access to the identification of victims and abusers as necessary to inform treatment plans and security management decisions.</p> <p data-bbox="242 1787 1489 2013">115.81(e) TDOC Index 502.06.3 states that Medical and Behavioral Health providers shall obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in the institutional setting. In addition, interviews with both medical and mental health staff verified that staff do obtain informed consent form from inmates before reporting prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18 years old. Both stated they are required by TDOC policies, their State Licenses and State and Federal Law to report any knowledge of such for those under the age of 18. Staff stated they have never had an inmate refused to sign a consent form as they are advised at the initiation of services.</p> <p data-bbox="242 2045 1366 2074">Based on a review of policies, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. Interviews with: <ol style="list-style-type: none"> a. NWCX PCM b. Health Services Administrator / Behavior Health Administrator c. Inmates who disclosed during risk screening <p>115.82(a) TDOC Index 502.06.3 states victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and behavioral health providers, according to their professional judgment. An interview with the Health Services Administrator (HSA) and Behavior Health Administrator verified that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Each state the inmate is seen immediately upon being notified as medical staff are on duty 24/7 and available to the inmate population. If the inmate alleges sexual abuse, medical staff will only provide emergency care with no services that would disturb any physical evidence. Services provided are within policy and upon the inmate return to the facility, medical staff would follow the recommendations made by the SANE and/or attending doctor at the local hospital and the facility doctor. A review of the inmate who reported sexual abuse via penetration arrival and departure log indicates he was transferred from the facility for a few hours on the day he made the report and later returned.</p> <p>An interview with the Health Services Administrator indicated inmates identified to be victims of sexual abuse are seen immediately upon notification. If an inmate is required to go to the local hospital for a forensic medical examination, the inmate would be seen again upon his return. She continued in stating, the nurse would contact the doctor for follow-up test and where to assign the inmate to include the medical infirmary.</p> <p>An interview with the Behavior Health Administrator, indicated she would report to the facility 24/7 if/when an inmate reports an allegation of sexual abuse. Upon an inmates' return from the local hospital after the completion of a forensic medical examination, the inmate would be housed alone in an observation room monitored by video and monitored by mental health staff for as long as needed.</p> <p>115.82(b) TDOC Index 502.06.3 states, "If no qualified medical staff are on duty at the time of a report of a recent abuse, a correctional officer trained to render first aid may help as needed". Medical staff are on duty 24/7 at NWCX and medical services are provided as needed. All staff selected for interviews were aware that medical staff would be notified of reported PREA allegations and response immediately. Their description of actions taken included notifying the Shift Commander and medical supervisors while keeping the victim safe and separated from the abuser. Per the Health Services Administrator, she confirmed medical staff is on duty 24/7 daily to include weekends. Per the Behavior Health Administrator, as a member of the Sexual Abuse Response Team, and supervisor of mental health, she would be notified of all inmates who report sexual abuse. She added she would report to the facility 24/7 upon being advised.</p> <p>115.82(c) TDOC Index 502.06.3 indicate inmate victims of sexually abusive vaginal penetration, while incarcerated, shall be offered pregnancy tests and timely information about, and access to, all pregnancy-related medical services that are lawful in the community. NWCX houses male inmates only. This provision is not applicable for NWCX.</p> <p>115.82(d) TDOC Index 502.06.3 indicates that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with the investigation. Interviews with medical staff also verified that the services would be provided at no cost. An interview with the alleged victim who was transferred to the local hospital for a forensic medical examination reported he had not been advised of any financial responsibility for the services he received at both the institution level nor outside hospital.