

PREA Facility Audit Report: Final

Name of Facility: Women's Therapeutic Residential Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/02/2022

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: 06/02/2022

AUDITOR INFORMATION	
Auditor name:	Dawson, Debra
Email:	dddawsonprofessionalaudits@gmail.com
Start Date of On-Site Audit:	04/24/2022
End Date of On-Site Audit:	04/26/2022

FACILITY INFORMATION	
Facility name:	Women's Therapeutic Residential Center
Facility physical address:	480 Green Chapel Road , Henning , Tennessee - 38041
Facility mailing address:	

Primary Contact	
Name:	Shakera Kelley
Email Address:	Shakera.E.Kelley@tn.gov
Telephone Number:	731 738 5044

Warden/Jail Administrator/Sheriff/Director	
Name:	Stanley Dickerson
Email Address:	Stanley.C.Dickerson@tn.gov
Telephone Number:	731 738 1633

Facility PREA Compliance Manager	
Name:	Brandy Duncan
Email Address:	brandy.m.duncan@tn.gov
Telephone Number:	O: 731-738-5044

Facility Health Service Administrator On-site	
Name:	Jennifer Fike
Email Address:	Jfike@teamCenturion.com
Telephone Number:	731 738 1562

Facility Characteristics	
Designed facility capacity:	1196
Current population of facility:	880
Average daily population for the past 12 months:	990
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	18-77
Facility security levels/inmate custody levels:	Min. - Close
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	143
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	75
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	350

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	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
2	<ul style="list-style-type: none"> • 115.17 - Hiring and promotion decisions • 115.31 - Employee training
Number of standards met:	
43	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-04-24
2. End date of the onsite portion of the audit:	2022-04-26

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:	The Shelby County Crime and Victim Rape Crisis Center, Director Sandy Broomley and Facility Victim Advocate Counselor Ray

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1082
15. Average daily population for the past 12 months:	917
16. Number of inmate/resident/detainee housing units:	802
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:	802
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:	21
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:	14
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:	4
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:	56
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:	0
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:	3
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:	53
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:	152
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:	350
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:	98
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:	28
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input 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?	An inmate roster was requested in alphabetical roster and noting the inmates' assigned housing units, arrival date, race
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:	15
<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:	2
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>Based on the information provided by staff to include mental health, although several inmates had mental health issues, they were not identified to meet this targeted group.</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>Based on the PAQ, observation and communication with staff, no inmates were identified to the definition of low vision at a level that exceeded the use of prescription eye glasses. None was identified and/or appeared to be blind during the tour and/or interaction with the inmate population.</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>2</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>2</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>2</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>2</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>2</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:	5
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 the PAQ and interviews with the Warden, Associate Warden (T)/Facility PREA Coordinator, Supervisory staff assigned to segregation, no inmates for risk of sexual victimization.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	15
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<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.

<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>24</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><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>
<p>a. Explain why it was not possible to interview the PREA Compliance Manager:</p>	<p>The facility 's assigned PREA Compliance Manager was placed on extended unscheduled leave of absence during reudleave of unschedu aon exten</p>

<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 type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input 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>3</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>Mental health staff are also contract staff</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	2	0	2	0
Staff-on-inmate sexual abuse	1	0	1	0
Total	3	0	3	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	3	0	3	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	3
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input 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:	2
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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>3</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>3</p>

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The auditor did not include the review of sexual harassment and/or sexual abuse investigative casefiles that include criminal investigations, due to there were 0 reported allegations during the review period that included criminal charges. However, the auditor did include in the review sexual abuse investigations from 2019 that include criminal charges.</p>
<p>SUPPORT STAFF INFORMATION</p>	
<p>DOJ-certified PREA Auditors Support Staff</p>	
<p>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.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>Non-certified Support Staff</p>	

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

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

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

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<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 1283 757" style="list-style-type: none"> 1. WTRC 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. WTRC Organizational Chart and TDOC Organization Chart 5. WTRC Index 502.06.2-1 PREA Allegations, Investigations, and SART 6. Interviews with: <ol data-bbox="240 674 639 757" style="list-style-type: none"> a. TDOC State-wide PREA Coordinator b. WTRC PREA Coordinator <p data-bbox="240 788 1481 1115">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 go provide a safe, human, and appropriately secure environment, free from threat of sexual abuse and sexual harassment for all inmates, by maintain a program of prevention, detection, response, investigation, and tracking of all alleged and substantiates sexual assaults and sexual harassment. TDOC has a zero tolerance for incidences of sexual abuse 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 1146 1481 1440">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 structure 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 1471 1485 1700">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 1731 1485 2159">WTRC 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 (SART). The WTRC PREA Compliance Manager (PCM) was placed on unscheduled leave during the pre-audit phase and remained throughout the post audit phase. Therefore, the WTRC Associate Warden/PREA Coordinator fulfilled the roles and responsibilities of both the WTRC PREA Coordinator and the facility PCM. The Head of Agency Designee, State-wide PREA Coordinator and Associate Warden/Facility PREA Coordinator indicated monthly PREA walks, meetings, and reports are conducted in accordance with the identified TDOC policies and inspection standards such as why an incident occurred in a particular area, and what corrective actions could be applied if applicable. SART review security equipment and submit recommendations for mirrors and video placement that serves as a level protection for inmates from sexual assault or sexual abuse during the monthly walk through. Monthly SART inspections for each of the 12-month review periods were submitted. PREA unannounced rounds were documented, review of completed PREA investigations were included, areas of the facility toured and by whom was documented, and findings were noted within the reports. A work order is submitted as needed and is required to be completed within 30 days of submission. Designated members of the SART serve as the victim advocate and all members of the SART participate in</p>

conducting Incident Reviews within 30 days of the completed PREA investigations to include sexual harassment and sexual abuse. Documented observation of compliance and/or non-compliance to include corrective measures taken of standards 115.11 through 115.86 confirmed.

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. An interview with the TDOC State-wide PREA Coordinator indicated he has sufficient time to manage all PREA related responsibilities as required per his position as the PREA State-wide Coordinator. He added, there are currently eleven PREA Compliance Managers while one is assigned to each TDOC facility. He maintains a continuous open line of communication and interaction through emails, text, phone calls, and monthly PREA conference calls. He continued in stating, if any issues arise that may jeopardize a facility's compliance with the PREA standards, he immediately contacts the affected facility to discuss what obstacles they are encountering and collectively apply corrective measures to ensure compliance. He identifies areas of concerns and provides guidance and updates on policy and/or procedure changes. Achieving compliance with all provisions of the PREA standards is his primary focus. The auditor identified the State-wide PREA Coordinator as actively involved with the TDOC facility while displaying a positive and productive role in providing training, guidance, and assistance to the Associate Warden/Facility PREA Coordinator during the audit process in the submission of documentation.

115.11(c) The Associate Warden of Treatment (T) at each TDOC facility also serves as facility PREA Coordinator and reports directly to the Warden. All TDOC facilities also have 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 that identifies the WTSP PCM position as a dedicated position who reports directly to the Warden and currently holds the position of Administrative Secretary. The WTRC PCM was placed on extended unscheduled leave during the pre-audit phase and remained on leave throughout the post-audit phase. The WTRC Associate Warden (T)/Facility PREA Coordinator served as the Acting WTRC PCM during her absence. She stated she ensures the duties of a PCM is a priority and is always completed timely. She coordinates efforts to ensure monthly meetings are scheduled while conducting walkthroughs that includes thorough inspections and a discussion of each finding applying corrective measures as needed. In an effort to ensure staff and inmate knowledge and/or refresher training in regards to PREA, she conduct orientation with all newly arriving inmates, provide refresher PREA training to security staff during shift briefings, provide refresher PREA education to non-security staff during various staff meetings, and ensure PREA information is posted and accessible to all staff and the inmate population.

Based on the auditor's analysis of the information collected through review of policies, monthly SART meeting minutes, interviews with the TDOC Agency Head Designee, TDOC State-wide PREA Coordinator, WTRC PREA Coordinator/ Acting WTRC PCM, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. Interviews with the following: <ol style="list-style-type: none"> a. State-wide PREA Coordinator/ Agency Contract Monitor <p>WTRC 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.</p> <p>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 four contracts for the confinement of inmates with a private agency (Core Civic). Interview with the State-wide PREA Coordinator who is also the Contract Monitor indicated he communicate with the contracting agencies and address 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 contracts is documented.</p> <p>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 noted as August 11, 2021.</p> <p>Based on the review of the contracts, review of 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="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 1493 465">115.13(a) (b) (c) TDOC Index 502.06 states Each facility shall develop a staffing pattern that provides for the adequate levels of staff and monitoring to protect inmates against sexual abuse. By July 1st of each calendar year each facility shall assess, determine, and document whether adjustments are needed to the facility staffing plan. This review will follow the guidelines of PREA Standard 15.13 (a), (b) and (c). This review shall be completed on the PREA Annual Staffing Review form CR-3964. A copy of the WTRC 2021 Staffing Plan was presented for review and included the review of all elements per the standard provision. The staffing plan review is documented on an agency-wide standardized form.</p> <p data-bbox="242 499 1461 656">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 staffing plan considers all the criteria required for a staffing plan as required in this standard and provides areas for narrative, any recommendations. 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.</p> <p data-bbox="242 689 1485 813">An interview with the Warden explained the staffing plan is reviewed annually by himself, the Chief of Security, Facility PREA Coordinator, TDOC PREA Coordinator and the Associate Warden of Security. He is required to submit a request for any changes to the post assignment rosters to the Assistant Commissioner of Prisons for approval in advance of changes. The review of the Staffing Plan is always submitted to the Central Office not later than July 1st of each year.</p> <p data-bbox="242 846 1477 969">Interviews with the TDOC State-wide PREA Coordinator, Warden and WTRC Associate Warden (T)/PREA Coordinator indicated the facility does conduct a staffing plan review at least annually. WTRC provided a copy of the Staffing Plan. The Staffing Plan was reviewed by the Chief of Security, Associate Warden of Security, Associate Warden of Treatment/ Facility PREA Coordinator, Warden, and a final review by the TDOC State-wide PREA Coordinator on June 28, 2021.</p> <p data-bbox="242 1003 1485 1261">A copy of the WTRC Post Assignment Roster identifies the staffing level while also identifying correctional posts as critical, non-critical and those posts that are to be rotated after 4 hours. The WTRC Master Post Assignment Schedule, CR3370 was submitted by the WTRC Warden to the Assistant Commission of Prison for approval on January 4, 2021. He is required to submit a request to the Assistant Commission of Operations in order to add and/or remove a correctional post. These changes were approved by the Assistant Commission of Prison on March 5, 2021. Per the Warden, the staffing pattern is designed to have extra staff available for sick leave, annual leave and providing coverage for inmates on medical trips. staff are scheduled overtime to provide coverage for unassigned security posts rather than the facility being non-compliance with the staffing plan. Any deviations from the staffing plan would be documented on the daily roster with an explanation.</p> <p data-bbox="242 1294 1430 1384">The monthly unannounced PREA walk-throughs conducted by the SART assist in the monitoring of the staffing plan by identifying possible blind spots, security staffing level on assignments, and the review of PREA investigation during the incident reviews.</p> <p data-bbox="242 1417 1469 1641">Security supervisors are required to document all instances in which the Staffing Plan is not followed. The facility identified the most common reason for deviation from the Staffing Plan would be due to staff shortages. However, overtime is always given, and upper-management staff often fill positions that prevent vacating critical posts. The auditor requested security assignment rosters for the first Saturday of each month for the second shift and the second Saturday of each month for the first shifts for each month during the 12-month review period. The review confirmed staff was reassigned and/or overtime was awarded for positions identified as critical upon being vacated due to unscheduled leave, and/or reassignment of previously assigned staff. No discrepancies were identified.</p> <p data-bbox="242 1675 1469 1798">The auditor randomly selected security staff rosters for the second stature and first Monday of each month for review of compliance with the approved staffing plan. The review confirmed there were no areas of non-compliance with the staffing plan. All critical posts were filled either by overtime and or the reassignment of staff from a non-critical post. Throughout the on-site tour it was noted that staffing was adequate and prevalent throughout the institution.</p> <p data-bbox="242 1832 1485 2157">115.13(d) TDOC #502.06 states Staff, Security Shift Corporal and above, Unit Managers, and /or Administrative Duty Officer, shall conduct and document unannounced round to identify and deter sexual abuse and sexual harassment. The unit/program Logbook shall be annotated with Unannounced PREA Inspection/Security Check when signing into the unit /program area. This documentation shall be made in red ink only. Any staff member alerting other staff members that these unannounced rounds are occurring will be subject to appropriate disciplinary action. Throughout the tour, the auditor reviewed logbooks in all housing units for the previous 12 months and confirmed unannounced rounds were conducted not less than once on each shift by supervisory staff. The documentation of unannounced rounds was noted in red ink. Confirmation of supervisory rounds were also indicated by supervisory staff during their interviews and the security staff assigned to the various housing units. Each supervisory staff stated they alternate their rounds schedule and route regularly that prevents staff and inmate awareness of supervisory staff approaching their housing unit and/or work site. As they are in</p>

possession of entry keys to all buildings to include housing units, they are allowed to enter without prior awareness to the staff and/or inmates.

Based on the review of the annual WTRC Staffing Plan, the master post assignment roster, documentation of unannounced PREA rounds, review of daily correctional rosters that confirm no discrepancies in meeting the mandate of the facility's Staffing Plan and interviews, WTRC as demonstrated it does meet all provisions of the standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="231 190 1508 257">Auditor Discussion</p> <p data-bbox="231 257 1508 324">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="231 324 1508 705" style="list-style-type: none"> <li data-bbox="231 324 1508 369">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="231 369 1508 414">2. TDOC Index 506.14.2 Housing, Programming of Youth Inmates <li data-bbox="231 414 1508 459">3. Observation during onsite tour <li data-bbox="231 459 1508 504">4. Interviews with the following: <ol data-bbox="231 504 1508 705" style="list-style-type: none"> <li data-bbox="231 504 1508 593">a. Associate Warden (T)/Facility PREA Coordinator <li data-bbox="231 593 1508 638">b. Staff <li data-bbox="231 638 1508 705">c. Inmates <p data-bbox="231 705 1508 907">TDOC 506.14.2 indicates for the purpose of the policy only, juvenile offenders are person between the ages of 16 and 18 who are sentenced and committed to the TDOC by court having adult criminal jurisdiction. Review of the PAQ, policy and interviews confirmed the facility does not house youthful inmates. The WTRC PAQ, and Associate Warden (T)/Facility PREA Coordinator identified the age range of inmates housed at the facility are between 18-778 years old. Interviews with staff and the inmate population confirmed no awareness of inmates housed at the facility under the age of 18 years old.</p> <p data-bbox="231 907 1508 996">Based on the review of the PAQ, policy, observation, interviews and analysis that the facility does not house inmates under the age of 18 years old and therefore, has demonstrated compliance with all provisions of this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, Compliance 3. WTRC Index 112.08-1 Personal Hygiene Resources for Inmates 4. TDOC Index 506.06-1 Searches 5. TDOC Index 113.37 Gender Dysphoria 6. TCA Lesson Plan- Personal Searches 7. Training records 8. Observation while on-site 9. Interviews with: <ol style="list-style-type: none"> a. Random staff b. Inmate Population <p>115.15(a) (b)TDOC Index 502.06 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 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 indicates strip searches and visual body cavity searches may authorized by the Warden/Superintendent on a routine basis for all inmates participating in certain activities, including but not limited to returning from pass or furlough, transportation runs, transfer, visiting, work details, institution al lockdowns, when conducting specific target cells, searches, etc. Institutional policy /post order should stipulate areas/activities where routine strip and/or visual body cavity searches will occur. Strip/visual cavity searches based on reasonable suspicion/probable cause requires a CR-2156 to be completed by the Warden/Superintendent/designee. The PAQ listed zero cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months. 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. Forty-three formal and five informal interviews with the inmate population confirmed they had not been subjected to cross-gender viewing by staff during a strip search or visual cavity search.</p> <p>115.15(b) TDOC Index 506.06 states, “Female correctional officers may frisk search inmates of both genders”. Male correctional officers may only frisk search male inmates. Interviews with staff and inmate population confirmed all inmate searches are conducted by female staff only.</p> <p>115.15(c) TDOC Index 506.06 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 in the past 12 months.</p> <p>115.15(d) Per WTRC Index 112.08-1 There shall be sufficient shower facilities in the housing /sleeping areas to permit inmates in the general population to shower and maintain proper personal hygiene at least daily. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. WTRC will require all male staff members to announce their presence on housing units before entering. This is to ensure inmates are able to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing breast, genitalia, or buttocks except in exigent circumstances or when such viewing is incidental to routine cell check. No officer shall stand and look into an inmate’s cells while they are performing these functions. There will be instances where incidental viewing will happen (security checks, rounds, etc.) but staff members must use good judgement in these instances. 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 through the utilization of doors. All housing units were observed to have doors in place that allow inmates to use both the toilet, and shower without being observed by staff of the opposite gender. The auditor conducted 43 random and targeted group inmate interviews and 5 informal inmate interviews. All indicated they have not</p>

incurred incidents in which they considered their privacy was violated while changing clothes, subjected to visual searches, use of restroom and/or during showering by staff of the opposite gender.

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. Additionally, during 38 formal interviews with the inmate population, all acknowledged the male staff announce themselves when entering the housing unit. Staff interviews also confirmed it is a common practice of the male staff to announce themselves prior to entering the housing units.

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 and/or physically examining transgender or intersex inmates for the sole purpose of determining genital status. There were no inmates identified as transgender and/or intersex at the facility during the review period and/or site visit.

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 TDOC Basic Correctional Academy Basic Correctional Officer Training Program Curriculum "Personal Searches (BCOT) was revised as of May 22, 2021. The course includes but is not limited to the following: 1) frisk search; 2) strip searches; 3) visual body cavity searches; 4) gender dysphoria and person searches; and Cross-gender searches. The course is presented to all new hires within the TDOC security department and meets the provision of this standard. During random staff interviews, staff stated they completed the training and provided appropriate response in conducting searches of transgender and /or intersex inmates to include not conducting such searches for the sole purpose of determining an inmate's genital status, allowing the transgender and/or intersex inmate to identify the staff's gender to conduct the search, and conducting the search in a less intrusive manner as possible. The Pre-Audit Questionnaire noted that 100% of staff have been trained. However, the facility was unavailable to provide supporting documentation that security staff hired prior to the implementation of the PREA standards received the required training. Therefore, the course was presented to ALL security staff during each shift briefing by an authorized trainer and/or their shift commander during the post-audit period. At the completion of the personal search training presentation, staff acknowledged receipt of personal search training via their signature. There were no inmates identified as transgender and /or intersex at the facility during the review period. However, staff was knowledgeable that inmates identified as such are allowed to identify the gender of staff to conduct pat and visual searches.

Based on the auditor's analysis of the information collected through review of policies, TDOC Personal Search Training, security staff completion of personal search training, interviews with random staff, inmates, observation during on-site visit, and opposite staff announcement posters, it is concluded that WTRC 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 1490 499">115.16(a)(b) TDOC Index 502.06 states staff shall ensure 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. TDOC Index 103.10.1 policy indicates that an assessment during the intake process will determine if the inmate requires language or literacy assistance.</p> <p data-bbox="240 504 1465 698">The review of "Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities (As required by the Civil Rights Act of 1964) outlines the specifics for ensuring methods are identified for communicating with inmates who are LEP. The plan identifies the duties of staff within the various facility departments to include but not limited to medical/mental health services, classification assignment and hearing; disciplinary procedures, grievance procedures, education /programs. Housing assignment, court appearances, parole hearings program availability. The plan lists outside agencies that are available to provide a variety of services for inmates with a range of disabilities to include LEP.</p> <p data-bbox="240 728 1490 956">The WTRC developed a Limited English Proficiency (LEP) Plan to ensure LEP inmates' access to programs, services and activities as mandated by the Civil Rights Act of 1946 are adhered to. Component 1 identifies upon arrival at the institution, inmates will be evaluated at Intake to determine nationality, and language proficiency, Judgment order will be reviewed. An inmate who does not understand verbal instructions will be assessed using the A Language Identification Guide to determine the inmate's primary language. The name(s) of the inmates(s) requiring LEP services will be documented and reported to the Associate Warden of Treatment immediately. An approved interpreter will be provided, if necessary, and documentation of the interpreter's name will be noted on TOMIS (LCDG).</p> <p data-bbox="240 985 1431 1115">Upon arrival during the intake process inmates who are identified as LEP are shown an AVAZA Language Services Identification Guide and asked to identify their language. The counseling services team evaluates the inmates' ability to understand without an interpreter during the orientation/classification assignment and hearings. If it is evident that the inmate's knowledge of the English language is insufficient, then interpretation services are provided as needed.</p> <p data-bbox="240 1144 1458 1308">The Associate Warden (T)/Facility PREA Coordinator submitted a memorandum addressed to all staff that identifies available resources to assist in translation services provided to inmates identified as deaf/hard of hearing, low vision, and Limited Proficient English. When an interpreter is used, a contact note shall be made in TOMIS conversation LCDG. The memorandum identifies the Associate Warden (T)/ PREA Coordinator assigned at the West Tennessee State Penitentiary (WTSP), and a WTRC staff member as authorized translators in the Spanish language.</p> <p data-bbox="240 1337 1490 1597">The Tennessee Language center is a telephonic interpreter that can be accessed by dialing 877-346-1674 from an institution phone upon providing the required authorized information that incur a minimum cost for usage. Over 200 languages are available to facilitate most every communication that could be encountered by staff. When an interpreter is used, a contact note is required to be made in ETOMIS conversation LCDG identifying the translator and the services provided. A telephonic interpreter was utilized to provide translation services in the language of Amhric during the review period. The Contact Notes documented the date and time of service and reason for usage of the interpreter was noted in the inmate's Contact Notes within the TOMIS. However, the most frequent translation services are used at the facility level in the Spanish language and are provided by staff.</p> <p data-bbox="240 1626 1490 1821">An Interagency agreement between the State of Tennessee Department of Corrections and the University of Tennessee was entered into on October 1, 2020, to provide interpretation and translation services. External resources available to the institution are provided by the University of Tennessee, Martin (Ripley Campus) to interpret the necessary rules and policies to any inmate who is Spanish speaking. If communication is needed for an emergency medical issue to a family emergency to a specific hearing impaired, blind, deaf, and/or mute inmate, the Jackson Center for Independent Living for translation services.</p> <p data-bbox="240 1850 1490 2087">The TDC Agency Head Designee stated in response to the agency's establishment of procedures to provide inmates with disabilities and inmates who are LEP equal opportunities to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and respond to sexual harassment, she acknowledged these programs can always be strengthen. However, 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's' PREA program. Contracts exist for medical, mental health and translation services to provide service to these offenders. Offenders are identified at orientation with a particular need and are given information related to issues they might experience related to PREA.</p> <p data-bbox="240 2116 1490 2143">The following inmates were identified and interviewed within this standard: 2 - Limited English Proficient (LEP); 2 - physically</p>

disabled; 2 - hard of hearing. The Associate Warden (T) assigned to the West Tennessee State Penitentiary provided translation services in the Spanish language for the auditor during the interview process with the 2 -Limited English Proficient inmates. Interviews with inmates identified as hard of hearing and with physical disabilities indicated they were provided PREA education in a manner they were able to fully comprehend and was aware of how to report allegations of sexual abuse and/or sexual harassment. The two inmates identified as LEP (Spanish) confirmed they receive PREA education in their first language Spanish.

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. TDOC 103.01 stated "No institution or community supervision office shall rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties or the investigation of an inmate s' allegations under CFR 115.64 and Policy #502.06.2

A review of the 6 PREA investigations identified all allegations of sexual abuse and/or sexual harassment was reported by the alleged victim herself, by a third party, and/or via the PREA Hotline. None was reported as using a translator. Interviews with both random and specialized staff confirmed they would contact their supervisor if they were unable to communicate with an inmate identified as LEP upon determining the inmate was attempting to report a PREA allegation.

Based on the auditor's analysis of the information collected through review of policies, Translation Services Documentation and Contact Notes, WTRC Limited English Proficient Plan, interviews with Agency Head Designee, staff, inmates identified as LEP, those with disabilities, random staff, staff who provide translation services, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Exceeds Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 813 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 331 874 757" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 301.04 Job Requirements 3 TDOC PREA Self Declaration Forms 4. TDOC PREA Questionnaire for Prior Institution Employees 5. Hiring and Promotional Records 6. Criminal History Background Records Check Documentation 7. Interview with: <ol data-bbox="240 730 499 757" style="list-style-type: none"> a. Human Resource Staff <p data-bbox="240 790 1485 1182">115.17(a) (b) 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 for 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 any contractor, who may have contact with inmates. who: a) Has engage in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. b) has been convicted of engaging or attempt to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or;) has been civilly or administratively, adjudicated to have engaged in activity described in (b) above. d) The department shall consider any incident 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. A review of the policy confirms it meets the provision of the standard. The Department shall consider any incidents of sexual harassment in determining whether to hir or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> <p data-bbox="240 1216 1481 1406">The PAQ identified 143 staff who were hired during the 12-month review period. This number was later discovered to be incorrect. The correct number of new hires were 26. The auditor randomly selected 4 new hires and 20 staff who received promotions for confirmation of a PREA Self-Declaration for Sexual Abuse /Sexual Harassment, CR-3819. The review confirmed the agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, who may have contact with inmates. Each of the review files contained the submission of the completed PREA Self-Declaration for Sexual Abuse /Sexual Harassment, CR-3819.</p> <p data-bbox="240 1440 1457 1597">Per the Human Resource Administrator, all current staff are required to complete the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 annually during their birth month. Contract staff are required to submit a new form in July during their scheduled annual background check. Additionally, prior to staff requesting a promotion are allowed to entrance for the interview, they are required to complete an updated PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819. The submission of false information will result in disqualification and/or termination.</p> <p data-bbox="240 1630 1489 1989">115.17 (c) (d) TDOC Index 301.04 identifies procedures and measures to be completed by the human resource staff when conducting background checks. A National Crime Information Center (NCIC) criminal history record checks shall be conducted on all prospective department, contract, and TRICOR employees and fingerprints shall be taken and processed on all new and/or prospective staff assigned to a safety sensitive position. The NCIC criminal history record check shall be conducted prior to employment. Such inquiries will be made to determine whether there are past pending criminal matters that would adversely impact the TDOC's mission. Consistent with Federal, State, and local law, the TDOC will 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. This information shall be documented on PREA Questionnaire for Prior Institution Employers, CR-3962. Additionally, unless prohibited by law, the TDOC shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.</p> <p data-bbox="240 2022 1485 2145">The Human Resource Manager indicated as a shared service department for both WTRC and the West Tennessee State Penitentiary, her department performs background checks for both facilities. Additionally, her department conducts staff background checks for other TDOC facilities. TDOC utilized the NCIC to conduct all background investigations for new hires. The PAQ identified 143 staff who were hired during the 12-month review period. This number was later discovered to be</p>

incorrect. The correct number of new hires were 26. The auditor randomly selected 4 new hires. The PAQ identified 36 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. However, this number was incorrect. The correct number was identified as 4 not 36. These contracts are identified as Aramark (food service), Medical (Centurion), TRICOR (industries) and Mental Health (Centurion). The auditor was presented with a staff roster for these departments that identified new hires. The following new hires within each department were selected for confirmation of background checks as noted: medical -11; mental health -10; Aramark – 5; and Volunteers -38. The review confirmed a background check was completed for each requested staff prior to employment and/or volunteer services with the inmate population.

115.17 (e) TDOC Index 301.04 indicates current employees will be required to submit to an annual background check. The check is to be completed by the end of the month in which the employee's birth date occurs. The Human Resources Offices for the TDOC work locations will be responsible for compiling a monthly list of employees who have birthdays with each month. Once the list is developed, the information is to be forwarded to the appropriate NCIC operator as indicated by the 25th of the month preceding the birth month in which the checks are to be completed.

The Human Resource Manager indicated as a shared service department for both WTRC and the West Tennessee State Penitentiary, her department performs all new hires and annual background checks for both facilities. Additionally, her department conducts staff background checks for other TDOC facilities. TDOC utilized the NCIC to conduct all background investigations for new hires and annually for current staff. She added an annual background check is completed on all TDOC staff during their birth month. The human resource staff forward an email to each employee and their supervisor prior to the 20th of staff's birth's month informing them that an annual background check will be conducted, and they are required to submit an annual PREA Self-Declaration for Sexual Abuse /Sexual Harassment, CR-3819 to ensure compliance with PREA Standard. The auditor utilized a roster provided by the human resource department to select 20 staff for confirmation of an annual background check. Documentation supporting a criminal background investigation was completed through the NCIC for each of the selected 20 staff during the 12-month review period although they were hired within the agency in prior years.

(f) TDOC Index 301.04 indicates 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. The PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 requires staff to respond to the following questions: a) Has engage in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? b) has been convicted of engaging or attempt 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) Have you ever been civilly or administratively adjudicated to have engaged in sexual activity, sexual abuse, or sexual harassment? Per the Human Resource Manager, if an individual provides incorrect information in response to the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, they would automatically to disqualified for consideration of employment.

The PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, is a section of the application process for new hires and an annual requirement of all TDOC staff, contract and volunteers in addition to a current employee request for promotion. They were provided for the following: 4 -TDOC staff, 11- medical; 10- mental health; 5 -Aramark; and 38 – Volunteers and 20 – staff promotions.

115.17 (g) TDOC Index 301.04 indicates Material omissions regarding misconduct described in subject (a) above or the provision of materially false information are grounds for termination. The Human Resource Administrator did not identify any staff as being terminated for material omissions in relationship to PREA.

115.17 (h) TDOC Index 301.04 states Consistent with Federal, State, and local law, the TDOC will make its 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. An interview with Human Resource Manager 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.

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 while having procedures in which self are required to self-report annually and per the request for promotion a current PREA Self-Declaration of Sexual Abuse/Sexual Harassment identifying their involvement within the provision of this standard. Specifically, TDOC policy requires, and the facility ensures a background check is completed annually on all TDOC staff during their birth month in addition to all contract staff annually and on a yearly basis each staff to include volunteers and contract are required to sign a new PREA Self-Declaration of Sexual Abuse/Sexual Harassment form.

115.18	Upgrades to facilities and technologies
	<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 style="list-style-type: none"> <li data-bbox="240 385 767 412">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 501 424 528">2. Interviews with: <ol style="list-style-type: none"> <li data-bbox="240 618 405 645">a. Agency Head <li data-bbox="240 734 347 761">b. Warden <li data-bbox="240 851 791 878">c. WTRC Associate Warden/Facility PREA Coordinator <p data-bbox="240 967 1481 1057">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.</p> <p data-bbox="240 1088 1465 1245">Per the TDOC Owner Project Requirement for Designers dated 2021-2022, notes "The Designer shall provide as a part of the DDP phase submission documentation that the design team has reviewed the facility design and/or renovation modifications with regards to PREA related issues with TDOC. TDOC identified issues are to be reflected in DDP and subsequent phase documents. Meeting minutes should reflect "blind space" issues, camera locations. updating of existing monitoring systems to assist in PREA compliance requirements.</p> <p data-bbox="240 1276 1493 1505">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 American Correctional Association (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 1536 1437 1626">The Warden explained when planning substantial modifications to facilities the agency considers PREA requirements to relevant blind spots in building plans. There has been no substantial expansion or modification of the existing facility at WTRC since the previous PREA audit completed on June 8, 2019.</p> <p data-bbox="240 1657 1445 1724">115.18 (b) An interview with the Warden and Associate Warden /Facility PREA Coordinator confirmed the facility has not received a video upgrade and/or any additional cameras since the previous PREA audit.</p> <p data-bbox="240 1756 1477 1845">Based on the review of policies, observation during site -visit, auditor's analysis, and interviews with the Agency Head Designee, Warden and Facility Associate Warden (T) / PREA Coordinator, 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. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Office of Investigation and Conduct Evidence Protocol 3. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy and Community Support Services for PREA Victims 4. TDOC Index 502.06.2-1 PREA Allegations, Investigation and Sexual Abuse Response Team (SART) 5. WTRC Index 502.06.2-1 PREA (SART) 6. MOU with The Shelby County Crime Victims & Rape Crisis Center (CVRCC) 8. TDOC Operation Protocol 9. Interviews with: <ol style="list-style-type: none"> a. Jackson General Hospital Emergency Room Charge Nurse b. WTRC Facility Victim Advocate c. Warden d. CVRCC Director e. WTRC Associate Warden (T)/Facility PREA Coordinator f. OIC Special Agent and Institution Investigator g. Inmates Who Reported Sexual Abuse h. Random Staff <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>Random staff confirmed knowledge of the agency's and WTRC protocol for obtaining physical evidence upon an inmate reporting an allegation of sexual abuse. All confirmed they would separate the alleged victim and aggressor and secure the identified area immediately. They would advise the victim and /or aggressor not to dispose of any physical evidence, and</p>

applicable DNA. Their supervisor and/or the shift commander would be immediately notified, and the victim would be escorted to medical. Each stated at that point, the incident would be taken over by the shift commander. Staff identified the investigative staff as the OIC Institution Investigator, Facility Internal Affairs Investigator, and/or the Associate Warden (T)/Facility PREA Coordinator. Although the Associate Warden (T)/Facility PREA Coordinator is not assigned to conduct the investigations, he is within the chain of notification of reported allegations. However, the OIC Institution Investigator and WTRC Internal Affairs does complete investigations and have completed the required investigative training by standard 115.34.

115.21(b) TDOC has developed an appropriate protocol to coordinate appropriately with the most recent edition on the U.S. Department of Justice's 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 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, SART members that includes medical staff and the OIC institution Investigator shall determine if SAFE/SANE response is applicable 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 WTRC Associate Warden (T)/ Facility PREA Coordinator, Health Services Administrative, Director of Nursing, and the Behavior Health Administrator, each confirmed WTRC is scheduled to utilize the Jackson-Madison County General Hospital located at 620 Skyline Drive in Jackson, TN 38301, phone number (731) 541-5000, for all forensic examinations. Although three sexual abuse allegations were reported during the review period, none involved sexual penetration and/or required the completion of a forensic medical examination. An interview was conducted with the Jackson-Madison County General Hospital Emergency Room Charge Nurse and Case Manager. Both confirmed although SANE is not regularly scheduled during each shift, a SANE is always on-call and normally reports to the hospital within an hour of being notified. The Emergency Room Charge Nurse continued in stating, in such circumstances where a SANE is not available, the examination would be performed by other qualified medical practitioners.

115.21(d) TDOC established a Memorandum of Understanding (MOU) with The Shelby County Rape Crisis Center. The final approval signature was noted as September 9, 2015. The Shelby County Rape Crisis Center have since changed its name to The Shelby County Crime Victims & Rape Crisis Center (CVRCC). Per interviews with the TDOC State-wide PREA Coordinator and Director of CVRCC, the MOU remains in effect. The CVRCC's Director confirmed services available to victims of sexual abuse includes: 1) Accompaniment during forensic medical exam; 2) Accompaniment during investigatory interviews and court proceedings; 3) Emotional Support services; 4) Crisis intervention; 5) Information; and 6) Relevant referrals. She continued in stating these services are provided to the victim at the hospital, via phone and/or on site at the CVRCC. She stated the CVRCC answers the PREA Hotline 24/7/365 from inmates within the WTRC and staff provides information, support, and referrals for anyone reporting sexual violence while confined. The Informational Specialist may only release the information provided by the inmate upon being given permission by the inmate. Only upon approval by the inmate can the information be released to the TDOC State-wide PREA Coordinator via the Central Office PREA Tip.

She added due to staff shortage, the center is not available to report to the correctional facility at this time, but services continue to be available via phone.

A Certificate of Completion of Victim Advocate training was presented for the facility's victim advocate. The certificate identifies the completion of a 6 .0-hour contact training course on August 18, 2021, with the Sexual Assault Center. Information identifying the facility's victim advocate is posted on all inmate bulletin boards and on departmental bulletin boards accessible to the staff and the inmate population.

An interview with the WTRC Associate Warden (T)/Facility PREA Coordinator confirmed the available services of a victim advocate by both the CVRCC and the assigned facility victim advocate. She added this information is available to inmates and staff as it is posted on all bulletin boards accessible to all on colorful pink paper. The name of the available sources such as the CVRCC, contact number, mailing address and the facility's victim advocate's identity and position is also posted for viewing. The information is also documented in the inmate handbooks.