</p> <p>Based on the review of policies, documentation, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 1484 701" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.03 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. Medical/Mental Health Follow-up log 4. Interviews with: <ol style="list-style-type: none"> a. NWCX PREA Compliance Manager b. Health Services Administrator and Behavior Health Staff c. Inmates who reported sexual abuse <p data-bbox="240 730 1493 1290">115.83(a) TDOC Index 502.06.3 addresses the requirements of this standard. The facility shall offer medical and behavior al health evaluation and m, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lock-up, or juvenile facility. If the screening process indicates that an inmate has experienced prior sexual victimization, or has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a referral to a medical and/or behavioral health provider within 14 days of the screening. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Interviews were conducted with the NWCX PCM, staff who conduct risk screening, medical and mental health staff. Additionally, the auditor reviewed the NWCX PREA Screening Audit Tool Tracking Log that documented all incoming inmates during the 12-month review period and a random selection of 21 of the 60 inmates' mental health referrals. The NWCX PCM monitors all incoming inmates for confirmation of their initial risk screening, 30-day risk screening, and timely referrals for mental health. Per medical and mental health staff, all incoming inmates are screened by them as part of the intake process and for follow-ups as needed. Per staff assigned to conduct risk screening, all inmates identified as a prior victim or sexual abuse and /or prior aggressors are automatically referred to mental health to be seen within 14 days whether the inmate request to be seen or not. However, upon the inmate reporting to mental health he then has the option to decline mental health services. Review of the random 21 mental health referrals indicated several declined but all were awarded the opportunity within 5 days of the referral being made.</p> <p data-bbox="240 1323 1493 1480">Interviews with mental health and health services staff indicated inmates identified as victims of sexual assault would receive medical and mental health care as medical staff are scheduled 24/7 and the Behavior Health Services Administrator stated when mental health staff is not on duty, she would report to the facility to meet with the inmate victim. Medical staff would continue with follow-up treatment plans per the physician and/or local hospital based on the victim's individual's treatment needs.</p> <p data-bbox="240 1514 1493 1738">Interviews were conducted with 4 inmates who reported sexual abuse at the facility. Two inmates stated they did see medical and mental health after reporting the incident. Both stated they are mental health caseloads. One inmate stated he does not remember anything about the incident, but whatever he said was fake. He stated he was very strong on illegal drugs and was very high when he made the allegation. He continued in stating due to his drug usage at the time, he was staying awake for 5 and 6 days without sleep. He could not recall if he was seen by medical and/or mental health. The fourth alleged victim stated he did not want to see medical or mental health because the incident did not involve touching. The alleged aggressor only attempted to touch him.</p> <p data-bbox="240 1771 1493 2096">115.83(b) TDOC Index 502.06.3 indicates that the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. Per the Health Services the inmate would continue with follow-up services within the facility until their departure. Per medical and mental health staff all TDOC facilities offer follow-up services within all the correctional facilities that are available upon an inmate's transfer. They both indicated a case manager from their department is responsible for organizing and setting up follow-care medical and mental health care for the victim upon his/her release from TDOC. Services include but are not limited to a medical and mental health clinic within their local area that include homeless shelters, food stamps, medical and mental health clinics that are based on a person's income, and food stamps. Inmates would be provided an authorized amount of medication upon release prior to the receipt of services within the community.</p> <p data-bbox="240 2130 1386 2157">115.83(c) Interviews with medical staff and mental health staff, all indicated the level of care provided to the inmate</p>

population is nothing less than equal to the level of care within the communities. TDOC policy does not allow the level of medical and mental health care to go below the community level of care.

115.83(d) & (e) NWCX houses male inmates. Therefore, this provision of the standard is not applicable.

115.83(f) TDOC 502.06.3 states inmate victims of sexual abuse, while incarcerated, shall be offered test for sexually transmitted infections and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care. The investigative reported disclosed the inmate who reported inmate-inmate sexual abuse that include penetration was escorted to the local hospital for a forensic medical examination. A review of his medical records and interview with him, he confirmed he was provided with medication for the prevention of sexual transmitted diseases by NWCX medical staff upon his return to NWCX.

115.83(g) TDOC Index 502.06.3 states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Per mental health and medical staff interviews, the victim would not incur any financial cost for treatment services. Inmates are not held responsible for the financial cost of services rendered. An interview with the 1 inmate who received a forensic medical examination at a local hospital and medical services at the facility level, indicated he has not been advised of any financial responsibility for the medical services he received.

115.83(h) TDOC Index 502.06.3 states all facilities shall attempt to conduct a behavioral health evaluation of all known inmate-on-inmate abusers within 14 days of learning of such abuse history. They shall be offered treatment when deemed appropriate by behavioral health providers. An interview with the Behavior Health Administrator indicated the facility does not offer programs for aggressors. Inmates who elect to enroll in such program would be assigned to DeBerry Special Needs Institution for the sexual offender program. She added one inmate was transferred for the program at his request. She indicated her department offers individual counseling for victims; however, most aggressors are in denial and do not want to accept services. She concluded in stating at no time are inmates required to complete any particular courses and or program in order to receive assistance from staff.

Based on the review of policies, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.

115.86	Sexual abuse incident reviews
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 810 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 959 698" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2-1 PREA Allegations, Investigations, and SART 3. TDOC Sexual Abuse Incident Review Reports 4. Interviews with: <ol data-bbox="240 560 770 698" style="list-style-type: none"> a. Warden b. NWCX PCM c. SART Coordinator/Incident Review Team Member <p data-bbox="240 730 1493 1227">115.86(a)(b)(c) TDOC 502.06.2 states, the facility shall conduct a Sexual Abuse Incident Review Report, CR-3985, at the conclusion of every sexual abuse investigation, including investigations in which the allegation has not been determined as Substantiated, unless the allegation has been determined to be unfounded. Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include the Warden/Superintendent/designee, Associate Warden of Treatment/Deputy Superintendent/Assistant Warden at privately managed facilities, facility and OIC Institution Investigator, line supervisor, and medical/mental health professionals. These individuals are members of the Sexual Assault Response Team (SART) whom duties include but not limited to meeting monthly to discuss and review Substantiated and Unsubstantiated sexual abuse cases. There were 2 Substantiated inmates on inmate sexual abuse findings and 3 Unsubstantiated inmates on inmate sexual abuse findings. There was 0 Substantiated staff on inmate sexual abuse investigative finding and 1 Unsubstantiated staff on inmate sexual abuse investigative finding. However, NWCX conducts an incident review on all PREA investigations to include sexual abuse and sexual harassment with an investigative finding of Substantiated and Unsubstantiated. A summary of the review of the 18 incident reviews were noted as the following: 9 incident reviews did not include the date the incident review was conducted; 4 was documented as reviewed beyond 30 days; 2 did not document being reviewed by sufficient SART members, (only 1 signature noted); 1 was conducted prior to the completion of the sexual abuse investigation; 1 was not documented as conducted.</p> <p data-bbox="240 1258 1437 1317">Two of these cases included Substantiated inmates on inmate sexual abuse investigative findings. Although an incident review was noted as completed, the date the incident reviews were completed was not documented.</p> <p data-bbox="240 1348 1461 1406">Three cases included Unsubstantiated inmates on inmate sexual abuse investigative findings. Although an incident review was noted as completed, the date the incident reviews were completed was not documented.</p> <p data-bbox="240 1438 1490 1532">One staff on inmate sexual abuse case was determined as Unsubstantiated. The investigation was concluded on February 2, 2021, and the incident review was conducted on March 2, 2021. This incident review was the only one conducted timely and within TDOC policy and the PREA standard.</p> <p data-bbox="240 1563 1490 1890">115.86(d) (e) TDOC 502.06.2 requires the team consider if the incident or allegation was motivated by race, ethnicity, gender identity, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or other group dynamics at the facility, that the team examine the area in the facility where the incident allegedly occurred to determine if there are physical plans issues that may have contributed to the incident and assess staffing levels in the area and whether monitoring technology should be deployed or augmented to supplement supervision by staff in these areas. The team is required to prepare and submit a report of findings to the Warden that identifies problem areas, necessary corrective action, and recommendation for improvement. A review of the 18 completed incident reviews completed by the SART indicated there were no documented recommendations made during the incident reviews. However, an area (box) is included on electronic generated form that allows staff to acknowledge the team considered the noted motivations during the alleged sexual abuse and/or sexual harassment incident.</p> <p data-bbox="240 1921 1490 2145">The auditor reviewed 18 incident reviews which identified numerous discrepancies in the completion of the incident reviews. The discrepancies included failure to complete within 30 days, failure to document the date of the incident reviews and failure to document being reviewed by sufficient staff. Although the facility has a procedure to complete an investigation of all reported PREA allegations with an investigative finding of Substantiated and Unsubstantiated findings for sexual abuse and sexual harassment, the incident reviews did not document the date for the of 2 Substantiated sexual abuse findings and 3 Unsubstantiated sexual abuse finding. Therefore, there is no documentation to support the incident reviews which were conducted within 30 days of the investigation findings being determined. Based on the auditor's findings, NWCX "DOES</p>