115.21 (e, f, h) 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. In addition to the review of the MOU between WTRC and the CVRCC and the assignment of a WTRC facility victim advocate, interviews with the CVRCC and facility victim, the auditor also reviewed the CVRCC's agency's website for confirmation of the available victim advocate services offered. The Center acknowledges free medical forensic examinations conducted by a Sexual Assault Nurse Examiner (SANE), services by a Crime Victim Advocate, free and confidential counseling to help them manage the emotional impact of an assault by trained CVRCC counselors, an offer to assist victims understand and cope with the range of emotions that often follow sexual victimization. Additionally, the CVRCC advocates are available to walk alongside the victim throughout the justice system. If the case is prosecuted, advocates will help victims navigate the court process and stay updated on case developments. These services were also identified as available to the inmate population by the CVRCC Director.

Three inmates who reported allegations of sexual abuse during the review period. Penetration was not involved. Two inmates were available for interview as one had previously transferred to another TDOC facility. The victim advocate was contacted to serve as a victim advocate by the shift commander during the initial report of sexual abuse of one inmate. The inmate received further counseling sessions by her assigned mental health provider.

Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, established MOU between TDOC, WTRC and the CVRCC, interviews with the Jackson-Madison County General Hospital Emergency Room Charge Nurse, CVRCC Director, WTRC facility victim advocate, inmates who reported sexual abuse, random staff, investigative staff, and Warden, review of available services offered to the inmate population in the inmate handbook, and flyers on bulletin boards, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigation and SART 3. Review of PREA Investigative Case Files 4. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent b. Warden c. Agency Head Designee <p>115.22(a)(b) 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. TDOC conducts both administrative and criminal investigations. Interviews with the OIC Institution Investigator and OIC Special Agent in Charge indicated normally the initial investigation began on the same of the reported allegation. An Office of Investigations and Compliance Institution Investigator is assigned at all TDOC correctional institutions to conduct administrative investigations and the Office of Investigation and Conduct Special Agents conduct all criminal investigations. All PREA allegations are required to be documented and uploaded in the PREA Allegation System (PAS) within 24 hours of being reported. These investigations shall be conducted within 72 hours of receiving the allegation. The audit review period was scheduled for February 1, 2021, through January 31, 2022. There were 6 reported PREA allegations during this period. A review of the PREA Allegation Report identifies all 11 were completed as an administrative investigation by Facility Investigative staff.</p> <p>Per an interview with the Agency Head Designee, TDOC ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. The TDOC policy mandates that an entry be made in the PREA Allegation system (PAS). The PAS is used to track the steps in the investigation and the results. Policy also mandates all investigations are completed even if the offender transfers facilities or the staff member abruptly quits. If a PREA allegation is made, an investigation is completed and documented in the PAS. Both types of investigation are completed in the same manner initially by the OIC Institution Investigator. After the initial response of separating and securing the victims, securing the scene, and collecting, both the victim and aggressor are interviewed. Corroborating evidence is sought, and a determination is made regarding the level of allegation. If 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>TDOC Index #502.06.2 identifies the PREA Allegation System (PAS) as a computer application located the TDOC intranet that is used to enter all inmate-on-inmate and staff-on-inmate allegations of sexual abuse and sexual harassment. As the WTRC and the West Tennessee State Penitentiary was previously identified as one facility until 2016, several programs and departments are shared.</p> <p>The auditor reviewed the PREA Allegation System tracking log and elected to review each of the 6 investigation case files that included allegations of sexual abuse and sexual harassment. The 6 PREA investigations was concluded with the following investigative findings:</p> <p>2 inmate-on-inmate sexual abuse case = 0 – substantiated; 2- unsubstantiated; 0- unfounded</p> <p>2 inmate-on-inmate sexual harassment case = 0 – substantiated; 1- unsubstantiated; 1- unfounded.</p> <p>1 staff-on-inmate sexual abuse = 1 – substantiated; 0 - unsubstantiated; 0 – unfounded.</p> <p>1 staff-on-inmate sexual harassment = 0 substantiated; 0 – unsubstantial; 1 – unfounded.</p> <p>The one staff on inmate Substantiated sexual abuse case did not identify criminal actions for prosecution. However, the auditor elected to review the most recent Substantiated sexual abuse case that included criminal charges. This case was reported and concluded on August 1, 2019. The staff member was referred for criminal prosecution pending felony sexual contact with an inmate. The criminal investigation was completed by the TDOC OIC Special Agent.</p>

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

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

Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, interviews with TDOC Agency Head Designee, Warden, OIC Investigators, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.31	Employee training
	Auditor Overall Determination: Exceeds 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="240 329 986 757" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. GEN-4-18 Lesson Title PREA Inmate Sexual Abuse/Assault 3. TDOC Index 502.06 PREA Implementation, Education, and Compliance 4. PREA Training Documentation Learning Management System (LMS) 5. Interviews with: <ol style="list-style-type: none"> a. WTRC Training Specialist b. Random staff c. Specialized staff <p data-bbox="240 788 1485 1317">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 developed for both pre-service and in-service. TDOC policy required at a minimum the training shall cover a) TDOC policy on zero tolerance for sexual abuse and /or sexual harassment. b) Staff responsibilities under TDOC policies on sexual abuse and sexual harassment, prevention, detection, proper reporting procedures as outline in various agency policies; c) Inmate's rights to be free from sexual abuse and sexual harassment. d) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment. e) The dynamics of sexual abuse and sexual harassment in confinement. f) The common reactions of sexual abuse and sexual harassment victims. g) How to detect and respond to signs of threaten, suspected, or reported sexual abuse. h) How to avoid inappropriate relationships with inmates. i) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. j) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. 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 housed female inmates or vice versa.</p> <p data-bbox="240 1348 1485 1541">115.31 (b) (c) (d) 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. WTRC houses female inmates; however, staff may transfer to any facility in the system. TDOC utilizes 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="240 1572 1485 1796">The lesson plan covers the following course outline: 1) TDOC policy on zero-tolerance for sexual abuse and /or sexual harassment per PREA of 2003; 2) PREA Definitions; 3) inmate's rights to be free from sexual abuse and sexual harassment; 4) the right of inmates and employees to be free from retaliation form reporting sexual abuse and sexual harassment; 5) understanding the dynamics of sexual abuse and sexual harassment in confinement; 6) retaliation; 7) detecting the signs of sexual abuse/harassment and the appropriate reporting response; 8) vulnerable populations; 9) how to avoid in appropriate relationships with inmates; 9) effective professional communication with inmates; 10) reporting of PREA allegations to outside authorities.</p> <p data-bbox="240 1827 1485 1921">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.</p> <p data-bbox="240 1953 1485 2047">As the WTSP and Women Therapeutic Residential Center (WTRC) was originally one facility prior to 2016, the two facilities are identified as one in fundings and other organizational identification in regard to various shared operational services that includes the LMS training program. Therefore, the LMS training log includes staff assigned to both facilities.</p> <p data-bbox="240 2078 1485 2136">An interview was conducted with the Acting West Tennessee State Penitentiary (WTSP)/WTRC Training Specialist is assigned to ensure all staff complete required training timely. He indicated new staff are required to complete the PREA</p>

training prior to being allowed contact with inmates. Additionally, all staff are required to complete refresher PREA training annually. The completion of PREA educational training is scheduled and monitored by the training staff and logged in to the LMS. The LMS roster contains the required training of all TDOC employees that includes contract staff such as Centurion, TRICOR and Aramark. In-service training is scheduled to be completed within each fiscal year. TDOC fiscal year begins on July 1st of each year while ending on June 30th of each year. Documentation of the completed PREA training is maintained in the computer-generated Learning Management System (LMS). The auditor requested and received an LMS computer generated roster of staff completion of PREA training. This computer-generated log noted staff completion of PREA training to include for the fiscal years of 2020, 2021 and 2022. The annual in-service training was conducted on Day 2 CORE Training and noted as a two-hour course

WTRC PAQ indicates that 100% of staff have received PREA training. WTRC identified 155 current employees who may have contact with the inmate population and reported 26 new hires during the review period. The auditor requested a copy of the LMS that documents the completion of staff training and was utilized to generate the requested information. The LMS captures the completion of TDOC employees and contract staff training. The program also denotes staff that have not completed the required training for the period requested. Upon submission of the LMS copy of PREA training, staff provided justifications for those employees who were noted as "incomplete." The justifications included: 1) staff not yet scheduled; 2) staff terminated; 3) staff rescheduled due to extended leave to include military; and 4) staff identified as deceased. The LMS system closes out on June 30th of each year. Staff who are on extended leave to include sick and military training are required to complete all required annual training to include PREA prior to returning to duty that includes contact with the inmate population.

However, during interviews with 15 random staff, contract staff and specialized staff, all staff acknowledged attending PREA training during pre-service and/or during in-service. 100% of random staff and specialized staff interviewed confirmed the completion of the TDOC PREA training during pre-service and/or annually during in-service containing all information required by this provision. Staff selected for interviews were presented with a variety of scenarios. All staff spoke with confidence and were competent in their responses regarding their understanding of the received PREA training that included each provision of the standard. All those interviewed were in possession of a TDOC PREA Refresher Card that includes refresher training in staff's responses to reported allegations of sexual abuse. PREA posters were identified throughout the facility as a method of providing continued PREA education to staff and the inmate population.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated it "Exceed Standard" the provisions of the standard. The facility provides refresher PREA training for employees annually rather than every two-year requirement. Additionally, PREA education is posted on bulletin boards throughout the institution. All staff to include security, non-security, contractors and volunteers are issued PREA refresher cards that are attached to their identification badge with refresher training in staff's responses to reported allegations of sexual abuse.

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="240 329 986 813" style="list-style-type: none"> 1. WTRC 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 and Rosters 5. Interviews with: <ol data-bbox="240 616 528 813" style="list-style-type: none"> a. WTRC Chaplain b. WTRC Training Specialist d. Contractors e. Volunteers <p data-bbox="240 844 1476 1005">115.32 (a), (b) (c) 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 sexual abuse and sexual harassment prevention, detection and response policies and procedures. Volunteers shall receive their PREA training in accordance with Policy #115.01. Training acknowledgement for volunteers and contractors shall be documented through signature, on CR-3965, noting that they understand the training received.</p> <p data-bbox="240 1037 1476 1332">Contract staff attend the Non-Academy Pre-service Orientation training for new employees and attend annual in-service training with TDOC staff in Day 2 CORE Training. Contractors employed at WTRC during the on-site were identified as the following: 65 – medical (Centurion), 16- mental health (Centurion), 2 – TRICOR (Industries) and 15 Aramark (food service). Completion of this training is documented in the Learning Management System (LMS) that is maintained by the facility's training specialist. Interviews were conducted with contract staff assigned to medical, mental health and food service. All were familiar of their responsibility under TDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures and requirement to report to the shift commander immediately. The two medical contract staff, one mental health contract staff and one contract food service staff was knowledgeable of TDOC policy against sexual abuse and/or sexual harassment and how to report it. Confirmation of their PREA training was included in the LMS report.</p> <p data-bbox="240 1364 1492 1556">In-service training is scheduled to be completed within each fiscal year. The fiscal year begins on July 1st of each year. Staff who are on extended leave to include sick and military training is required to be completed prior to July 1st. The LMS system closes out on June 30th of each year. The LMS roster contains the required training of all TDOC employees and contract staff such as Centurion and Aramark. The auditor requested and received an LMS computer generated roster of staff completion of PREA training to that included training in 2020/2021/2022. The computer-generated roster contains PREA training for all TDOC and contract staff to include medical, mental health, food service and TRICOR.</p> <p data-bbox="240 1588 1492 2085">The facility's Religious Services Chaplain is responsible for conducting the volunteer orientation training that includes PREA training to all volunteers during the initial hire and refresher training. Per the Chaplain, there are 350 active volunteers who provide services to the inmate population at WTRC. All volunteers are required to complete the orientation training that includes PREA prior to contact with the inmate population. Training is held quarterly at churches within the nearby communities that are convenient for new volunteers and annual recertification. The Chaplain maintains individual files within her office that contain each volunteer's confirmation of PREA training. A roster of all volunteers was requested for a random selection of 38 confirmation of PREA training through documentation. The review confirmed all selected volunteers had previously printed and signed their name while noting the date of the received training on the TDOC Volunteer Confidentiality and Policy Agreement Training Certification (CR-2935). Specifically, each volunteer acknowledged reviewing and understanding the policies and training provided that included TDOC 502.06 Prison Rape Elimination Act Implementation and Compliance and TDOC 502.06.2 Prison Rape Elimination Act Allegations, Investigations, and Sexual Abuse Response Teams. Upon signing the training certification, each volunteer acknowledged they agreed to abide by these policies and all other TDOC policies during their tenure as a volunteer for the TDOC. Volunteers also document their completion and understanding of the PREA training received on the CR-3965. A copy of the TDOC Volunteer Services Lesson PowerPoint presentation was submitted for review</p> <p data-bbox="240 2116 1465 2143">Interviews were conducted with three religious services volunteers who provide services at both the WTSP and WTRC. All</p>

acknowledged receipt of PREA training by the Religious Services Chaplain and was extremely knowledgeable of their responsibility upon becoming aware and/or informed of a PREA allegation by an inmate and/or through observation. Each reported they were trained on their responsibility under TDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. They continued in stating, they would immediately notify the nearest security staff member and/or shift commander and maintain a visual on the alleged victim.

Based on the review of policies, review of confirmation of PREA training for both contractor and volunteers via the LMS and/or individual volunteer signatures, review of PREA lesson plans, interviews with contract staff, volunteers, and Religious Service Chaplain, and the WTRC Training Specialist, the facility has demonstrated compliance with all the provisions of this standard.

115.33	Inmate education
	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="240 329 986 1041" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. TDOC Index 103.10.1 LEP Policy 4. PREA Hotline signs (English and Spanish) 5. WTRC Inmate Rules and Regulations Handbook 6. PREA Sexual Assault Awareness Brochure (English and Spanish) 7. Inmate TDOC Orientation Acknowledgement Forms 8. Observation on site 9. Interviews with: <ol data-bbox="240 844 829 1041" style="list-style-type: none"> a. WTRC Associate Warden (T)/Facility PREA Coordinator b. Intake Staff d. Formal and Informal Inmates e. Orientation Counselor <p data-bbox="240 1077 1422 1200">115.33(a)(b) (c) TDOC Index 502.06 states that 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.</p> <p data-bbox="240 1290 1481 1480">The PAQ indicated there were 3160 inmates admitted to the facility during the 12-month review period. After further review by TDOC staff and review of the incoming logs, it was determined this number was incorrect. Specifically, the previous number of 3160 included inmates for both the West Tennessee State Penitentiary and the WTRC and all incoming inmates to include those who returned from medical and court appearance. The WTRC Associate Warden (T)/Facility PREA Coordinator identified the correct number of incoming inmates for WTRC during the 12-month review as 721, not 3160. These inmates were identified as those whose length of stay in the facility was longer than 30 days during the review period.</p> <p data-bbox="240 1570 1473 1695">An interview with an intake staff indicated the PREA video "PREA video titled "PREA: What You Need to Know" is shown in intake to all arriving inmates to include those identified as a new commitment, court return and/or transfer. Upon completion of the intake process, inmates are assigned to the orientation unit where additional PREA education is presented to the inmate by the assigned counselor.</p> <p data-bbox="240 1787 1481 1946">Per an interview with an Orientation Counselor, these inmates attend a 3-hour Orientation Class with their assigned counselors where detailed discussion of PREA and various ways inmates may report PREA allegations to include the PREA Hotline numbers. The inmates are also provided a WTRC Rules and Regulations Handbook that includes PREA education. Upon completion of orientation, the inmate signs and dates the TDOC Orientation Acknowledgement (CR-2110), acknowledging viewing the PREA video, and receiving PREA education.</p> <p data-bbox="240 2036 1465 2161">Forty-three formal and five informal interviews with the inmate population indicated they received educational PREA information via the pamphlet, handbook and/or observation of the PREA video upon their arrival at the facility during intake and/or orientation with their counselor. The inmates also mentioned the PREA information that is posted on the bulletin boards and signage on the walls, and on every telephone providing them with PREA information and how to report PREA</p>

allegations.

The auditor randomly selected 88 inmates that included new arrivals and those who transferred from other TDOC facilities during the review period for confirmation of receiving PREA education within 30 days of arrival. Documentation supported confirmation of inmates' participation in observing the PREA video, receiving a TDOC Inmate Rules and Regulations Handbook, that contains additional PREA education, and a PREA brochure. A review of the inmates' arrival date at the facility confirmed the inmate acknowledged receipt of the various PREA education material on the day of arrival and/or the following day after arrival to the facility and always within 30-days of their arrival.

115.33 (d) (e) TDOC 502.06 states Each facility shall take appropriate steps to ensure inmates with disabilities (include inmate who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of 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.

TDOC Index 103.10.1 Limited English Proficiency (LEP) Plan section II indicates the Orientation/Classification Assignment and Hearing: The Counseling Service Team will evaluate the ability of the offender to understand without an interpreter. If it is evident that the offender's knowledge of the English language is insufficient, then interpretation services shall be provided.

The 16-minute PREA video titled "PREA: What You Need to Know" is played in the intake area upon the inmate's arrival throughout the intake process and is available in both English and Spanish. The video is also played with a closed caption for inmates who are hard of hearing, and/or have low vision. The facility Inmate Rules and Regulations Handbook is available in both English and Spanish in addition to all other PREA resources that includes posters, information to report PREA allegations via telephone and mail, and the issued PREA pamphlets. The WTSP Associate Warden (T)/PREA Coordinator provides translation services for LEP inmates in the Spanish language at WTRC. The WTSP Associate Warden (T)/PREA Coordinator also provided translation services during the auditor's interviews with two LEP inmates.

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 Contact Note LCDG. The auditor selected 88 random inmates' files for confirmation of PREA education. Completion of the training for each inmate was acknowledged by their signature on the TDOC Orientation Acknowledge forms. The completed forms are maintained in each inmate's dividual file and is documented in the E-TOMIS. This information is shared with the inmate population on their day of arrival during the intake process. The auditor conducted 43 formal and 5 informal inmate interviews and confirmed all acknowledged receiving PREA education and identified the PREA posters with information accessible for viewing throughout the facility on bulletin boards, walls, and the inmate telephones.

115.33(f) PREA information was observed 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 English and Spanish. Inmates are provided with personal copies of PREA brochures and the facility's Inmate Rules and Regulations Handbook that contains additional PREA education and internal and external reporting resources available to the inmate.

Based on the review of policies, observation of the intake process and presentation of PREA education provided to the inmate population, observation of PREA posters, review of inmate handbook, PREA pamphlet, PREA video and continuous PREA education through posters, interviews with staff and the inmate population, and confirmation of inmates' signature acknowledging receipt of PREA education on the TDOC Orientation Acknowledge forms, the facility has demonstrated compliance with all the provisions of this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. WTRC Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06.2 PREA Allegations, Investigation, and SART
3. TDOC Index 107.01 Office of Investigation and Conduct Unit Authority, Responsibility, Personnel Selection and Training
4. Documentation of Specialized Training for Agency Investigators
5. Interviews with:
 - a. Office of Investigations and Conduct (OIC) Special Agent
 - b. OIC Institution Investigator

115.34(a) The TDOC employs investigative staff responsible for conducting both administrative and criminal investigations. The investigative staff are assigned to the Office of Investigations and Conduct. The OIC Institution Investigators are authorized to conduct administrative investigations only. Special Agents and Special Agents in Charge within the OIC are authorized to conduct both administrative and criminal investigations.

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.) An interview was conducted with the OIC Special Agent assigned to the facility. He acknowledged his completion of law enforcement training through the Tennessee Correction Academy and his position as a sworn law enforcement officer for TDOC. He began his career with the Tennessee Law Enforcement Agency as a Police Officer in 2005. As a sworn law enforcement officer with the TDOC Office of Investigations and Conduct, he is authorized to conduct all TDOC investigations to include both administrative and criminal cases for prosecution. He has also completed the following online courses through the National Institute of Corrections, "PREA: Investigating Sexual Abuse in a Confinement Setting" and "PREA: Investigating Sexual Abuse in a Confinement Setting: Advance Investigations."

The OIC Institution Investigator indicated he has held the position of the OIC Institution Investigator at WTRC/WTSP for 8 years. In addition to completing the required training per the standard provision, he has gained extensive experience in conducting administrative PREA investigations and assisting the OIC Special Agents in conducting criminal investigations.

115.34(b) The OIC Special Agent indicated specialized training for the OIC Special Agents is mandatory and completed 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 TDOC. The OIC Special Agent stated the training courses he received as a Special Agent and sworn law enforcement officer far exceeds the provisions of the standard. However, the completed on-line courses of "PREA: Investigating Sexual Abuse in a Confinement Setting" does include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and sexual abuse evidence collection within a confinement setting in gathering sufficient evidence for both administrative investigations and/or criminal prosecution as applicable.

The OIC Institution Investigator confirmed topics of the training completed through the National Corrections of Institute also includes interviewing techniques, use of the Garrity warning, evidence collection and evidence required to substantiate an administrative investigation. He added, if a case is lending toward criminal charges, the Special Agent in Charge notifies the Special Agent who conducts the investigation and he aid throughout the investigative process.

Certificate of completion for the online course "PREA: Investigating Sexual Abuse in a Confinement Setting" was also presented for the WTRC OIC Institution Investigator and the Internal Affairs Investigator. The OIC Institution Investigator and/or OIC Special Agent was identified as the investigative staff for each of the 3 sexual abuse allegations that was concluded as an administrative investigation. Although one staff on inmate sexual abuse case was determined as Substantiated, there were no criminal activities identified.

The OIC Special Agent, OIC Institution Investigator and Internal Affairs Investigator were identified as being assigned to both the West Tennessee State penitentiary (WTSP) and Women's Therapeutic Residential Center (WTRC).

115.34(c) The Department shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The auditor reviewed training certificates of completion for the OIC Special Agent, OIC Institution Investigator, and the WTRC/WTSP Internal Affairs Investigator's specialized training titled "PREA: Investigating Sexual Abuse in a Confinement Setting."

Based on the review of the PREA investigative case files, investigative training completed by the assigned investigators, and interviews with the investigative staff, WTRC meets all provisions of the standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC 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 for Medical/Mental Health Care Standards 5. Medical and Mental Health Staff Training Records 6. Interviews with: <ol style="list-style-type: none"> a. Behavioral Health Administrator b. Health Services Administrator c. Director of Nurses d. WTSP/WTRC Training Specialist <p>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 the specialized training "PREA: Medical and Mental Care Standards" be presented by a designated supervisory instructor 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. The Specialized Training: PREA Medical, and Mental Care Standards Notification of Curriculum Utilization issued by the National PREA Resource Center is the training tool by the medical and mental health providers. A copy of the 100 pages lesson plan was presented for review by the auditor. This information covers four modules (1) Detecting and Assessing Signs of Sexual Abuse and Sexual Harassment; Module 2: Reporting: Module Effective and Professional Responses; Module 4 – The Medical Forensic Examination and Evidence Preservation. The staff are given a post-test after training that is divided into the 4 modules.</p> <p>115.35(b) The agency nor the facility conducts forensic medical exams. All forensic examinations are performed off-site at a local medical facility, Jackson-Madison County General Hospital located at 620 Skyline Drive in Jackson, TN.</p> <p>115.35(c) (d) The auditor reviewed training records identifying medical and mental health care practitioners employed by the facility and also received training mandated for employees by §115.32. Per the WTSP/WTRC Training Specialist, all medical and mental health staff are required as other TDOC staff to attend and pass the TDOC PREA training. Course documentation is also maintained by the WTRC/WTRC Training Specialist in the Learning Management System (LMS) and by the Medical and Mental Health supervisors. An interview with the Behavioral Health Administrator, Director of Nurses, and Health Services Administrator, confirmed staff within the departments are required to complete PREA training through their contracting agency Centurion and the PREA Specialized training for Medical and Mental Health. A review of the training documentation of the specialized medical training did not support that all medical staff completed the specialized training prior to the site visit. However, the identified medical staff completed the required training during the post audit phase. Rosters were submitted as confirmation of training. Therefore, all medical and mental health staff were identified as completing the PREA Specialized Training as required per the standard.</p> <p>Based on the review of policies, the Specialized Training: PREA Medical, and Mental Care Standards Notification of Curriculum Utilization issued by the National PREA Resource Center identified as the training tool for medical and mental health providers and training confirmation of training, completion of PREA training for standard 115.32, and interviews with medical and mental health staff, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. PREA Screening System Application 4. Completed Risk Screenings 5. Department of Corrections PREA Intake Spreadsheets 6. Interviews with: <ol style="list-style-type: none"> a. Staff who conduct PREA Risk Screening b. Random and Targeted Inmates d. TDOC -State-wide PREA Coordinator <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 staff. Staff are 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. A random sample of 86 inmate PREA Screening System forms was selected for review. The initial risk screening assessment is completed upon arrival to WTRC by the orientation counselor. Interviews with staff who conduct risk screening confirmed the PREA Screening System is utilized to conduct screening for the risk of sexual victimization and abusiveness.</p> <p>Overall inmates interviewed reported being asked questions related to the PREA Screening System form. Additionally, the inmate population reported being whether they had ever been sexually abused by medical staff during the intake process.</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 there were 1659 inmates admitted to the facility during the 12-month review period. After further review by TDOC staff and review of the incoming logs, it was determined that this number was incorrect. Specifically, the previous number included inmates for both the WTRC and the West Tennessee State Penitentiary and all incoming inmates to include those who returned from medical appointments and court appearances. The correct number of incoming inmates for WTRC during the 12-month review was later identified as 721. However, all inmates who departs the facility for 24 hours or more are re-screened by staff within 72 hours of their return. Seven hundred and twenty-one inmates were also identified as those who were admitted to the facility and whose length of stay was 30 days or more. This information was confirmed as being monitored by the Chief Counselor and collected monthly via a Department of Corrections PREA Intake Spreadsheet who maintains monthly logs of all incoming inmates. This spreadsheet is a tracking log of inmates' date of arrival, transport reason, initial facility screening date, staff completing the 48-hour review of initial screening, rather or not the initial screening was completed within 72-hours of the inmate's arrival, staff who completed the 15 day review for 30 day re-screening and completed by whom, 30-day PREA risk screening re-assessment screening date completion, confirmation of completed within 30-days, and date and reason inmate was referred to mental health such as an aggressor, victim of prior sexual abuse, and those at risk of being sexually abused. Staff presented the completed PREA Intake Spreadsheet forms for each of the 12-month review period. The Chief Counselor forwards the monthly reports to the Facility PCM, Associate Warden (T)/ PREA Coordinator, and the TDOC Central Office State-wide PREA Coordinator for review of compliance with TDOC policy and provisions of this standard.</p> <p>Per interviews with staff who conduct intake and risk screening, the incoming chain often arrives late during the evening hours with the arriving inmates. On these occasions, the inmates are screened the following morning. This was confirmed via review of the PREA Intake Spreadsheet. A random review of 86 inmates risk screening for each of the 12-month review period revealed all inmates were screened within 72 hours of their arrival. There were no discrepancies noted.</p> <p>115.41(c) (d) (e) TDOC Index 502.06.1 requires authorized users to utilize the PREA Screening System Application located</p>

on the TDOC intranet. User security access to this system is authorized by the Associate Warden of Treatment and the 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's record. The determination of an inmate being identified as a prior victim of sexual abuse, at risk of sexual victimization and/or aggressor of sexual abuse is automatically generated within the program based on the inmate's responses to the various questions noted on the PREA Screening form.

The PREA Screening System Application factors considered in the risk of abusiveness category included 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. The screening application considers factors that identify an inmate as being an aggressor, victim, both, and/or neither. Questions includes: Whether the inmate is a former victim of institutional (prison or jail) sexual abuse; Whether the inmate has mental, physical, or development disability; The age of the inmate (24 or younger or elderly, 60 or older); The physical build of the inmate (5'5" and/or less than 150 pounds); Whether the inmate has previously been incarcerated; Whether the inmate criminal history is exclusively non-violent; Whether the inmate has prior convictions for sex offenses against an adult or child; Whether the inmate is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; Whether the inmate has previously experienced sexual victimization; Whether the inmate is detained solely for civil immigration purpose; Prior acts of sexual abuse; Prior acts of violent offenses; and History of prior institution violence. Based on the screening information provided by the inmate and the prior review of the incoming inmates criminal history, the inmate is identified as a sexual aggressor, sexual victim, at risk of sexual abuse, one or more and/or neither. The determination of an inmate being identified as a prior victim of sexual abuse, at risk of sexual victimization and/or aggressor is automatically generated within the program based on the inmate responses to the various questions asked from the PREA Screening form.

Although inmates are not detained solely for civil immigration purposes with the TDOC, this information is included in the PREA Screening System Application for response.

The auditor observed the intake process of arriving inmates during the on-site visit. Staff who conduct risk screening, medical staff and mental health are notified of the incoming chain upon arrival and report to the Intake area. The intake process began within minutes of the inmate's arrival. The auditor observed the PREA risk screening conducted by the Orientation Counselor. Staff utilized the PREA Screening System Application form to conduct the risk screening and was provided with responses for each question by the interviewed inmate. Additionally, each inmate was also asked if they had been sexually abused by medical staff during the medical intake process.

The auditor conducted PREA risk screening reviews through documentation completed by staff who conduct risk screening in the TDOC ETOMIS PREA Screening Results electronic program for 86 inmates. The review confirmed all inmates were screened within 72 hours of their arrival and re-assessed for risk screening within 15 – 25 days after their arrival. Formal interviews were conducted with 43 inmates that included both random and targeted groups. Responses varied on recalling being asked questions identified within the standard provision.

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. A revised number of 721 inmates were identified as those who were admitted to the facility whose length of stay was for 30 days or more. Staff incorrectly identified the number of inmates who stay was 72-hours as 1659 and those who stayed over 30-days as 1501. These numbers were later identified as incorrect and identified as 721 whose stay was for 72 hours and 30 days.

Staff who conduct risk screening indicated counselors assigned to each of the housing units conduct the 30-day follow-up re-assessments for inmates assigned to their unit. Per interviews with the Chief Counselor, each counselor maintains a transport roster to monitor incoming inmates for review and completion of inmates 30-day risk re-assessments. The Chief Counselor identified the 30-day re-assessments are to be completed between 15 and 25 days of the inmate's arrival. The review of the random 86 inmate screening forms confirmed the vast majority of 30-day reassessments were completed between 15 and 25 days after the inmate's arrival and all were conducted not later than 30-days of the inmates' arrival.

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 Chief Counselor indicated additional risk assessments are conducted annually during re-classification, upon receiving additional and/or new information, and upon receiving identified as a victim and /or aggressor during a PREA investigation finding. There was 1 Substantiated sexual abuse investigative finding during the 12-month review period. Upon the completion of the Substantiated sexual abuse investigation, a re-assessment identifying the inmate as a victim of sexual abuse was completed.

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 and/or not disclosing complete information. She added that staff always make it clear to the inmate that responses are needed to provide a safe environment for them. Interviews with the inmate population who recalled being questioned from the risk screening, did not indicate any concerns in responding to the staff during the risk screening and/or to the auditor during the interview process.

115.41(i) TDOC Index 502.06.1 indicates screening information is strictly need-to-know basis. Access to the PREA Screening System Application is controlled through authorized user security access. Per the Chief Counselor access to the screening documentation is limited to counselors, Associate Warden (T)/ Facility PREA Coordinator, and investigators with limited access to security supervisors, and the count room officer for bed assignments. The counselors can only observe the inmate's score once uploaded. Authorization for access to the PREA Screening System Application require approval by the Associate Warden (T) and the TDOC State-wide PREA Coordinator.

Per an interview with the State-wide PREA Coordinator, a weekly report "Monitoring Due Report" is automatically forwarded to each TDOC institution via E-TOMIS that is automatically generated to the facility PCM, Associate Warden (T), Chief Counselor and himself. The State-wide PREA Coordinator receives a master copy of each TDOC facility. The monitoring of victims and aggressors are conducted every 90 days for a minimum of 12 months. The State-side PREA Coordinator must authorize approval prior to the removal of each inmate. The Counselors meet with each inmate during the 90-day review period and make contact notes in the Offender Management System. The counselors' reviews the inmates' work history, education program assignments, and housing. 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.

The TDOC State-wide PREA Coordinator has established a monitoring tool to ensure the inmate population is screened for their initial 72-hour PREA risk screening and 30-day re-assessments in accordance with TDOC policy and the PREA standard 115.41. The random review of 86 inmates PREA risk screening and the monthly Department of Corrections PREA Intake Spreadsheets documents the facility's compliance with all standard provisions of completing the initial and follow-up risk screening. Additional monitoring is completed every 90 days for a minimum of 12-months on all inmates identified as victims of sexual abuse and those identified as aggressors which exceeds the standard provisions. Therefore, WTRC exceeds all standard provisions for 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="242 271 813 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 970 645" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. TDOC Index 113.37 Gender Dysphoria 4. TDOC Index 112.08 Personal Hygiene Resources for Inmates 5. PREA Screening System Application factors 6. Housing Assignments <p data-bbox="242 674 399 701">Interviews with:</p> <ol data-bbox="242 730 829 931" style="list-style-type: none"> a. Random Staff b. Staff Assigned to Conduct Risk Screening c. Inmates Identified as Bi-sexual and Lesbian d. WTRC Associate Warden (T)/Facility PREA Coordinator <p data-bbox="242 1016 1489 1178">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.</p> <p data-bbox="242 1209 1489 1738">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. The screening application considers factors that identify an inmate as being an aggressor, victim, both, and/or neither. Questions includes: Whether the inmate is a former victim of institutional (prison or jail) sexual abuse; Whether the inmate has mental, physical, or development disability; The age of the inmate (24 or younger or elderly, 60 or older); The physical build of the inmate (5'5" and/or less than 150 pounds); Whether the inmate has previously been incarcerated; Whether the inmate criminal history is exclusively non-violent; Whether the inmate has prior convictions for sex offenses against an adult or child; Whether the inmate is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; Whether the inmate has previously experienced sexual victimization; Whether the inmate is detained solely for civil immigration purpose; Prior acts of sexual abuse; Prior acts of violent offenses; and history of prior institution violence. Based on the screening information provided by the inmate and the prior review of the incoming inmates criminal history, the inmate is identified as a sexual aggressor, sexual victim, at risk of sexual abuse, one or more and/or neither. The determination of an inmate being identified as a prior victim of sexual abuse, at risk of sexual victimization and/or aggressor is automatically generated within the program based on the inmate responses to the various questions asked from the PREA Screening form.</p> <p data-bbox="242 1769 1477 1998">Staff who perform screening reported inmates at risk of victimization are separated from inmates at risk of abusiveness based on the risk assessment score. Those who are at risk of victimization cannot be housed in the same cell but can be assigned to the same housing unit. These inmates can also be assigned to the same job and/or programs because they will be supervised by staff assigned to these areas. Upon the count room officer attempting to assign inmates identified as a prior victim of sexual abuse and/or those identified at risk of sexual abuse with an inmate identified as an aggressor, staff immediately receive an alert that these inmates are labelled as incompatible and the e-TOMIS system will not allow the requested assignment.</p> <p data-bbox="242 2029 1449 2157">Per an interview with the Associate Warden (T)/ PREA Coordinator, the PREA risk screening is utilized to ensure inmate safety through proper placement of housing and prevents the assignment of inmates identified as prior victims with those identified as prior aggressors. These inmates are identified as incompatibles during risk screening and staff attempting to assign them as roommates would receive an alert that would prevent the transaction. Inmates who are not incompatible</p>

amongst each other are allowed to attend programs and work assignments together.

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 on a 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 sexual aggressor or sexual victim at any time during their incarceration, the inmate shall be evaluated for appropriate housing and programs.

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 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. Per the Associate Warden(T)/ Facility PREA Coordinator, staff would make individual determinations of housing and programming assignments for an inmate identified as transgender and/or intersex would be based on the inmate's needs.

115.42(d) (e) TDOC Index 502.06.1 indicates that placement for inmates identified as transgender or intersex shall be considered on a case-by-case basis. These identified inmates shall be reclassified every six months by the assigned counselor to review any threats to safety experienced by the inmate. The inmate's own views with respect to his safety shall be given serious consideration. There were zero inmates identified as transgender and/or intersex designated to WTRC during the 12-month audit review period. Per interviews with the Associate Warden (T)/Facility PREA Coordinator, she has been employed at the facility since 2016 and inmates identified as a transgender and/or intersex has not been assigned.

TDOC Index 502.06.1 indicates that a transgender or intersex inmate's own view with respect to their personal safety shall be seriously considered. Interviews with the Warden, Associate Warden (T)/Facility PREA Coordinator, and staff who conduct risk screening indicated there has not been any inmates identified as transgender and/or intersex designated at the facility. Both indicated an inmate identified as transgender and /or intersex would be allowed to provide input of their own views regarding their personal safety with housing and program assignments and would be re-class at a minimum every six months. The Associate Warden (T)/Facility PREA Coordinator stated she began her tenure at WTRC in 2016 and there has not been an inmate identified as transgender and/or intersex assigned. However, the inmates would be allowed to express their own views regarding their personal safety with housing and program assignments.

115.42 (f) TDOC 112.08 states Transgender and intersex inmates shall be given the opportunity shower separately from other inmates. Inmates will be able to shower, perform bodily function, and change clothes without nonmedical staff of the opposite gender viewing them, except in circumstances that require immediate actions.

WTRC Index 112.08-1 states There shall be sufficient shower facilities in the housing /sleeping areas to permit inmates in the general population to shower and maintain proper personal hygiene at least daily. Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. WTRC will ensure all male staff members announce their presence on housing units before entering. This is to ensure inmates are able to shower, perform bodily function, and change clothing without non-medical staff of the opposite gender viewing breasts, genitalia, or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks. No officer should stand and look into inmates' cells while they are performing these functions. There were zero inmates assigned at the facility identified as transgender and/or intersex for interview. However, staff interviews and TDOC policy allow for inmates identified as transgender and/or intersex to shower alone. Additionally, all inmate showers at WTRC are in individual stalls that allow 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. Interviews were conducted with 2 inmates identified as lesbian and 2 identified as bi-sexual. Each confirmed their housing assignment was not based on their status as such. A review of their housing assignments confirmed these inmates were not placed in dedicated units and or wings solely based on their identification of status. There were zero inmates identified as transgender and/or intersex. Per interviews with the Associate Warden (T)/ Facility PREA Coordinator, inmates identified as gay, bisexual, transgender, or intersex would not be placed in dedicated housing units. TDOC is not pursuant to a consent decree, legal settlement, or legal judgement in the housing of inmates.

Based on the auditor's analysis of the information collected through review of policies, documents to include housing

assignments of inmates identified as lesbian and bi-sexual, and interviews with staff assigned to conduct risk screening, inmates identified as lesbian, and bi-sexual, and the Associate Warden (T)/ Facility PREA Coordinator, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.43	Protective Custody
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 812 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="242 329 940 584" style="list-style-type: none"> <li data-bbox="242 329 767 358">1. WTRC 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="242 504 603 584" style="list-style-type: none"> <li data-bbox="242 504 349 533">a. Warden <li data-bbox="242 562 603 591">b. Staff Who Supervise Segregation <p data-bbox="242 618 1485 1010">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 zero 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 WTRC. 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 staff who supervise segregation and the Warden if the alleged aggressor is known, the aggressor would be placed in segregation pending the investigation and transferred to another housing or another institution if needed.</p> <p data-bbox="242 1039 1485 1234">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. The inmate would have access to education, legal aid, minimum of 1 hour outside recreation in covered and secured recreation areas with telephone access.</p> <p data-bbox="242 1263 1485 1391">115.43(c) The PAQ noted that no inmates were 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. He has the option of various housing units for the reassignment of inmates if needed rather than the use of segregation</p> <p data-bbox="242 1420 1485 1615">115.43(d) Index 502.06.2 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. An interview with the Warden said 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 12-month review period. Therefore, there were zero inmate case files for review.</p> <p data-bbox="242 1644 1485 1877">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. In an interview with the Warden, he was aware of the requirement for 30 days reviews, however, the facility would not utilize involuntary segregated housing for an inmate who has been identified at a high risk for sexual victimization if the aggressor can be identified. Interviews with staff assigned to supervise segregation and the OIC Institution Investigator indicated the alleged victim would remain on the compound and the alleged abuser would be placed in segregated housing pending an investigation. There were no inmates placed in involuntary segregation based on being identified at a high risk of victimization.</p> <p data-bbox="242 1906 1485 1966">Based on the review of policies, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.51	Inmate reporting
	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 1011 927" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Tip line Posters 4. Memorandum from Associate Warden (T)/ Facility PREA Coordinator 5. PREA Refresher Cards 6. Inmate Rules and Regulations Handbook 7. MOU with Shelby County Crime Victim and Rape Crisis Center 8. Interviews with: <ol data-bbox="240 786 1011 927" style="list-style-type: none"> a. Random and Specialized Staff b. Shelby County Crime Victim and Rape Crisis Center Director c. Shelby County Crime Victim and Rape Crisis Center Information Specialist <p data-bbox="240 958 1485 1151">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) Reporting directly to staff; (b) Facility PREA Tip Line; (c) Third-party reporting; or (d) Written communication. Interviews with random and specialized staff identified these methods as accessible to the inmate population to report PREA allegations.</p> <p data-bbox="240 1182 1481 1344">Methods of reporting PREA allegations are posted on PREA posters throughout the facility to include inmate program areas, housing units, inmate dining, education, medical, visitation, recreation, work assignment areas, and on inmate telephones in addition to the inclusion in the inmate handbook. Formal and informal inmate interviews indicated all inmates were aware of the available reporting options. They acknowledged PREA posters and signage on the facility's walls throughout identifying the PREA Hotline is accessible by calling *9222 and/or *9555 and noted the PREA Hotline as the most common response.</p> <p data-bbox="240 1375 1422 1469">115.51(b) TDOC Index 502.06.2 states the Department shall provide at least one way for inmates to report abuse or harassment to an outside governmental entity that is not affiliated with the agency or is operationally independent from agency leadership. This information shall be made available through the Inmate Handbook.</p> <p data-bbox="240 1500 1474 1662">A review of the WTRC Inmate Rules and Regulation Handbook identifies resources outside the facility to report PREA allegations. The handbook states: "To report incidents of sexual abuse to an outside resource you may call *9555. (The Shelby County Rape Crisis Center, 1750 Madison Ave #102, Memphis TN 38104). The calls are confidential and TDOC will NOT record the call. The Shelby County Rape Crisis Center also offers victim advocacy services. Mail is a valid outlet for PREA communications with an outside agency.</p> <p data-bbox="240 1693 1485 1984">A memorandum from the Associate Warden (T)/ Facility PREA Coordinator is posted on the inmate's bulletin boards in all housing units in both English and Spanish identifying various methods to report PREA allegations. The memorandum is noted as the following: "The speed dial numbers in the inmate phone system for PREA is as follows: * PREA -*9222; Rape Crisis Line - *9555. TDOC has ZERO tolerance for sexual abuse, In the event of an incident, report all sexual abuse to an outside resource contact the Shelby County Rape Crisis Center (1750 Madison Ave #102, Memphis, TN 38104) by using the number *9555. This call will be confidential and TDOC will NOT record the call. The Shelby County Rape Crisis Center also offers victim advocacy services." An interview was conducted with staff assigned to the facility mailroom who confirmed all outgoing mail identified as legal and/or noted to an agency related to reporting PREA allegations, would be treated as legal mail, logged as such but will not be screened.</p> <p data-bbox="240 2016 1485 2141">TDOC established and Memorandum of Understanding (MOU) with The Shelby County Rape Crisis Center that was signed on September 9, 2015. Due to the original organizational and operational structure of WTRC and WTSP, numerous departments are identified as shared services. The MOU includes both the WTRC and WTSP. Per the TDOC State-wide PREA Coordinator and the Shelby County Crisis Center Director, the MOU remains in effect. The Shelby County Rape Crisis</p>

Center has changed its official name since the established MOU. The facility's is now identified as the Shelby County Crime Victim and Rape Crisis Center. The center agrees to (1) Maintain confidentiality of survivors of sexual violence who are incarcerated at Mark Luttrell Correctional Complex and West Tennessee State Penitentiary (2) Maintain available crisis counseling through organization's crisis hotline at any time and/or 24 hours a day. Said counseling may take place in person or by telephone. 3) Maintain confidentiality as outlined in CVRCC confidentiality policy; 4) Provide training for MLCC and WTSP that includes WTRC staff; and 5) Communicate any question or concerns to the TDOC State PREA Coordinator and/Statewide Inmate PREA Victim Advocate.

The Shelby County Rape Crisis Center Director stated her organization has agreed to receive reports of sexual abuse and sexual harassment from inmates at WTSP that includes the Women's Therapeutic Residential Program as an external reporting entity. The reporting responsibility is part of the MOU established with TDOC and the facility. The organization is the largest rape crisis center in the Mid-South Region, and it has PREA MOUs with most all correctional facilities in the area. Inmates can remain anonymous, upon request when making a report. When authorized by an inmate to release the reported information, only then does she report it to the TDOC State-wide PREA Coordinator through the TDOC PREA Tip Line. She has been employed at the center since 2017 and has received less than 5 reported allegations from the inmate population from both the WTRC and the WTSP. These reported allegations included inmate sexual harassment and inmate sexual abuse. Upon an inmate authorizing CVRCC staff to report the incident to TDOC, the CVRCC staff obtain as much information as possible, to include the inmate's name, identification and location of the assault, in addition to all other information the inmate is willing to share. At that point, the information is immediately reported to the TDOC State-wide PREA Coordinator.

An interview was conducted with two CVRCC staff who are assigned to accept calls via the Hotline (*9555). Both stated the Hotline is manned 24/7 and a listener is always available to speak directly with the caller. Both stated although the center can receive and immediately forward inmates reports of sexual abuse and sexual harassment to the TDOC facilities, the callers must give authorization for staff to release the information prior to contacting the facility.

WTRC does not house inmates who are detained solely for civil immigration purposes. Forty-three formal inmates were interviewed. The inmate population was familiar with both PREA Hotline numbers internal *9222 and external *9555. However, the majority had not utilized the number. All inmates reported they felt comfortable reporting directly to any staff member while specifically acknowledging the WTRC Associate Warden (T)/Facility PREA Coordinator as being very responsive in addressing any and all of their daily concerns.

115.51(c) TDOC Index 502.06.2 indicates staff shall accept reports made verbally, in writing and all staff are required to report immediately to their supervisor any knowledge, suspicion, or information, anonymously, and third parties. All allegations shall be documented within 24 hours of becoming known to facility staff in the PREA Allegations System (PAS). Random staff interviews stated inmates could report sexual abuse or sexual harassment either verbally, in writing, anonymously, and via third parties. Staff indicated they would document verbal reports of sexual abuse or sexual harassment immediately and definitely prior to the end of their shift. A review of the completed 6 PREA investigative case files confirmed one allegation was reported through a written statement submitted by the alleged victim, two were reported via third parties, and the remaining three were reported via the WTRC PREA Hotline *9222. The OIC Institution Investigator included within the summary of the investigative reports the method each allegation was reported.

115.51(d) TDOC Index 502.06.2 and the PREA Lesson Plan indicates that staff may privately report sexual abuse and sexual harassment of inmates to the Central Office PREA Tip Line (615-253-8178). During interviews with random and specialized staff, all were identified to have in their possession a WTRC PREA Refresher: Duty to Report Knowledge, Suspicion, or Information Card. The card provided methods in which staff can privately report by the following: 1) Telling your supervisor; 2) Telling the shift officer in charge; 3) Telling the Facility PREA Coordinator; and 4) Submitting an anonymous incident report by dialing 615-253-8178. Interviews conducted with random and targeted staff, indicated they were knowledgeable in how to privately report sexual abuse or sexual harassment. Most staff cited the PREA hotline and/or directly reporting to a supervisor in person or through a private phone call as primary methods to make a private report of sexual abuse or sexual harassment.

Based on the review of policies, on-site visit, PREA posters, PREA investigative case files, memorandum, PREA Hotline number posting on inmate telephones and throughout the facility, inmate handbook, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.

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="240 327 775 640" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 501.01 Inmate Grievance Procedures 3. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator b. Grievance Sergeant c. Inmate Population <p data-bbox="240 674 1481 898">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. An interview was conducted with the Grievance Sergeant who is responsible for the collection of grievances, monitoring, tracking and ensuring proper responses are returned to the inmate population. She maintains separate logbooks for accurate accountability and monitoring of PREA allegations from other grievances. f. She added she is assigned as the Grievance Sergeant for both the WTRC and the West Tennessee State Penitentiary (WTSP) due to the position being a shared service between both facilities.</p> <p data-bbox="240 931 1485 1256">The grievance handbook provided guidance regarding the PREA. An inmate may submit a grievance regarding an allegation of sexual abuse at any time. Applicable time limits shall apply to any portion of a grievance that does NOT allege an incident of sexual abuse. After an investigation, a decision shall be rendered within 90 days of the initial filing of the grievance. An extension of up to 70 days may be applied if the normal time period for review and response is insufficient to render a decision. The inmate shall be notified in writing of any such extension. Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall b also be permitted to file such request on behalf of inmates. If a third-party file a grievance on behalf of the inmate, he/she may agree to pursue or withdraw the grievance. If the innate chooses not to pursue the grievance his/her decision shall be documented. The parent or legal guardian of a juvenile may file a grievance regarding allegation of sexual abuse on behalf of the juvenile.</p> <p data-bbox="240 1290 1474 1379">Per a conversation with the Grievance Sergeant, upon receiving a grievance alleging PREA allegations, she immediately calls the OIC Institution Investigator, Associate Warden (T)/WTRC PREA Coordinator, Internal Affairs Investigator informing them verbally of the reported PREA allegation and forward the grievance to each via email for an immediate investigation.</p> <p data-bbox="240 1413 1465 1503">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. An inmate may submit a grievance alleging sexual abuse at any time. Applicable time limits shall apply to any portion of a grievance that does not allege an incident of sexual abuse.</p> <p data-bbox="240 1536 1453 1626">The policy also notes an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the compliant and such grievance shall not be referred to a staff member who is the subject of the compliant.</p> <p data-bbox="240 1659 1474 1783">A review of the 6 report PREA investigative case files confirmed there were 0 allegations of sexual abuse reported and/or filed through the grievance process. An interview with the Grievance Sergeant confirmed there would be no attempt by staff to informally resolve the grievances filed with the inmates. All PREA allegations reported through the grievance process would be immediately forwarded to the OIC Institution Investigation for a thorough investigation.</p> <p data-bbox="240 1816 1474 2007">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 compliant and such grievance shall not be referred to a staff member who is the subject of the complaint. Per the PAQ, review of the PREA investigative case files and interviews with the Grievance Sergeant, and OIC Institution Investigator, there were 0 reported PREA allegations reported through the grievance process as identified in the following. A review of the 6 PREA investigative case files confirmed they were not reported through the grievance process and all investigations were completed by the OIC Institution Investigator.</p> <p data-bbox="240 2040 1474 2130">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 of Treatment 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</p>

Warden of Treatment 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. All grievances regarding PREA allegations are automatically forwarded for an investigation by the OIC Institution Investigator. There were 0 allegations of sexual abuse reported through the grievance process during the 12 -month review period.

115.52(e) TDOC Index 501.01 states third parties shall be permitted to assist inmates in filing grievances related to allegations of sexual abuse and shall also be permitted to file such grievances on behalf of the inmate. If a third-party file 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. A review of the 6 PREA investigative case files, confirmed 0 allegations were filed through the grievance process.

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. Per the PAQ, Grievance Sergeant and OIC Institution Investigator, in addition to a review of the 6 completed PREA investigative case files, 0 allegations of sexual abuse were reported as an emergency grievance and/or due to an inmate being subject to a substantial risk of imminent sexual abuse. Per the OIC Institution Investigator, all allegations of sexual abuse to include an inmate alleging to be subject to a substantial risk of imminent sexual abuse would be investigated immediately, all necessary measures to protect the inmate would be initiated. The initial response and final decision would be documented and maintained within the PREA Allegation System (PAS) that includes the facility's determination as to whether the inmate is in substantial risk of imminent sexual abuse while noting the action taken in response to the emergency grievance.

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 and targeted inmate interviews confirmed their knowledge of the availability to report PREA allegations through the grievance process. However, none had elected to utilize it to include inmates who reported PREA allegations. The auditor observed mailboxes identified as "Grievance" in all housing units for the issuing of grievances. Per an interview with the Grievance Sergeant, the grievance boxes are checked Monday – Friday just as all outgoing mail. Grievance boxes are available in all housing units for inmates to submit such.

Based on the review of policies, PREA investigative case files, interviews with staff and inmate population, 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 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 1469 987" style="list-style-type: none"> <li data-bbox="240 329 767 358">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 1469 416">2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims <li data-bbox="240 445 940 474">3. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="240 504 903 533">4. TDOC MOU with Shelby County Crime Victim and Rape Center <li data-bbox="240 562 916 591">5. WTRC Rules and Regulations Handbook in English and Spanish <li data-bbox="240 620 496 649">6. Posted Memorandums <li data-bbox="240 678 544 707">7. Posting of Hotline Numbers <li data-bbox="240 736 376 766">8. Interviews: <ol data-bbox="240 795 884 987" style="list-style-type: none"> <li data-bbox="240 795 884 824">a. Director of The Shelby County Crime Victim and Rape Center <li data-bbox="240 853 592 882">b. Medical and Mental Health Staff <li data-bbox="240 911 440 940">c. Random Inmates <li data-bbox="240 969 647 999">d. Inmates Who Reported Sexual Abuse <p data-bbox="240 1016 1485 1211">115.53 (a) (b) (c) TDOC Index 502.06.3 notes Inmates Access to Facility and Outside Confidential Support Services: (1) The name and contact information of the facility's Inmate PREA Victim Advocate shall be posted on each housing unit bulletin board. The facility shall ensure that inmates are provided access to outside victim advocate for emotional support services related to sexual abuse by giving inmates the mailing address and telephone numbers, including toll-free hotline numbers, were available, of local, state, or national victim advocacy or rape crisis organization and, for persons detained solely for civil immigration purposes, immigrant services agencies.</p> <p data-bbox="240 1240 1485 1368">(2) 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 facility shall enable reasonable communication between inmates and these organizations and agencies, in a confidential manner as possible.</p> <p data-bbox="240 1397 1485 1494">(3) The TDOC shall attain memoranda of understanding (MOU) or other agreements with community services providers that are able to provide inmates with confidential emotional support services related to sexual abuse. Memorandum of Understanding are to be approved by the TDOC General Counsel.</p> <p data-bbox="240 1523 1485 2085">Upon each inmate's arrival to WTRC, they are given a WTRC Inmate 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 "To report incidents of sexual abuse to an outside resource you may call *9555. The Shelby County Rape Crisis Center, 1750 Madison Ave #102, Memphis, TN 38101. This call is confidential and TDOC will NOT record the call. The Shelby County Rape Crisis Center also offers victim advocacy services. Mail is a valid outlet for PREA communications with an outside agency. All mail identified as containing a PREA allegation going to an official or organization shall be treated as legal mail. All mail that is sent to Shelby County Rape Crisis Center 1750 Madison Ave #102 Memphis, TN 38104 shall also be treated as legal mail. Interviews with the inmate population indicated they were aware of the PREA Hotline *9555, as it is posted throughout the facility, however, they stated they were unaware of outside agencies as they have not required the services of one. Interviews conducted with both random and informal interviews revealed the inmate population felt very comfortable and confident that the WTRC staff would address all concerns delivered to them immediately. The inmate population spoke with the utmost respect for the WTRC staff with special emphasis on the WTRC Associate Warden (T)/Facility PREA Coordinator while giving accolades for her accessibility and response to all inquiries regardless of the pending issue. Per interviews with two inmates who reported allegations of sexual abuse, both reported no incident of sexual penetration and/or requesting services of a victim advocate. However, the facility advocate was contacted for one victim of alleged sexual abuse. Continued services were provided by mental health staff, as the inmate was previously assigned to mental health counselor due to her existing mental status.</p> <p data-bbox="240 2114 1018 2143">WTRC does not house persons detained solely for civil immigration purposes.</p>

TDOC #502.06.3 Unless otherwise precluded by federal, state, or local law, medical and behavioral health providers shall be required to report sexual abuse and shall inform inmates of the providers' s duty to report, and the limitation of confidentiality, at the initiation of services. 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. Per interviews with the Health Services Administrator, Director of Nurses, and Behavioral Health Administrator, each acknowledged they advise the inmate population of their duty to report and require the inmates to sign an informed consent form prior to the initiation of services. Per the Behavioral Health Administrator, an inmate with continuous care is required to sign an informed consent form annually.

TDOC has established a Memorandum of Understanding (MOU) with the Shelby County Rape Crisis Center signed by the TDOC Commissioner on September 9, 2015. Per the TDOC State-wide PREA Coordinator and the Shelby County Rape Crisis Center's Director, the MOU remains in effect and provide inmates with access to outside victim advocates for emotional support services related to sexual abuse. Although the MOU identifies West Tennessee State Penitentiary, she was informed these two facilities were identified as one until 2016. The MOU was established in 2015 and the MOU remains effective for both sites. She began her career with the Center in 2017.

An interview was conducted with the Director of The Shelby County Crime Victim and Rape Crisis Center, who confirmed her agency and TDOC has established and MOU to provide services for the facility. She added her agency has established 12 PREA MOU in the Mid-South Region and is the largest rape crisis center in the area. She indicated in an effort to provide inmates and/or residents of correctional facilities access for safe reporting methods and services for those who have been a victim of sexual assault, all Tennessee correctional facilities, have a hotline/tip available that connects to the local rape crisis center. Upon learning a phone call is from an institution, the informational specialist will inquire if the caller would like to speak to CVRCC staff regarding a sexual assault that occurred in the institution. If the caller agrees, they will be connected to a sexual assault victim advocate. Upon transfer of the call, CVRCC staff will provide basic crisis intervention such as the discussion of trauma reactions, grounding /self -care techniques for the victim, and advocacy options and whether they would like to report the incident and what safety planning options are available to them. The victim is required to give authorization to the CVRCC staff to notify the third-party reporting line (TDOC PREA tip line 615-253-8178), as TDOC states all allegations of sexual abuse will be reported to the internal investigator for investigation. The CVRCC victim advocate is available to provide emotional support, and crisis intervention. Continuous victim advocate services are available via the Hotline and the victim may continue to receive services by one assigned victim advocate if requested. The Director indicated due to staff shortages, the agency isn't currently available to provide on-site visits at the facility, but all services are available 24/7 via the Hotline.

This contact information is available and visible to the staff and the inmate population via posters throughout the facility to include inmate job sites, education, housing units, hallways, visitation, food service, medical, mental health, inmate handbooks, and on the inmate bulletin boards.

Based on the review of policies, MOU, observation during site visit, interviews with Director of CVRCC, medical and mental health staff, random inmates and inmates who reported sexual abuse, the facility has demonstrated compliance with all the provisions of this standard.

115.54	Third-party reporting
	<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="242 329 940 815" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.06.2 PREA Allegations, Investigations, and SART 3. TDOC website 4. WTRC Inmate Rules and Regulations Handbook 5. Third-Party Reported PREA Case File 6. Interviews with: <ol data-bbox="242 674 919 815" style="list-style-type: none"> a. Formal and Informal Inmate Interviews b. JUST International Detention via Email c. The Shelby County Crime Victim and Rape Crisis Center Director <p data-bbox="242 844 1484 1039">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 the facility PREA Tip Line and Third-party reporting as additional ways for inmates to report PREA allegations. The WTRC Inmate Rules and Regulations Handbook, and bulletin board notices, identifies resources accessible to the inmate population to report allegations of sexual abuse and/or sexual harassment to include *9555. This number is designated as the contact number for The Shelby County Rape Crisis Center, 1750 Madison Ave #102, Memphis, TN 38104. This call will be confidential and TDOC will NOT be record the call.</p> <p data-bbox="242 1068 1484 1296">The auditor reviewed the agency's website at www.tn.gov/correction/sp/prison-rape-elimination-act.html. The website identifies the Agency's Response to Sexual Assault or Sexual Misconduct Allegations that includes: Employees have a duty to report all rumors and allegations of sexual abuse through the chain of command; Institution Sexual Assault Response Team (SART) ensure alleged victims of sexual abuse receive immediate medical attention; The facility SART ensure alleged victims of sexual abuse receive a mental health evaluation; and All allegations of sexual abuse will be reported to Internal Investigations for investigation. In addition to the facility PREA Tip lines, TDOC has established a Tip line for third-party reporting of sexual abuse and sexual assault at (615) 253-8178.</p> <p data-bbox="242 1326 1430 1355">A review of the 6 completed PREA investigative case files, revealed 2 PREA allegations were reported via third parties.</p> <p data-bbox="242 1384 1477 1478">The TDOC State-side PREA Coordinator received an email from an inmate's acquaintance from the community on June 12, 2021, through the Agency's website. The allegation was forwarded to the OIC Institution Investigator. The investigation was completed on June 21, 2021.</p> <p data-bbox="242 1507 1457 1601">The OIC Institution Investigator received third party information of possible sexual abuse occurring at the facility through a TDOC employee assigned at a different TDCO facility. The information was reported to the OIC Institution Investigator on August 18, 2021 and the investigation was completed August 24, 2021.</p> <p data-bbox="242 1630 1484 1695">Formal and informal interviews with inmates revealed most were aware that a third-party such as a family member, friend, or another inmate could report a PREA allegation on their behalf.</p> <p data-bbox="242 1724 1457 1852">The auditor forwarded an email to the Just Detention International, regarding reported PREA allegations during the review period and was advised none had been received. A phone interview was conducted with the Shelby County Crime Victim and Rape Crisis Center Director who also identified the center has not received any reported allegations of sexual abuse and/or sexual harassment during the 12-month review period.</p> <p data-bbox="242 1881 1484 1975">Based on the review of policy, Inmate Rules and Regulations Handbook, PREA investigative case files, TDOC website, communication with the Just Detention International and Shelby County Crisis Center, formal and informal inmate interviews, and analysis, the facility has demonstrated compliance with all the provisions of this standard</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Office of General Counsel Department of Human Service Inter-Office Correspondence 4. PREA Investigative Case Files 5. Interviews with: <ol style="list-style-type: none"> a. WTRC Associate Warden (T)/ Facility PREA Coordinator b. TDOC State-wide PREA Coordinator c. Random staff d. OIC Institution Investigator f. Medical and Mental Health Staff <p>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. Interviews with staff indicated they are aware of their responsibility and duty to report any and all knowledge of PREA allegations. Staff carry a PREA refresher card on their badge with reporting guidelines. Interviews with 15 random staff indicated they would immediately report the incident to the Shift Commander and complete a documented report of their awareness to include from third-party as soon as possible and always prior to departing from their shift. Non-security staff identified they would report the information to their direct supervisor, the shift commander and/or the Associate Warden (T)/Facility PREA Coordinator. The review of the 6 completed PREA investigation case files confirmed documentation was included on how the allegation was reported to include written statements submitted by the reporting staff as applicable.</p> <p>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 and only approved 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. They confirmed they would not include such information within the logbooks accessible to viewing to all.</p> <p>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 confirmed medical and mental health staff are aware of their duties required by this provision and this information is shared with the inmate upon the initiation of services and their limitation of confidentiality and duty to report. Interviews were conducted with the Behavioral Health Administrator, Health Services Administrator and Director of Nurses. All indicated neither had been directly informed by an inmate she had been sexually abused to included prior to incarceration that was not reported. However, all were aware of their requirement to report allegations of sexual abuse. All stated the inmate is informed of their duty to report at the initiation of services and at which time the inmate is required to sign a consent form that authorizes them to release medical and mental health records as needed.</p> <p>115.61(d) Per interviews with the Warden, WTRC Associate Warden (T)/Facility PREA Coordinator and the TDOC State-Wide PREA Coordinator, the facility does not and has not housed youthful inmates (under the age of 18 years old). The average age range of inmates at WTRC are between the ages of 18 – 77 years old. Medical and mental health staff confirmed unreported information of prior sexual abuse retaining to a youth under the age of 18 would be reported to Children and Family Services, however, there have not been any inmates under the 18 years old assigned to the facility. The Associate Warden (T)/Facility PREA Coordinator has been assigned at the WTRC since the mission change in 2016.</p> <p>Elderly/Vulnerable Abuse is regulated by Tennessee Code Title -71 – Welfare, Chapter 6- Programs and Services for Abused Persons, Part 1 -Adult Protection. The TDOC -State-wide PREA Coordinator presented an Inter-Office</p>

Correspondence previously distributed from the Office of General Counsel of the Department of Human Services. The memorandum was addressed to the Director of Human Resource regarding the requirement of Adult Protective Services (APS) to conduct investigations in correctional facilities. The memorandum summary concluded APS is not required to investigate allegations of abuse, neglect, or exploitation of persons in jails/correctional facilities.

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. Investigators who have received specialized training in conducting sexual abuse investigations in a confinement setting shall investigate all allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively, including third-party and anonymous. The Investigative Unit Special Agents who are sworn law enforcement officers shall be contacted immediately when circumstances warrant further action pursuant to criminal findings. Additionally, 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.

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, to the OIC Institution Investigator for an investigation. The auditor used a variety of scenarios regarding staff awareness of PREA allegations to include those reported via a third party within the community, an alleged victim, and/or an anonymous phone call during the interview process. All staff immediately responded that they would report the allegation to their immediate supervisor, Shift Commander, OIC Institution Investigator, and/or the Associate Warden (T)/Facility PREA Coordinator. Per the OIC Institution Investigator, and OIC Special Agent, all reported PREA allegations are conducted in the same manner regardless of how the incident was reported. A review of the 6 PREA investigative case files, confirmed allegations were reported via the PREA Hotline, through a third party, and/or directly by the alleged victim was thoroughly investigated and all available avenues of collecting evidence to determine the investigative findings were reviewed.

Based on the review of TDOC policy, Office of General Counsel Department of Human Service Inter-Office Correspondence, PREA investigative case files, interviews with random staff, medical and mental health staff, Warden, OIC Investigators, and analysis, the facility has demonstrated compliance with all the provisions of this standard.

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="242 329 940 757" style="list-style-type: none"> 1. WTRC 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="242 557 507 757" style="list-style-type: none"> a. Agency Head Designee b. Warden c. Random staff d. Contractors and Volunteers <p data-bbox="242 788 1493 1216">115.62 (a) 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 interviews with both random and specialized staff indicated 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 has been 1 instance where an imminent threat of sexual abuse was reported and /or identified. However, during interviews with the Associate Warden (T)/Facility PREA Coordinator who also served as the Facility PREA Compliance Manager and was responsible for the submission of documentation in the Online Audit System, this number was incorrect. The correct number is 0. This was also confirmed during the review of the 6 PREA investigation case files. Interviews with WTRC staff, contract staff and volunteers all reported they would ensure the safety of the inmate and remove the inmate from any area of potential threat of sexual abuse while maintaining a visual on the identified inmate and contact a security supervisor. Each reported they would advise the inmate to not destroy physical evidence to include DNA.</p> <p data-bbox="242 1247 1493 1440">An interview with the Agency Head Designee indicated TDOC has an immediate response system in place. Sexual safety is taken seriously by the agency. 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 inmate will remain housed in PC until the risk is eliminated by a transfer of the potential threat or until the offender expresses, they are no longer fearful and want to return to the compound.</p> <p data-bbox="242 1471 1493 1632">The Warden indicated upon an inmate identified as being at risk of sexual abuse, the inmate or aggressor would be removed from the area of threat immediately and an investigation would be initiated. Further actions would be determined based on the investigative findings. Based on the circumstances, actions may include alternate housing as a possibility and/or an inmate would be transferred if deemed necessary. The investigation would determine the outcome, however the inmate identified as at risk of sexual abuse would not be placed in a restricted housing area.</p> <p data-bbox="242 1664 1493 1758">There were no instances reported where an inmate was identified as subject to a substantial risk of imminent sexual abuse that required immediate action from staff. A review of the PREA investigative case files, indicated the reported allegations of sexual abuse was reported to have previously occurred.</p> <p data-bbox="242 1789 1406 1848">Based on the review of policies, PREA investigative case files, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC 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 style="list-style-type: none"> a. TDOC Agency Head Designee b. Warden c. OIC Institution Investigator d. Associate Warden (T)/Facility PREA Coordinator <p>115.63 (a) 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. In interviews with the Warden and Associate Warden (T)/ Facility PREA Coordinator, the Facility Coordinator has been identified as the Warden’s designee as authorized to make and receive reported sexual abuse and/sexual harassment notifications to and from other confinement facilities. The Associate Warden (T)/Facility PREA Coordinator indicated all notification would be made immediately to the inmate’s previous confinement facility upon reporting the allegation to staff at WTRC.</p> <p>Per the Agency Head Designee, the designated point of contact is the State-wide PREA Coordinator who in turn will notify the Warden, the Facility PREA Coordinator, and the OIC Institution Investigator. She added the TDOC routinely receive referrals from outside Rape Crisis Centers.</p> <p>115.63 (b) TDOC Index 502.06.2 indicates that such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. In an interview with the OIC Institution Investigator, he stated upon notification that an incident had previously occurred at WTRC, he would initiate an investigation of the reported allegations.</p> <p>115.63(c) TDOC Index 502.06.2 states the facility shall document it has provided such notification. The OIC Institution Investigator indicated the notification would be made via email and telephone call. Interviews with the OIC Institution Investigator, Warden and Associate Warden (T)/ Facility PREA Coordinator each identified there were zero inmates who reported to WTRC during the review period who reported allegations of sexual abuse and/or sexual harassment having occurred at another correctional facility upon their arrival and/or designation at WTRC.</p> <p>115.63 (d) TDOC Index 502.06.2 states “The Warden who receives such notification shall ensure that the allegation is investigated in accordance with TDOC policy. Interview with the Warden indicated that he would ensure the notifications are made and documented.</p> <p>Based on the review of TDOC policy, review of PREA investigations case files, and interviews with staff, the facility has demonstrated compliance with all the provisions of this standard.</p>

115.64	Staff first responder duties
	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="240 329 963 813" style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. WTRC Index 502.06.2-1 PREA Allegations, Investigations, and SART 4. PREA Refresher Cards 5. Interviews with: <ol data-bbox="240 616 579 813" style="list-style-type: none"> a. Warden b. Non-Security First Responder c. Random and Specialized Staff d. Contractors and Volunteers <p data-bbox="240 844 1485 1238">115.64(a) TDOC Index 502.06.2 indicate that the first security staff on scene of an alleged sexual abuse shall separate the alleged victim and abuser. The security staff shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the alleged sexual abuse occurred within a 72-hour period of reporting, the security shift supervisor who is notified of the allegation shall initiate the Sexual Abuse Incident Check Sheet, CR-3776. First responders' duties of an employee are also included in the WTRC Index 502.06.2-1. Duties are identified as 1) Staff first responders are required to instruct the alleged victim not to take any action that could destroy physical evidence, include, showering, brushing teeth, changing clothes, relieving bodily function, drinking, or eating, and then the first responder will immediately notify the shift commander. 2) If the alleged abuse occurred within a 72-hour time period of reporting, the shift commander shall initiate the Sexual Abuse Incident Check Sheet, CR-3776. 3) Security shall separate the alleged victim and the alleged abuser(s). 4) Security shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. 5) The shift commander will notify the SART. All staff including TDOC, volunteers and contract staff were observed in their possession a PREA refresher card attached to their identification card that included duties of a first responder.</p> <p data-bbox="240 1270 1477 1429">The PAQ identified 3 instances of sexual abuse in the past 12 months when the first security staff member to respond to the report separated the alleged victim and abuser. However, per a review of the 3 reported sexual abuse cases, this number is incorrect. There were 0 instances of sexual abuse in which security and/or non-security staff served as a first responder where their duties required separating the alleged abuser and aggressor and containing crime scene evidence to include physical evidence collection.</p> <p data-bbox="240 1460 1453 1554">Interviews were conducted with two inmates who reported allegations of sexual abuse. In all cases, inmates reported that staff immediately responded to their allegations and began gathering intelligence through interviews with the shift commander and the investigative staff. There was no physical evidence and or DNA samplings identified for collection.</p> <p data-bbox="240 1585 1490 1814">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 including TDOC, non-security, contract and volunteers were aware of their responsibilities as first responders. All reported they would immediately separate inmates and maintain sight of a victim, preserve the identified crime scene, advise the 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="240 1845 1445 1971">The auditor reviewed 6 PREA investigative casefiles that included 3 reported allegations of sexual abuse. There were no instances where security staff nor non-security staff served as first responders where the alleged aggressor and alleged victim were separated. In each of 3 incidents, the alleged victim was separated from the alleged aggressor upon being reported and/or identified.</p> <p data-bbox="240 2002 1485 2161">An interview was conducted with a non-security staff identified as a first responder. Per the interview, she acknowledged that although the incident was reported as sexual abuse, the allegation did not include sexual penetration and the alleged victim had previously removed herself from the identified area and the alleged aggressor. The non-security staff immediately reported the incident to shift commander and escorted the inmate to the Associate Warden (T)/Facility PREA Coordinator's office where the alleged victim submitted a written statement. The allegation involved the act of fondling by the aggressor</p>

and did not identify any physical evidence for collection. Both the alleged victim and alleged aggressor were seen by medical staff.

A second sexual abuse investigation was initiated upon the monitoring of an inmate phone calls that identified sexually explicit conversations with a staff member.

The third sexual abuse allegation was reported via a third party.

Based on the review of TDOC policies, PREA investigations, interviews with random and specialized staff, contractors, volunteers, and inmates who reported sexual abuse allegations and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.65	Coordinated response
	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="240 329 963 414" style="list-style-type: none"> <li data-bbox="240 329 767 356">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 385 963 412">2. WTRC Index 502.06.2-1 PREA Allegations, Investigations, and SART <p data-bbox="240 443 1485 672">115.65 WTRC Index 502.06.2-1 outlines response procedures upon a report of PREA allegations. It identified: 1) Staff first responders are required to instruct the alleged victim not to take any actions that could destroy physical evidence, including showering, brushing teeth, changing clothes, relieving bodily function, drinking, or eating, then the first responder will immediately notify the shift commander. 2) If the alleged abuse occurred within a 72-hour time period of reporting, the e shift commander shall initiate the Sexual Abuse Incident Check Sheet, CR-3776. 3) Security shall separate the alleged victim and the alleged abuser(s). 4) Security shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. 5) The shift commander will notify the SART.</p> <p data-bbox="240 701 1477 862">SART Responses include 1) In the event of a rape allegation, SART members shall determine if a Sexual Abuse Nurse Examiner (SANE) response is necessary, or if the alleged victim is to be transported to the Regional Medical Center at Memphis (The Med) for a SANE examination. 2) SART will determine if segregated housing is required to protect an inmate who is alleged to have been a victim of sexual. If it is determined segregation is needed for the alleged victim, the procedures outlined in TDOC Policy #502.06.22 will be followed.</p> <p data-bbox="240 893 1485 954">Additional requirements for the completion of investigations, compliance monitoring and the completion of an incident review is also included within the policy as the coordinated response to an allegation of sexual abuse.</p> <p data-bbox="240 985 1302 1012">Based on a review of the policy, 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. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. Tennessee Code Annotated 50-1-207 3. Interviews with: <ol style="list-style-type: none"> a. TDOC 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 there is a historical agreement at WTRC, but it does not grant protection for staff during any allegation of misconduct.</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> <p data-bbox="240 271 812 297">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 329 938 698" style="list-style-type: none"> <li data-bbox="240 329 767 356">1. WTRC 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="240 445 549 472">3. Retaliation Monitoring forms <li data-bbox="240 504 424 530">4. Interviews with: <ol data-bbox="240 562 671 698" style="list-style-type: none"> <li data-bbox="240 562 507 589">a. Agency Head Designee <li data-bbox="240 620 349 647">b. Warden <li data-bbox="240 678 671 705">c. Staff charged with Monitoring Retaliation <p data-bbox="240 730 1477 925">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 Associate Warden (T)/Facility PREA Coordinator, Chief Counselor, and Chief of Security has been designated by the Warden to conduct staff and inmate retaliation monitoring.</p> <p data-bbox="240 956 1490 1249">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. Per interviews with the Agency Head Designee and Warden, there are multiple options available to protect inmates and staff from retaliation. The Agency Head Designee stated 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).</p> <p data-bbox="240 1281 1477 1574">Per an interview with the Warden, any retaliation towards a staff member and/or inmate is prohibited and would be immediately addressed and result in the appropriate disciplinary action up to termination for staff. An investigation would be initiated by the OIC Institution Investigator in the review of staff out of the ordinary assignment of shifts and/or post assignments, write-up by supervisors, interaction with other staff, and an excessive leave of absence. Regarding the inmate population, work assignment changes, changes in housing assignments, disciplinary write-ups, and removal from programs, and/or actions committed by other inmates to include assaults, fights, and loss of property. If there was an incident in which retaliation was suspected, he would ensure immediate information gathering by facility investigator and separation would be authorized, as necessary to protect the alleged victim to include transfer of the aggressor and/or victim if deemed appropriate.</p> <p data-bbox="240 1606 1485 1765">Interviews were conducted with two inmates who reported allegations of sexual abuse with an investigative finding of Unsubstantiated. Both inmates stated staff met with them more frequently than 30 days and inquired if they were having issues from the inmate population that from other inmates and discussed the reported sexual abuse with them. However, both inmates stated they communicate with the Associate Warden (T)/Facility PREA Coordinator who is assigned to conduct retaliation monitoring daily as needed.</p> <p data-bbox="240 1796 1477 2022">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 2054 1477 2145">An interview was conducted with the WTRC Associate Warden (T)/Facility PREA Coordinator who is also assigned to conduct retaliation monitoring for both staff and the inmate population. She stated in addition to conducting the 30-, 60- and 90-day retaliation monitoring with inmates who report sexual abuse, these inmates are included in the quarterly review as all</p>

prior victim of sexual abuse. She and/or other supervisory staff assigned to conduct retaliation monitoring documents their meetings with the inmate every 30, 60 and 90 days. She initiates contact in an excess of every 30 days and beyond 90 days. She has an open-door policy that allows the inmates accessibility to her. She adjusts her work schedule to provide weekend coverage every six weeks. This allows her to meet the inmates' families and information can be shared.

The auditor reviewed the 6 reported PREA investigative casefiles and identified 3 reported allegations of sexual harassment and 3 reported allegations of sexual abuse. Retaliation monitoring was completed for the 1 Substantiated sexual abuse investigation, 2 Unsubstantiated sexual abuse investigations and 1 Unsubstantiated sexual harassment.

1 – Substantiated sexual abuse – The allegation was reported on October 20, 2021 and the investigation was concluded on November 2, 2021. Retaliation monitoring was documented as completed on December 2, 2021, January 2, 2022, and February 2, 2022. The inmate was transferred to another TDOC facility for the best interest of the inmate. Retaliation monitoring was documented as completed by the receiving TDOC facility and forward to WTRC. The staff member resigned prior to termination.

1 – Unsubstantiated sexual abuse – The allegation was reported on October 26, 2021, and the investigation was concluded on October 26, 2021. Retaliation monitoring was documented as completed on November 2, 2021, December 20, 2021, and January 18, 2022. Both the alleged victim and alleged aggressor were monitored for 90 days at 30-day intervals.

1 - Unsubstantiated sexual abuse – The allegation was reported on August 18, 2021, and the investigation was concluded on August 24, 2021. Retaliation monitoring was documented as completed on September 17, 2021, October 16, 2021, and November 15, 2021. Both the alleged victim and alleged aggressor were monitored for 90 days at 30-day intervals.

1 - Unsubstantiated sexual harassment – the allegation was reported on August 3, 2021, and the investigation was concluded on August 4, 2021. Retaliation monitoring was documented as completed on September 2, 2021, October 1, 2021, and November 3, 2021.

Documentation supports retaliation monitoring was completed at 30 – day, 60-day and 90 -day intervals utilizing the PREA Retaliation Review (CR-3963) for inmates. Staff documented conversations with the inmates. No inmates were placed on extended monitoring.

Based on the review of TDOC policies, PREA investigations, interviews with Agency Designee, Warden, staff assigned to conduct retaliation monitoring, two inmates who reported sexual abuse allegations and analysis, the facility has demonstrated compliance with all the 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. WTRC 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. Staff Who Supervise Segregation <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's 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 PAQ and interviews with the Warden, and staff who supervise segregation, there were 0 inmates who allege to have suffered sexual abuse placed in involuntary segregated in 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="240 331 940 701" style="list-style-type: none"> <li data-bbox="240 331 767 358">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 387 940 414">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="240 443 576 470">3. PREA Investigative Case Files <li data-bbox="240 499 424 526">4. Interviews with: <ol data-bbox="240 560 836 701" style="list-style-type: none"> <li data-bbox="240 560 836 586">a. WTRC Associate Warden (T)/ Facility PREA Coordinator <li data-bbox="240 616 355 642">b. Warden, <li data-bbox="240 672 775 701">c. OIC Institution Investigator and OIC Special Agent <p data-bbox="240 730 1490 992">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 1021 1458 1252">Interviews were conducted with the OIC Special Agent and the OIC Institution Investigator who are assigned as the investigative staff for both the WTRC and the West Tennessee State Penitentiary. Both stated an investigation is begun immediately upon becoming notified of the PREA allegation to include on weekends and non-working hours. The OIC Institution Investigator stated allegations are immediately logged into the PREA Allegation System (PAS) where they are assigned a case number. The OIC Special Agent indicated he is notified by the OIC Institution Investigator of the reported allegation within 10 minutes of being reported. Both investigators stated all PREA allegations are investigated in the same manner to include those reported directly to staff, anonymously, and/or via third party.</p> <p data-bbox="240 1281 1490 1440">A total of 6 (3 sexual abuse and 3 sexual harassment) allegations were reported at WTRC during the 12-month review period. The investigative findings for these cases were as the following: 1 -Substantiated staff on inmate sexual abuse; 2 – Unsubstantiated inmate on inmate sexual abuse; 2- Unfounded inmate on inmate sexual harassment; 1 – Unfounded inmate on inmate sexual harassment. Each of the investigations were completed by investigative staff within 2 weeks of the reported allegations.</p> <p data-bbox="240 1469 1474 2000">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. Confirmation of the specialized training “PREA: Conducting Sexual Abuse Investigations in a Confinement Setting” was completed by both the OIC Institution Investigator and the OIC Special Agent. As a sworn TDOC Law Enforcement Officer, the OIC Special Agent completed courses that exceeded the requirement of the PREA standards. Their training also includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warning, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative and prosecution referrals. The OIC Institution Investigator is a member of the SART and conduct all administrative investigations of alleged sexual abuse and sexual harassment. Interviews were conducted with both the OIC Institution Investigator and OIC Special Agent. Administrative investigation is typically investigated by the OIC Institution Investigator. However, if the case appears criminal in nature, the OIC Special Agent is notified and continues with the investigation with the assistance of the OIC Institution Investigator. Investigative staff review video, collect witness statements, review inmate telephone calls, conduct staff interviews, review grievances, review the history between the victim and aggressor, review disciplinary sanctions, and provide medical services as needed. A review of the 6 completed PREA investigations revealed the OIC Institution Investigator and OIC Special Agent work closely together during the investigation of the sexual abuse allegations.</p> <p data-bbox="240 2029 1458 2159">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. Interviews with both the OIC Institution Investigator and OIC Special Agent, indicated</p>

the first steps in initiating an investigation would be ensure the victim and aggressor is separated, the affected area is secured and reserved as a crime scene, collect all available physical evidence, ensure the victim receive medical treatment to include a forensic medical examination, interview witnesses, review video, monitor inmate phone calls to include inmates not identified as involved, review prior disciplinary history and review applicable PREA cases involving both inmates. A review of the 6 investigative casefiles included interviews with both alleged victim and alleged aggressor, review of available video and telephone records, interviews with witnesses as applicable, inmate face sheets with criminal history, and prior reports of sexual abuse if applicable. There was 1 Substantiated staff on inmate sexual abuse investigation during the review period. The investigation did not identify physical sexual interaction. The investigation was determined as Substantiated based on the review of the inmate phone records of staff and inmate conversations including explicit sexual content. There were 0 reported sexual abuse allegations during the review period, that resulted in the collection of physical and/or DNA evidence. This investigation was completed by the OIC Special Agent.

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, they do work closely with the prosecutors to obtain a conviction.

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 the 6 investigation files did not indicate the use of a polygraph or other truth-telling device or examination. Investigators indicated the credibility of an alleged victim, suspect, or witness is determined on an individual basis, but is not the determining factor in the investigative findings. The investigative findings are based on the preponderance of evidence collected and not on the status of an individual. Both investigators stated they have not and would not require a victim to submit to a polygraph examination. Interviews conducted with 2 inmates who reported allegations of sexual abuse confirmed they were not asked to submit to a polygraphy and/or other truth telling device.

115.71(f) TDOC Index 502.06.2 indicates 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. An interview with both the OIC Institution Investigator and the OIC Special Agent confirmed they include detailed information in an investigative report if a staff 's actions or lack of responsibilities contributed to facilitating the abuse. A separate investigative report would be submitted under such circumstances. The review of the 6 investigative cases confirmed there were no noted entries within the investigative cases where staff actions and/or failure in performing proper duties contributed to the reported PREA allegations.

115.71(g) TDOC 502.06.2 states criminal investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence. The review of the PREA investigative casefiles and interviews with both the OIC Institution Investigator and OIC Special Agent confirmed there were 1 Substantiated sexual abuse investigative findings during the 12-month review period. However, the staff on inmate sexual abuse investigation did not include criminal activities. All PREA investigations are documented in the PREA Allegation System (PAS) and maintained by the OIC Institution Investigator and OIC Special Agents.

The auditor requested the most recent Substantiated sexual abuse investigative case that included criminal charges. The auditor was presented with Substantiated staff on inmate sexual abuse investigation completed on August 1, 2019. The investigation contained testimonial documentation that supported criminal activities that resulted in a conviction.

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 1 Substantiated sexual abuse investigative findings during the 12-month review period. However, the staff on inmate sexual abuse investigation did not include criminal activities and the staff member was not referred for criminal prosecution.

The auditor requested the most recent Substantiated sexual abuse investigative case that included criminal charges. The auditor was presented with a Substantiated staff on inmate sexual abuse investigation that was completed on August 1, 2019. The staff member was indicated and charged with committing a sexual act with an inmate.

115.71(i) TDOC Index 502.06.2 states 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. 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. Per the OIC Special Agent, criminal investigative cases are maintained at the main office in Nashville, TN for 10 years or longer.

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 may be released and or transferred during an investigation, the investigation continues to include the arrest and prosecution of staff and/or inmate when applicable. A staff member who was alleged to have an inappropriate relationship with an inmate was interviewed on October 21, 2021, by the OIC Special Agent. At the conclusion of the interview, the staff member resigned his position as a correction officer. The investigation continued and was completed on November 2, 2021. Therefore, the investigation continued after the staff member submitted his resignation.

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, per interviews with the OIC Investigator, OIC Special Agent, Warden, and Associate Warden (T) /Facility PREA Coordinator and the review of a criminal PREA investigative casefile completed in August 2019, TDOC OIC Investigators complete all investigations.

Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, interviews with inmates who reported sexual abuse, Warden, OIC Investigators, WTRC Associate Warden/Facility PREA Coordinator, substantiated sexual abuse casefiles to include administrative and the criminal conviction of former staff member, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 300">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="229 300 1509 591" style="list-style-type: none"> <li data-bbox="229 300 1509 344">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="229 344 1509 389">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="229 389 1509 434">3. PREA Investigation Case Files <li data-bbox="229 434 1509 591">4. Interviews with: <ol data-bbox="229 546 1509 591" style="list-style-type: none"> <li data-bbox="229 546 1509 591">a. OIC Institution Investigator and OIC Special Agent <p data-bbox="229 591 1509 904">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 investigations 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. A review of the 6 investigative PREA casefiles confirmed the OIC Institution Investigation based the investigative findings on the preponderance of evidence collected through the inmate phone records, review of available video, interviews with alleged victims, alleged aggressors, and identified witnesses. The OIC Investigator conducted thorough investigations.</p> <p data-bbox="229 904 1509 1014">Based on the review of policies, interviews, review of the 6 completed PREA investigative case files, and analysis, the facility has demonstrated compliance with this standard.</p>

115.73	Reporting to inmates
	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="242 329 938 698" style="list-style-type: none"> <li data-bbox="242 329 767 356">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="242 387 938 414">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="242 445 687 472">3. TDOC PREA Status Notification CR-3984 <li data-bbox="242 504 424 530">4. Interviews with: <ol data-bbox="242 562 772 698" style="list-style-type: none"> <li data-bbox="242 562 772 589">a. OIC Institution Investigator and OIC Special Agent <li data-bbox="242 620 349 647">b. Warden <li data-bbox="242 678 644 705">c. Inmates Who Reported Sexual Abuse <p data-bbox="242 730 1493 1059">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 Warden, OIC Special Agent and OIC Institution Investigator confirmed at the conclusion of each PREA investigation, the inmate victim is notified of the investigative findings. There were 6 PREA allegations that included both sexual abuse and sexual harassment reported during the 12-month review period. Three PREA allegations were reported as sexual abuse. All reported PREA allegations were completed by the OIC Institution Investigator and/or the OIC Special Agent. Copies of the TDOC PREA Status Notification was observed in each of the completed 6 PREA investigative case files while noting the date the inmate received notification. Interviews were conducted with 2 inmates who reported allegations of sexual abuse during the 12-month review period. Each of the inmates reported they were informed of the investigative findings by staff.</p> <p data-bbox="242 1090 1430 1151">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 1182 1485 1341">115.73(c) TDOC Index 502.06.2 states 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.</p> <p data-bbox="242 1373 1485 1599">There were 1 substantiated staff-on-inmate sexual abuse determined during the 12-month review. The staff member resigned during the investigation prior to termination on October 21, 2021. The investigation was concluded on November 2, 2021, with an investigative finding of Substantiated. The Inmate PREA Allegation Status Notification form indicates the victim was informed on November 2, 2021, of the investigative findings in addition to the following notifications: a) The employee is no longer posted within the inmates' unit; and b) The employee is no longer employed at the facility. The victim was noted as refusing to sign as receiving notification. The second staff member served as a witness to the inmate's notification of the investigative findings.</p> <p data-bbox="242 1630 1485 1856">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. Per the review of the completed PREA investigative case files and interview with the OIC Institution Investigator, there has been 0 Substantiated allegations of inmate-on-inmate sexual abuse where the aggressor has been indicated pending criminal charges. However, interviews with 2 inmates who reported sexual abuse allegations determined as Unsubstantiated, acknowledged they were informed of the investigative findings by staff.</p> <p data-bbox="242 1888 1485 2150">115.73(e) TDOC Index 502.06.2 states 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 Investigators indicated all inmates are notified of the investigative findings upon completion of the investigation. The auditor reviewed the 6 completed PREA case files that included 3 sexual abuse allegations and 3 sexual harassment and confirmed all inmates were documented as notified of the investigative findings. However, 1 of the 6 inmate victims refused to acknowledge notification by signature. A second staff member signed as a witness to the inmates' receipt of notification. All notifications of the PREA investigative</p>

findings were documented on the Inmate PREA Allegation Status Notification, CR-3984, as presented to the inmates by the OIC Institution Investigative and/or by the WTRC Associate Warden (T)/Facility PREA Coordinator.

Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, presentation of PREA Allegation Status Notifications for each of the 6 PREA investigations, documentation of inmate's signatures and/or staff witness documenting informing the inmate, interviews with inmates who reported sexual abuse allegations, Warden and OIC Investigative staff, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 295">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="229 295 1509 470" style="list-style-type: none"> <li data-bbox="229 295 1509 336">1. WTRC Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="229 336 1509 403">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="229 403 1509 470">3. PREA Investigative Case Files <p data-bbox="229 470 1509 761">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.</p> <p data-bbox="229 761 1509 985">The PAQ identified one staff disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse) during the 12-month review. WTRC reported 1 substantiated staff on inmate sexual abuse investigative finding and 0 Substantiated staff on inmate sexual harassment investigative finding during the 12-month review period. On October 21, 2022, immediately upon the completion of the staff member's interview with the OIC Investigators, he resigned his position as a correctional officer. The investigation was concluded on November 2, 2021, and determined criminal charges were not committed during the prohibited acts committed by the staff member.</p> <p data-bbox="229 985 1509 1090">Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, staff's resignation letter, it is concluded that WTRC has demonstrated compliance with all the 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. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 5. Interviews with: <ol style="list-style-type: none"> a. Warden <p>115.77(a), (b) TDOC Index 502.06.2 states that 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, volunteers and contractors would be prohibited from further contact with any inmates and prohibited from entering the facility until the completion of the investigation is determined. Further actions would be determined upon the investigative findings that include reporting the individual to relevant licensing bodies as applicable. Per a review of the PAQ, and the PREA investigation case files, and interviews with the OIC Institution Investigator, and OIC Special Agent, there were 0 Substantiated contractor and/or volunteer staff-on-inmate sexual abuse cases during the review period.</p> <p>However, the auditor elected to include in the review a previous contractor on inmate Substantiated sexual abuse case concluded on August 1, 2019. The contract staff member admitted to involved sexual relationship with an inmate during the interview process. As the OIC Special Agent is a TDOC sworn law enforcement officer, the contractor was immediately arrested by the interviewing agent pending charges of felony sexual contact with an inmate and referred for prosecution.</p> <p>Based on the review of policies, PREA investigative case files, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Review of PREA Investigative Case Files 4. Interviews with: <ol style="list-style-type: none"> a. Warden b. Behavioral Health Administrator c. OIC Institution Investigator <p>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 WTRC PAQ, review of PREA Case Logs, PREA investigative case files, and interview with the OIC Institution Investigator, there was 0 Substantiated investigations of inmate-on-inmate sexual abuse and/or sexual harassment during the 12-month review period.</p> <p>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. There were no Substantiated PREA reported allegations to compare disciplinary sanctions of inmates. The most recent Substantiated sexual abuse cases were those that involved staff on inmate, not inmate on inmate. Per an interview with the Warden, he indicated any inmate found to have committed sexual abuse would receive disciplinary sanctions at the facility level prior to attending court appearance for the pending criminal charges.</p> <p>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 the Warden, the inmate's mental disability and/or mental illness would be considered in the determination of disciplinary sanctions for charges of sexual abuse. Per an interview with Behavior Health Administrator, she indicated mental health staff provide individual therapy services to inmates identified as an aggressor to include services that are available three times per month. Mental health counselors would meet with the inmate regularly while providing a variety of therapy activities. Inmates have the option to accept and/or refuse to participate in the available services at any time.</p> <p>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. A review of the PREA case files identified 1 Substantiated staff on inmate sexual abuse investigative finding. The inmate involved did not receive disciplinary action for this incident.</p> <p>115.78(f) TDOC Index 502.06.2 states, "For the purpose of disciplinary action, a report 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 no reported allegations of sexual abuse determined as Unfounded during the 12-month review period. However, an interview with the OIC Institution Investigator and review of the PREA case files, indicated although the two allegations of sexual harassment was determined as Unfounded, the inmates did not receive a disciplinary report.</p> <p>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. There were no incidents reported of consensual sexual activity that was determined to constitute sexual abuse during the 12-month review period.</p> <p>Based on the auditor's analysis of the information collected through review of policy, review of investigative case files, and interviews with Warden, Behavioral Health Administrator, OIC Investigators, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. PREA Mental Health Referrals 4. Interviews with: <ol style="list-style-type: none"> a. Medical and Behavioral Health Staff b. Staff who perform screening for risk of victimization and abusiveness c. Inmates that disclose victimization during PREA Screening <p>Received 786 new inmates 60 aggressors 16 prior victims.</p> <p>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. The PAQ indicated that 100% of inmates that reported prior sexual victimization sexual victimization or abusiveness were offered a follow-up meeting with a mental health provider.</p> <p>The facility reported 721 newly arriving inmates during the 12-month review. Fifty-three inmates were identified during PREA risk screening as prior victims of sexual abuse. The facility referrals all inmates identified as prior victims of sexual abuse and all inmates identified as a prior aggressor to mental health. The referrals are initiated during the initial PREA screening. The Institution Health Services Referral form (CR-3431) is completed by staff who conduct risk screenings upon the inmate being identified as a prior victim and/or a prior aggressor. Upon identifying the inmate as such, the form is signed by the referring staff while identifying the date and time the referral was submitted. The attending behavioral health services staff acknowledges the date and time the inmate was seen. The auditor randomly selected documentation review for 35 inmates who scored as prior victims of sexual abuse and confirmed all inmates were seen by mental health staff within 4 days of the submitted referral.</p> <p>Interviews were conducted with four inmates who was identified as prior victims of sexual abuse during their initial risk screening. All acknowledged being seen by mental health within days of their arrival at the facility.</p> <p>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 medical, mental health staff and staff who conduct risk screening, information related to sexual victimization or abusiveness that occurred in an institution setting is strictly limited to the medical and mental health staff, the TDOC State-wide PREA Coordinator and the Chief Counselor as this information is strictly limited. The information is used to ensure the safety of inmates identified as prior victims from those identified as an aggressor. Staff have access to the identification of victims and abusers as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments. The Job Placement Coordinator can only view an inmate's incompatibles for job placement.</p> <p>115.81(e) TDOC Index 502.06.3 indicates medical and mental health practitioners must obtain informed consent from an inmate before reporting prior sexual victimization that did not occur in correctional setting. Interviews conducted with the Health Services Administrator, Director of Nurses, and Mental Health Administrator verified that staff do obtain informed consent from inmates before reporting any knowledge or suspicion of sexual abuse. They stated if the incident reported involved a minor, they are required by law to report.</p> <p>Based on the auditor's analysis of the information collected through review of policies, review of mental health referrals, and interviews with inmates who reported prior sexual victimization, staff who conducts risk screening, medical and mental health staff, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.</p>

115.82	Access to emergency medical and mental health services
	<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 1497 936">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. PREA Resource Center Lesson Plan – Specialized Training for Medical/Mental Health Care Standards states an initial medical evaluation and subsequent intervention focused solely upon injury or trauma sustained during the assault shall be conducted. Following any report by an inmate concerning sexual assault, the inmate will be brought to medical for an examination to address any immediate medical needs. The clinician will identify and triage inmates that require medical intervention, and provide treatment (First Aide type, ice bandages etc.) necessary to stabilize the inmate prior to and during transfer to a facility for forensic examination. An interview with the Health Services Administrator (HSA) and Director of Nursing 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/SAFE and/or attending doctor at the local hospital and the facility doctor. An interview with the Behavior Health Administrator indicated mental health staff is on-call 24/7 and if penetration is not involved, the inmate would be seen the next business day, however, it would always depend on the circumstances of the reported sexual assault. Medical and mental health staff indicated upon the inmate's return to the facility, the inmate may be placed on medical observation where he would be monitored by both medical and mental health staff prior to returning to general population housing. During placement on medical observation, the inmate would be monitored 24/7 via video by security staff. Both medical and mental health staff indicated services are provided in accordance with their professional judgement, law and within TDOC policies.</p> <p data-bbox="242 965 1497 1025">The auditor interviewed two inmates who reported allegations of sexual abuse. However, neither of these allegations alleged penetration that resulted in sufficient evidence to support their allegation and/or allegations that required medical treatment.</p> <p data-bbox="242 1055 1497 1149">An interview was conducted with a non-security staff member who served as a first responder. The reported incident was reported to have previously occurred, did not include sexual penetration and/or sexual activities. he inmates had previously separated themselves. He escorted the alleged to shift commander who proceeded with further actions.</p> <p data-bbox="242 1178 1497 1373">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 WTRC 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 respond 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, medical staff is on duty 24/7 daily to include weekends.</p> <p data-bbox="242 1402 1497 1496">The most recent substantiated sexual abuse investigative finding was concluded on September 26, 2016, that involved staff on inmate sexual penetration. The inmate was seen by medical staff and transported the local hospital for a forensic medical examination</p> <p data-bbox="242 1525 1497 1821">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. The most recent substantiated sexual abuse investigative finding that involved sexual penetration was reported on September 26, 2016. Sexual penetration was confirmed by both staff and the inmate. Due to the previous release date of the inmate, the case file was stored in the achieve storage building that was destroyed in February 2020, by severe storms and tornadoes ripped across the state of Tennessee shredding at least 40 buildings, causing severe damage in the state capital and killing at least 19 people. An extensive effort was made by the agency to collect documents that were disperse throughout the unknown without success. Per an interview with the TDOC State-wide PREA Coordinator, the agency has yet to locate five government issued vehicles that were stored at the location.</p> <p data-bbox="242 1850 1497 2011">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. The medical and mental health staff assigned at WTRC during the site visit, were not employed at the facility in 2016. However, each stated an inmate would not be held responsible for the financial cost of medical and or mental health treatment following a sexual assault.</p> <p data-bbox="242 2040 1497 2101">Based on the review of policies, PREA investigations, 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>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.03 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. Interviews with: <ol style="list-style-type: none"> a. Medical and Behavioral Health Staff b. Inmates Who Reported Sexual Abuse <p>115.83(a) TDOC Index 502.06.3 addresses the requirements of this standard. 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 7 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. An interview with medical staff indicated they would meet with the victim upon their return to the facility and follow-up services would be based on the individual's treatment needs. An interview with the Behavioral Health Administrator indicated staff are on call 24/7 and depending on the circumstances of the alleged abuse staff would report to the facility immediately and/or the next business day. There have been 0 incidents of reported sexual abuse that alleged sexual penetration and/or required medical treatment since September 26, 2016. The victim was escorted to the local hospital where a forensic medical examination was completed.</p> <p>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. TDOC facilities offer follow-up services within the correctional facilities. Per interviews with the Health Services Administrator, Director of Nurses, and Behavioral Health Administrator, upon the inmate's release from custody, he would receive medication for 30-days and case managers within both departments would work together to set up initial appointments as close as possible to the inmate's release community. The initial services are the County Health Department, specialty clinics that provide professional care services and medication management as needed. There have not been any incidents of reported sexual abuse that alleged sexual penetration and/or required medical treatment since September 26, 2016.</p> <p>115.83(c) Interviews with medical staff and mental health staff, all indicated the level of care provided to the inmate population is nothing less than equal to the level of care within the communities and in most cases, they felt the services exceed the community level of care.</p> <p>115.83(d) & (e) TDOC 502.06.3 inmate victims of sexual 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. There was 0 occurrences of sexual abuse reported during the review period that included sexual penetration.</p> <p>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. Interviews with inmates who reported allegations of sexual abuse confirmed they did require medical treatment as sexual penetration was not involved.</p> <p>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 Behavior Health Administrator, mental health staff are required to complete a mental health evaluation of all known inmate - on - inmate abusers and offer treatment if appropriate. The inmate would be seen within 14 days of the investigative finding. The inmate would be offered services but has the option to refuse. However, there have not been any inmates identified as an inmate – on -inmate abuser within the past few years at WTRC. The inmate would be offered services but has the option to refuse.</p> <p>Based on the auditor's analysis of the information collected through review of policies, review of investigative case files, and interviews with medical and mental health supervisors, it is concluded that WTRC has demonstrated compliance with all the provisions of this standard.</p>

115.86	Sexual abuse incident reviews
	<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. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Sexual Abuse Incident Review Reports 4. Interviews with: <ol data-bbox="242 557 1038 640" style="list-style-type: none"> a. Warden b. Associate Warden/Facility PREA Coordinator/Incident Review Team Member <p data-bbox="242 672 1481 931">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.</p> <p data-bbox="242 963 1493 1124">The PAQ identified in the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" as 4. However, this number was identified as incorrect. The correct number is 3. A review of the 6 investigative PREA case files confirmed there were 1 Substantiated sexual abuse investigative findings for staff on inmate and 2 Unsubstantiated inmates on inmate sexual abuse investigative findings. The remaining 3 investigative case files were based on allegations of sexual harassment.</p> <p data-bbox="242 1155 1441 1216">A staff on inmate sexual abuse investigative finding of Substantiated was concluded on November 2, 2021. The incident review for this case was also conducted on November 2, 2021, by the SART.</p> <p data-bbox="242 1247 1493 1308">An inmate-on-inmate sexual abuse investigative finding of Unsubstantiated was determined on August 24, 2021. The incident review was conducted by the WTRC SART on September 17, 2021.</p> <p data-bbox="242 1339 1474 1400">An inmate-on-inmate sexual abuse investigative finding of Unsubstantiated was concluded on October 27, 2021. The SART conducted the incident review of this case on November 3, 2021.</p> <p data-bbox="242 1431 1485 1554">SART members who served on the incident review team were identified as the Warden, Associate Warden (T)/Facility PREA Coordinator, Line Staff Supervisor, OIC Institution Investigator, Acting Health Services Administrator, Chief Counselor, and the Behavior Health Administrator. The three incident reviews were conducted by the SART within 30 days of the completed investigation.</p> <p data-bbox="242 1585 1481 2083">115.86(d) (e) TDOC 502.06.2 requires the review team to a) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; b) Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation, or other group dynamics at the facility; c) Examine the area in the facility or facility grounds where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. d) Assess the adequacy of staffing levels in that area during different shifts; (e) Assess whether monitoring technology should be deployed or augment to supplement supervision by staff; f) Prepare a report of its findings, including but not limited to, determinations made in accordance with (a-c) and any recommendations for improvement and submit such report to the Warden/Superintendent. Per an interview with the Warden and Associate Warden (T)/ Facility PREA Coordinator each identified the Sexual Abuse Incident Review team consist of SART members who are supervisory staff within various departments in accordance with the PREA standards provision. Both stated the team meets monthly to review the most recent PREA investigations to identify any necessary corrective actions needed and recommendations to include policy changes, the assignment of and/or training to staff, the elimination of blind spots and/or other measures that could have contributed to an opportunity of sexual abuse occurring. Both acknowledged the safety of staff and the inmate population from incidents of sexual abuse is a priority of not only the facility and TDOC.</p> <p data-bbox="242 2114 1474 2143">The auditor reviewed the Sexual Abuse Incident Review Reports and confirmed staff documented the reviews with a review</p>

of the following: consideration of whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; assessed whether monitoring technology should be deployed or augment to supplement supervision by staff; examined the area in the facility where the incident allegedly occurred to assess whether physical barriers to the area may have enabled abuse; assessed the adequacy of staffing levels in the area during different shifts and considered whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBT identification, status or perceived status, or gang affiliation, or was motivated or caused by other group dynamics of the facility, a that may have enabled abuse. A copy of the incident review is scanned and electronically forwarded to the State-wide PREA Coordinator for consideration of approval.

Based on the review of TDOC policy, the 3 sexual abuse investigative case files, Sexual Abuse Incident Review Reports, interviews with the Warden and Associate Warden (T)/WTRC PREA Coordinator who are members of the Incident Review Team, and analysis, the facility is compliant with all provisions of this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<ol style="list-style-type: none"> 1. WTRC Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. 2020 Annual SSV PREA Report 4. Interview 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 PREA Coordinator shall ensure that data collected is securely retained. The TDOC 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. Per the TDOC State-wide PREA Coordinator, he is actively involved in the notification of all reported PREA allegations from each of the TDOC facilities. He has access to program that allow him to review and collect all data submitted by the OIC Investigative staff and maintain an open line of communication while discussing various cases upon receipt of notification.</p> <p>115.87(e) TDOC Index 502.06 states, "The TDOC 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. Copies of the Substantiated PREA allegations reports that contain PREA allegations for each TDOC and each of the four privately contracted facilities were submitted for review. Per the TDOC Stare-wide PREA Auditor, in addition to the contract monitor assigned at each privately operated contract facility, he also monitors the reported PREA allegations at each.</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 for 2021.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility has demonstrated compliance with all provisions of this standard.</p>

115.88	Data review for corrective action
	<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="240 331 986 698" style="list-style-type: none"> 1. WTRC 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. TDOC State-wide PREA Coordinator b. TDOC Agency Head Designee <p data-bbox="240 730 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 receives a monthly report of all allegations reported at each TDOC facility.</p> <p data-bbox="240 1191 1485 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="240 1415 1485 1509">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="240 1541 1485 1697">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 (date error made should be 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="240 1729 1485 1792">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. WTRC 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. Review of Contract Facilities Reported PREA Data 6. 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 757">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 third audit cycle for WTRC. The Agency oversees 11 facilities and the agency website had PREA audit reports posted for all facilities during the past audit cycle. The auditor had been provided with extensive files prior to the 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. The auditor was given access to and the opportunity to tour and visit all areas of the facility. Inmates confirmed their observation of the notice of audit posted throughout the institution and the auditor's name and mailing address to submit confidential correspondence. Per an interview with mailroom staff, inmates are allowed to forward confidential correspondence to the auditor in the same manner as mail addressed to legal counselor. However, the auditor did not receive any the correspondence from staff and/or the inmate population.</p> <p data-bbox="229 757 1509 804">Based on the above, the facility has demonstrated substantial compliance with all provisions of this standard.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	<p data-bbox="229 192 1509 255">Auditor Discussion</p> <p data-bbox="229 255 1509 461">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 15 previous PREA reports completed for the 11 correctional facilities operated by TDOC and the four correctional facilities contracted out by TDOC. Final reports were published on the agency website within 90 days of issuance to include those facilities that are contracted by the TDOC.</p> <p data-bbox="229 461 1509 539">Based on the review of the TDOC Agency's website, and confirmation of the identified four contract facilities, TDOC has demonstrated 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).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
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?	no
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	no

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.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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.)	na
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.)	na
	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.)	na
	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.)	na
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.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in 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).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	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).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior 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.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

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

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant 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