NOT MEET" the standard 115.86.(a) (b) (c).

Corrective Action Plan: The discrepancies noted during the review of the 18 incident reviews were communicated with the NWCX PREA Coordinator, NWCX PRPC, and TDOC State-wide PREA Coordinator. The facility began the corrective action period during the post-audit phase. Effectively immediate, the TDOC State-wide PREA Coordinator became actively involved in the monitoring and scheduling of all incident reviews. He will attend the incident review via telephone conference. The corrective action period will continue an additional 120 days after the release of the interim report.

Corrective Action Completed:

During the 120-day corrective action period, NWCX completed 6 PREA investigations. The reported allegations included: 2 – inmate on inmate sexual abuse cases with an investigative finding of Unsubstantiated; 1 inmate on inmate sexual abuse case each with an investigative finding of Unfounded; 2 staff -on inmate sexual harassment each with an investigative finding of Unfounded; and 1 inmate on inmate sexual harassment allegation with an investigative finding as Unfounded. Although not required by the PREA standards to include 115.86, NWCX conducts incident reviews on all Unsubstantiated and Substantiated allegations of sexual abuse and sexual harassment. However, due to not meeting the provision of the standard, NWCX conducted an incident review for all reported allegations to include Unfounded.

The completion of the PREA investigations and incident reviews were documented as the following:

1 Staff on inmate allegation of sexual harassment reported on December 10, 2021, with an investigative finding of Unfounded on the date reported. The incident review was conducted on December 21, 2021.

#2 Inmate on inmate allegation of sexual abuse reported on December 8, 2021, with an investigative finding of Unfounded on December 9, 2021. The incident review was conducted on December 20, 2021.

#3 Inmate on inmate allegation of sexual abuse reported on December 27, 2021. The investigative finding was determined as Unsubstantiated on the same date of the reported allegation December 27, 2021. The incident review was completed on January 20, 2022.

#4 Inmate on inmate allegation of sexual abuse reported on December 29, 2021, with an investigative finding of Unsubstantiated determined on the same date of the reported allegation December 29, 2021. The incident review was conducted on January 20, 2022.

#5 Staff on inmate allegation of sexual harassment reported on December 14, 2021, with an investigative finding of Unsubstantiated determined on the same date of the reported allegation December 14, 2021. The incident review was conducted December 20, 2021.

#6 Inmate on inmate sexual harassment reported on January 14, 2022, with an investigative finding of Unfounded determined on the same date of the reported allegation January 14, 2022. The incident review was conducted on January 20, 2022.

A review of the 6 completed incident reviews confirmed that each was completed well within 30 days of the completed investigation. Members of the SART served members of the incident review team that included the following: Health Services Administrator, Behavior Health Administrator, Chief of Security, Chief Counselor, OIC Institution Investigator, NWCX PCM, Associate Warden (T)/NWCX PREA Coordinator, and Line Staff Supervisor.

Based on the review of completed incident reviews and documentation to support they were conducted within 30 days of the completed investigations to include Unfounded sexual abuse and incident reviews for all sexual harassments to include Unfounded, and documented signatures acknowledging the review by the appropriated staff outlined in the standard provision, NWCX meets all provisions of standard 115.86 to include 115.86 (a) (b) (c).

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. 2020 Annual SSV PREA Report 4. Interviews with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator <p>115.87(a) TDOC Index 502.06 states that staff shall collect accurate uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. TDOC shall aggregate the incident-based sexual abuse data at least annually. Per an interview with the State-wide PREA Coordinator, data is collected by the Decision Support: Research and Planning Development Department using the Department of Justice annual reporting format and the set definitions identified in TDOC Index #502.06.</p> <p>115.87(b) TDOC Index 502.06 indicates that the TDOC shall aggregated the incident-based sexual abuse data at least annually. The State-wide PREA Coordinator shall ensure that data collected is securely retained. The TDOC State-wide PREA Coordinator shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.</p> <p>115.87(c) The State-wide PREA Coordinator provided a copy of their most recent 2020 SSV report that demonstrated that the data collected by the facility is at least sufficient to answer all questions on the survey conducted by the Department of Justice, the Survey of Sexual Violence. Per an interview the Department of Justice has not requested a more recent copy of the Agency’s Survey of Sexual Violence.</p> <p>115.87(d) TDOC Index 502.06 states, that TDOC shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews.</p> <p>115.87(e) TDOC Index 502.06 states, “The TDOC State-wide PREA Coordinator shall ensure that data collected is securely retained. TDOC shall make all aggregated sexual abuse data, from TDOC facilities and private facilities with which it contracts, readily available to the public at least annually through the TDOC website.</p> <p>115.87(f) TDOC 502.06 indicates that a report prepared by the State-wide-PREA Coordinator shall be prepared utilizing the Department of Justice annual format. The State-wide PREA Coordinator provided the auditor a copy of the 2020 SSV-2 which demonstrated the information was submitted to the Department of Justice timely and stated the DOJ has not requested a more recent copy of the SVV-2. However, a copy of the 2020-2021 Annual PREA Report was submitted for review.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.88	Data review for corrective action
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 986 701" style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. Agency website 4. 2020-2021 Annual PREA Report 5. Interviews with: <ol style="list-style-type: none"> a. State-wide PREA Coordinator b. Agency Head Designee <p data-bbox="242 730 1485 1160">115.88(a-d) TDOC Index 502.06 addresses the requirement of this standard. The Directive indicates that TDOC staff shall aggregate the incident-based sexual abuse data annually. Maintain review and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. Ensure that all aggregated sexual abuse data is included in an annual report that includes an assessment of the Department's sexual abuse prevention, detection, and response policies, practices, and training; If applicable, identifies Department-wide problem areas or problems within specific correctional facilities; Is used to facilitate corrective action at the Department and correctional facility levels; compares the current calendar year's data and activities with that available from previous years; Assesses the Department's progress in addressing sexual abuse; and is approved by the Commissioner and made readily available to the public through the Department's website. Personal identifiers shall be removed prior to the data being made publicly available. Per interviews with the Agency Head Designee and TDOC State-wide PREA Coordinator, section of the report identifies corrective actions taken. The SART conduct monthly walk throughs within the facility while identifying and submitting any work orders that are required to be completed by the following monthly walk-through of not less than 30 - days. The Commissioner receive a monthly report of all allegations reported at each TDOC facility.</p> <p data-bbox="242 1189 1481 1384">Per the Agency Head Designee, TDOC use the incident-based sexual abuse data to assess and impro sexual abuse prevention, detection and response policies, practices, and training in the following manners. All incidents are reported and investigated, trends are identified (i.e. regarding the time, location, staff involved etc.) As the trends are identified, processes and policies are refined to ensure the adequate addressing of any issues found. If there is a deficiency noted that can be correct with additional train, it is arranged. If there is an issue that needs to be clarified, a memorandum of instruction is issued. The retaliation monitoring conducted for victims, and staff reporter was born out of trends observed.</p> <p data-bbox="242 1413 1477 1507">The State-wide PREA Coordinator confirmed he review the data collected and approval. He submits the comparison and forward to the Commissioner for review and approval via signature. Only then can the report be posted on the Department's website.</p> <p data-bbox="242 1536 1485 1666">The auditor reviewed the website at https://www.tn.gov/correction/sp/prison-rape-elimination-act.html and verified the 2020 – 2021 Annual Report was signed by the Commissioner and published. A review of the report indicated a comparison of 2019-2020 and 2020 – 2021. The report was dated September 29, 2020 (error 2021) and signed by the TDOC Commissioner on October 22, 2021. The report is professionally written and addresses the requirement of this standard.</p> <p data-bbox="242 1695 1474 1756">Based on a review of policy, website, annual report, interview and analysis, the facility is compliant with all provisions of this standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. NWCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. Agency website 4. 2020-2021 Annual PREA Report 5. Interview with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator <p>115.89 (a-d) TDOC Index 502.06 addresses the requirements of this standard. The directive indicates the TDOC PREA Coordinator shall ensure that data collected is securely retained. The TDOC is responsible for completing an annual report and when approved by the Commissioner it is made available to the public through the Department's public website. The report should redact information that would present a clear and specific threat to the safety and security of a prison before publication indicating the nature of the redacted information and related personal identifiers shall be removed prior to being made public. Securely maintain incident-based and aggregate data ensuring only authorized personnel have access to the information. The TDOC State-wide PREA Coordinator shall maintain sexual abuse data for at least 10 years after the date of the initial collection.</p> <p>Per an interview with the State-wide PREA Coordinator, he also indicated the data is securely maintained for at least 10 years in computerized system and only authorized personnel has access. The auditor reviewed the agency website at https://www.tn.gov/correction/sp/prison-rape-elimination-act.html verified the 2020-2021 Annual Report was published. A review of the annual reports indicated there were no personal identifiers included.</p> <p>Based on the review of policy, website, annual report, interview and analysis, the facility is compliant with all provisions of this standard.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 479">TDOC Index 502.06 PREA Implementation, Education, and Compliance was reviewed and meets the requirement of this standard. The directive requires the PREA Coordinator to ensure that Department PREA-related activities comply with federal PREA standards in the following areas, Audits, and Auditing and corrective action. This the third year of the third audit cycle for NWCX. The Agency oversees 10 TDOC facilities and 4 contract facilities. The TDOC website maintained PREA audit reports posted for all facilities during the past audit cycle. The auditor also reviewed the 4-contract facilities' website and confirmed timely submitted PREA reports within the audit cycles.</p> <p data-bbox="229 479 1509 972">The auditor was provided extensive files prior to the on-site audit, for review to support a conclusion of compliance with PREA standards. During the on-site visit, during the pre-audit and post audit phases, the auditor reviewed and received sufficient sampling based on the size of the facility of case records, training records, investigative reports, additional program information and documents. The auditor interviewed an excess of the required number of staff and inmates based on the population and all were knowledgeable regarding PREA requirements that included staff and inmates throughout the Complex. The auditor was given access to and the opportunity to tour and visit all areas of the Complex to include the Site 1, TRICOR, Site 2, Annex, Warehouse, and Maintenance. All supervisory, non-supervisory, upper management staff to include Warden, Associate Warden Security, Facility Fiscal Director, Associate Warden (T)/Facility PREA Coordinator, NWCX PCM, random staff, random inmates/juveniles and targeted group inmates were conducted on-site within an office that ensured privacy. Inmates confirmed their observation of the notice of audit posted throughout the institution which noted the procedure to submit confidential correspondence to the auditor. Per an interview with mailroom staff, inmates were allowed forward confidential correspondence to the auditor in the same manner as mail addressed to legal counselor. The auditor received 5 letters from the inmate population, and all were selected for interview. The auditor did not receive any correspondence from staff.</p> <p data-bbox="229 972 1509 1030">Based on the above, the facility has demonstrated compliance with all provisions of this standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Per TDOC directives and standard requirements, TDOC ensures all final reports will be published on their websites to be available to the public. A review of the TDOC website at www.tn.gov/correction/sp/prisonrape-elimination-act.html contained the final PREA reports for the 10 TDOC facilities and 4 contract facilities. These final reports were published on the agency's website within 90 days of issuance.</p> <p>Based on the above, the facility has demonstrated substantial compliance with this standard.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	no
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	no

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	no
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes