

PREA Facility Audit Report: Final

Name of Facility: Lois M. DeBerry Special Needs Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/17/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
Auditor Full Name as Signed: Debra D. Dawson	Date of Signature: 12/17/2022

AUDITOR INFORMATION	
Auditor name:	Dawson, Debra
Email:	dddawsonprofessionalaudits@gmail.com
Start Date of On-Site Audit:	12/07/2022
End Date of On-Site Audit:	12/09/2022

FACILITY INFORMATION	
Facility name:	Lois M. DeBerry Special Needs Facility
Facility physical address:	7575 Cockrill Bend Boulevard , Nashville , Tennessee - 37209
Facility mailing address:	

Primary Contact	
Name:	Gary Hatfield
Email Address:	Gary.S.Hatfield@tn.gov
Telephone Number:	6294018975

Warden/Jail Administrator/Sheriff/Director	
Name:	James Holloway
Email Address:	james.michael.holloway@tn.gov
Telephone Number:	615-927-0224

Facility PREA Compliance Manager	
Name:	Gary Hatfield
Email Address:	gary.s.hatfield@tn.gov
Telephone Number:	O: 629-401-8975

Facility Health Service Administrator On-site	
Name:	Stacey Williams
Email Address:	stacey.l.williams@tn.gov
Telephone Number:	615-626-3981

Facility Characteristics	
Designed facility capacity:	764
Current population of facility:	617
Average daily population for the past 12 months:	661
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-75
Facility security levels/inmate custody levels:	Minimum Trustee to Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	320
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	147
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	13

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"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.41 - Screening for risk of victimization and abusiveness
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:	2022-12-07
2. End date of the onsite portion of the audit:	2022-12-09

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 Sexual Assault Center spoke with the facility's PREA Coordinator. IN addition to a representative with the JDI

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	854
15. Average daily population for the past 12 months:	625
16. Number of inmate/resident/detainee housing units:	24
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:	614
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:	100
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:	130
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:	2
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:	4
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:	0

<p>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:</p>	<p>0</p>
<p>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:</p>	<p>0</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>0</p>
<p>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):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>320</p>

<p>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:</p>	<p>20</p>
<p>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:</p>	<p>190</p>
<p>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:</p>	<p>No text provided.</p>

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>26</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Inmates were selected from each of the housing units. The auditor requested a roster of inmates identifying their date of arrival, race, housing unit, and age. A selection of inmates for interviews was chosen as such.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Explain why it was not possible to conduct the minimum number of random inmate/resident/detainee interviews:</p>	<p>There were no inmates identified as transgender, gay, bi-sexual, placed in segregation due to being at a high risk of sexual victimization, or inmates in segregation who reported sexual abuse. There were no inmates identified at the facility who were Limited English Proficient. The auditor exceeded the number of required random inmates due to numerous categories of the target groups were not identified as housed at the facility during the site visit.</p>
<p>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):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>10</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:</p>	<p>2</p>
<p>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:</p>	<p>2</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>2</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>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>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>The auditor questioned staff and the inmate population regarding inmates within this category and was advised by staff and the inmate population to include the Hispanic population of inmates to include observation during the site visit for those inmates that may be LEP.</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>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>The auditor questioned staff and the inmate population regarding the housing of inmates within this category in addition to observation during the site visit.</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>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>The auditor questioned staff and the inmate population regarding the housing of inmates within this category in addition to an observation during the site visit.</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>1</p>
<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:</p>	<p>2</p>

<p>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:</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>The auditor questioned security supervisors, staff assigned to segregation, the DSNF PCM and Warden as the housing of inmates within this category in addition to the review of PREA investigative case files.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>There were no inmates housed at the facility during the site visit within the following target groups: youthful, gay, bi-sexual, transgender, lesbian, place in segregated housing for risk of sexual victimization/who alleged to have suffered sexual abuse</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>19</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>If "Other," describe:</p>	<p>Interviews with various races in white, black Hispanic in addition to both male and female staff during all shifts.</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>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>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>27</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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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
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<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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).</p>	<p>No text provided.</p>
<h2 style="text-align: center;">Documentation Sampling</h2>	
<p>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.</p>	
<p>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?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>

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	3	0	3	0
Staff-on-inmate sexual abuse	5	0	5	0
Total	8	0	8	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	15	0	15	0
Total	17	0	17	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	3	0	0
Staff-on-inmate sexual abuse	0	2	1	2
Total	0	5	1	2

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	0	1
Staff-on-inmate sexual harassment	0	14	1	0
Total	0	15	1	1

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:

20

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</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 sexual abuse investigation files)</p>
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Inmate-on-inmate sexual abuse investigation files

<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
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<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal 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>
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<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>
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Staff-on-inmate sexual abuse investigation files

<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
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<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal 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>
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<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>
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Sexual Harassment Investigation Files Selected for Review

<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>12</p>
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<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 checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
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Inmate-on-inmate sexual harassment investigation files

<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal 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>
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<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>
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Staff-on-inmate sexual harassment investigation files

111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	10
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The auditor had the opportunity to request and review all investigative casefiles, to include administrative and criminal investigations. There were zero criminal investigations initiated for investigation during the 12-month review period throughout the post audit period.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

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

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: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF 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. DSNF Organizational Chart and TDOC Organization Chart 5. DSNF Index 502.06.2-1 PREA Allegations, Investigations, and SART 6. Interviews with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator (PREA Correctional Program Director II) b. DSNF PREA Compliance Manager (PCM) <p>115.11(a) The agency and facility have a comprehensive written policy that mandates zero tolerance toward all types of sexual abuse and sexual harassment. Index TDOC.502.06 states it is the policy of the TDOC to provide a safe, human, and appropriately secure environment, free from a threat of sexual abuse and sexual harassment for all inmates, by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged and substantiated sexual assaults and sexual harassment. 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>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, PREA Correctional Program Director II, and Director of Decision Support: Research and Planning for review.</p>

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). This 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 those persons involved. The Head of Agency Designee, Warden and PREA Correctional Program Director II indicated monthly PREA walks, meetings, and reports are conducted in accordance with TDOC policy and inspection standards such as why an incident occurred in a particular area, and what corrective actions could be applied if applicable. SART review security equipment and submit recommendations for mirrors and video placement that could serve as a level of protection for inmates from sexual assault or sexual abuse during the monthly walk through. A work order is submitted as needed and is required to be completed within 30 days of submission. The designated victim advocates are also members of the SART. A review of the monthly PREA Walk-Throughs completed during the 12-month review period conducted by the members of SART were presented for review. The meeting minutes documented concerns noted to include but not limited camera workorders, identifying the need for additional cameras, unsecured doors, quizzing staff on their responsibility as a first responder to an allegation of sexual abuse, etc. notifications to the Associate Warden (T) and corrective measures taken.

115.11(b) The agency has designated a PREA Correctional Program Director II, who is assigned the duties of overseeing the agency's efforts regarding PREA in all its facilities. The agency's organizational chart was reviewed. The chart shows the PREA Correctional Program Director II 's position reports directly to the Director of Compliance Audit I. Per an interview with PREA Correctional Program Director II, he confirmed he has the time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities.

115.11(c) The facility has a PREA Coordinator who holds the position of Associate Warden (T) who reports directly to the Warden. The organizational chart also identifies an on-site DSNF PREA Compliance Manager (PCM) who is responsible for ensuring the facility's compliance with PREA standards. The facility's organizational chart was provided for review. The chart shows the PCM position as a dedicated position who reports directly to the Warden. The auditor interviewed the PCM and confirmed that he has time to oversee the facility's efforts to comply with the PREA standards.

Based on the review of policies, organization charts, responsibilities of the SART that includes monthly walk-throughs to identify and address any concerns with safety in the prevention of sexual abuse and their attention in detail to identify the necessary corrective actions to include on the spot, in addition to interviews and observation during the site visit, DSNF exceeds in meeting the mandate of the standard provisions.

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. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. Administrative III PREA Standards for Adult Prisons & Jail 115.11-115.89 CORE CIVIC FACILITY 3. Interview: <ol style="list-style-type: none"> a. PREA Correctional Program Director II / Agency Contract Monitor <p>DSNF 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 PREA Correctional Program Director II 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>Contract facilities utilize the Administrative III PREA Standards for Adult Prisons & Jail 115.11-115.89 audit tool for CORE Civic Facility as a monitoring tool. The facilities' most recent PREA audits were submitted as the following: Hardeman County Correctional Facility on August 26, 2020; South Central Correctional Center on December 26, 2021; 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
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1281 1093" style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education and Compliance 3. DSNF Annual Staffing Review 4. Post Assignment Rosters 5. Logbooks documenting unannounced rounds. 6. Observation while on-site 7. Interviews with: <ol data-bbox="256 913 823 1093" style="list-style-type: none"> a. Warden c. Intermediate or Higher-Level Staff d. PREA Correctional Program Director II <p data-bbox="256 1128 1461 1496">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 DSNF 2022 Staffing Plan was presented for review and included the review of all elements per the standard provision and is documented on an agency-wide standardized form.</p> <p data-bbox="256 1532 1461 1908">The facility staffing plan is developed with minimum operational staffing levels in mind and a daily staff roster is reviewed to ensure adequate staff in accordance with the stated staffing plan. The average daily number of inmates since the last PREA audit was identified as 661 and the average daily of inmates on which the staffing plan was predicated for was 854. The staffing plan considers all the criteria required for a staffing plan as required in this standard and provides areas for narrative, and any recommendations. The daily rosters identify positions, staffing requirements for those positions and reconciles the staffing deployment in accordance with the position requirements outlined in the staffing plan.</p> <p data-bbox="256 1944 1461 2069">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</p>

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.

Interviews with the PREA Correctional Program Director II, Warden and DSNF PREA Compliance Manager indicated the facility does conduct a staffing plan review at least annually that include the elements of the standard provision. A copy of the most recent copy of the DSNF Staffing Plan was presented for review and documented the review of the standard provision. The Staffing Plan was reviewed by the Chief of Security, Associate Warden of Security, Associate Warden of Treatment/ Facility PREA Coordinator, Warden, on June 29, 2022, and a final review by the PREA Correctional Program Director II on July 22, 2022.

A copy of the DSNF 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 DSNF Master Post Assignment Schedule, CR3370 was submitted by the DSNF Warden to the Assistant Commission of Prison for approval on August 16, 2021. The Warden is required to submit a request to the Assistant Commission of Operations to add and/or remove a correctional post. 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-compliant with the staffing plan. Any deviations from the staffing plan would be documented on the daily roster with an explanation. Per the Warden, he is included in the review of all security staff rosters on a weekly basis upon being developed by the Administrative Lieutenant and prior to release to the Shift Commanders. The review is conducted to ensure all post assignments are covered as required by the staffing plan. All critical posts are filled whether by the reassignment of staff on non-critical posts, overtime and/or the assignment of management staff.

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.

The monthly unannounced PREA walk-throughs conducted by the SART assistance in the monitoring of the staffing plan by identifying possible blind spots, security staffing level on assignments, and the review of PREA investigations during the incident reviews.

The auditor randomly selected security staff rosters for the third Friday of even months and second Sunday day rosters for odd months 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 documented 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 on each day and all shifts.

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. The 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 and were identified as conducted throughout the shifts by various supervisors to include security and unit management in addition to the Warden, Associate Wardens, and other department head staff. Documentation of unannounced rounds conducted during the first Saturday evening shift and last Thursday first shift was collected. Confirmation of supervisory rounds were also indicated by supervisory staff during their interviews and the security staff assigned to the various housing units. Each security supervisory staff stated they visit the housing units at a minimum of three times per shift and alternate their rounds that prevents staff and inmates' awareness of supervisory staff approaching their housing units.

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

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.14.2 Housing, Programming of Youth Inmates 3. Observation during onsite tour 4. Interviews with the following: <ol style="list-style-type: none"> a. Associate Warden (T)/Facility PREA Coordinator b. Staff c. Inmates <p>TDOC 506.14.2 indicates for the purpose of the policy only, juvenile offenders are persons between the ages of 16 and 18 who are sentenced and committed to the TDOC by court having adult criminal jurisdiction. Review of the PAQ, policy and interviews confirmed the facility does not house youthful inmates. The DSNF PAQ, and Associate Warden (T)/Facility PREA Coordinator identified the age range of inmates housed at the facility are between 18-75 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>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
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1228 1164" style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, Compliance 3. TDOC Index Personal Hygiene for Inmates 4. TDOC Index 506.06 Searches 5. TDOC Index 113.37 Gender Dysphoria 6. TCA Lesson Plan- Personal Searches 7. Training records 8. On-site Observation 9. Interviews with: <ol style="list-style-type: none"> a. Random staff b. Inmate Population <p data-bbox="256 1200 1477 1818">115.15(a) 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 that should circumstances allow, staff should consult with a transgender or intersex inmate before conducting a search to determine the inmate’s preference in the gender of the officer conducting the search. TDOC Index 506.06 Searches states that routine strip searches and/or visual body cavity searches will occur in authorized areas. Searches based on reasonable suspicion require the Warden’s authorization. Staff interviews did not indicate any cross-gender strip or cross-gender visual body cavity searches of inmates, including any exigent circumstances, conducted by security or medical staff. The PAQ listed zero cross-gender strip or cross-gender visual body cavity searches of inmates in the past 12 months. DSNF houses adult male inmates only. Inmates interviewed did not report being subjected to cross-gender viewing by staff during a strip search or visual cavity search other than medical staff.</p> <p data-bbox="256 1854 1461 2060">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. Discussion with staff and on-site observations verified that DSNF utilized both male and female to conduct frisk search and only male staff to conduct visual searches of the male inmates. Interviews with staff and inmate population confirmed</p>

female staff does not conduct a visual search on a male inmate.

115.15(c) Body cavity searches require prior written authorization from the managing official or designee before conducting a body cavity search. The facility reported zero cross-gender strip or cross-gender visual body cavity searches of inmates including any exigent circumstances, conducted by security or medical staff in the past 12 months. Staff 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. Inmate interviews did not indicate any occurrence of cross-gender viewing by staff during a strip search or visual cavity search.

115.15(d) DSNF Index 502.06.2-1 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 interviews with 37 inmates they all acknowledged the female staff always announce themselves when entering the housing unit. Staff interviews also confirmed it is a common practice of the female staff announcing themselves prior to entering the housing units. There were no inconsistencies in this practice identified. During the tour it was noted that the facility implemented procedures that allow inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. All housing units were observed to have shower doors and curtains in place that allow inmates to use both the bathroom and shower facilities without being observed by staff of the opposite gender. Inmates indicated during interviews stated they were not able to be viewed by opposite gender staff when using the toilet, showering, or changing clothes.

115.15(e) TDOC Index 506.06 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. All staff interviewed reported that the facility prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining genital status. There were zero inmates identified as transgender and/or intersex during the 12-month review period and/or during the site visit.

115.15(f) TDOC Index 506.06 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. Likewise, policy also states, "Males shall not conduct searches of females" except during exigent circumstances a managing official or a designee may authorize a male officer to conduct a frisk search on a female inmate provided that the officer does not touch the breast or genital area of the inmate. Strip searches are performed exclusively by two staff of the same gender this including a provision for transgender or intersex inmates who prefer to be searched by a specific

gender of staff. The facility provides training on LGBTI and Frisk/ Body Searches, Restraints, and Scanning Devices. Training topics, including definitions, were found to be consistent with the definitions contained in the standards. The Pre-Audit Questionnaire noted that 100% of staff have been trained. Random staff interviews indicate they received training regarding cross gender, transgender, and intersex search procedures. Confirmation of security staff completion of Search training that include how searches of transgender inmates was submitted for review. There were zero inmates who identified as transgender and/or intersex at the facility for an interview. There were no exigent circumstances identified in the past 12 months that required a cross gender visual search by female staff on a male inmate.

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

<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
<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. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. TDOC Index 103.10.1 Title VI – Limited English Proficiency (LEP) 4. DSNF LEP Program Plan 5. Translation Services Documentation and Contract 6. On-site Observation 7. Interviews with: <ol style="list-style-type: none"> a. Agency Head b. Inmates with Disabilities c. Random Staff <p>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 an assessment during the intake process will determine if the inmate requires language or literacy assistance. The review of “Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities (As required by the Civil Rights Act of 64) 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, and parole hearings. The plan lists outside agencies that are available to provide a variety of services for inmates with a range of disabilities to include LEP. The inmate will be offered a Language Identification Guide to make the determination. An interpreter will be provided through utilization of institution staff, volunteers, or contract interpreters to determine the extent of their proficiency. A list of bilingual staff is identified within</p>	

the plan and updated as needed. The current list of staff with bilingual abilities include staff to provide translation services in the languages of Spanish, Bini, Yoruba, Crio/Creole, Arabic, and Chinese. Staff documents the provision of an interpreter by name on E-TOMIS Contact Notes (LCDG). At orientation inmates are provided a copy of the Inmate Handbook that covers the agency's zero-tolerance policy. This information is provided in English and Spanish. Additionally, inmates also participate in a video that specifically covers PREA topics to include the agency's zero-tolerance policy; how to report sexual abuse and sexual harassment; agency policy regarding sexual abuse and sexual harassment; and inmate rights regarding sexual abuse, sexual harassment, and retaliation. The video presentation has audio and is also available in Spanish. Sign language services are available through Statewide Visual Communication Services. This information is explained verbally by staff to those inmates with mental disabilities within a manner they can understand.

An Interagency agreement between the State of Tennessee Department of Corrections and Tennessee Foreign Language Institute has been established for the contractor to provide qualified language interpreter services for non-English speaking inmates. The most recent Interagency Agreement between the State of Tennessee Department of Corrections and the University of Tennessee was dated with an effective date of July 1, 2021, through June 30, 2023, to provide interpretation and translation services. These services are available as needed for the inmate population.

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. The most frequent translation services are used for the Spanish language and not by the Tennessee Language Center. A telephonic interpreter was utilized to provide translation services in the language of Ethiopian to an inmate. Documentation of these services were noted in the inmate's Contact Notes within the TOMIS.

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. For someone who has an identified physical or mental health issue, medical and mental health monitor and meet with those individuals regularly to ensure they have equal access to programs especially PREA. Modifications are made to ensure that the offender understands (i.e., sign language for deaf inmates.). For the LEP offenders, there are two state contractual agreements for services and there are in-house translators on staff that can converse in other languages.

The following inmates were identified and interviewed within this standard: 2- physically disabled; 2 - hard of hearing; 1- blind; 1 with low vision (blind in one eye); 2- cognitive disability. There were no inmates designated at the DSNF identified as Limited English Proficient by staff and/or the Hispanic inmate population. Interviews with each of the inmates with disabilities stated they were provided PREA education in a manner that they were able to understand while observing the PREA video, through hearing, reading and/or during the verbal orientation class presented by staff. All were aware of how to report an allegation of sexual abuse and sexual harassment that included their awareness of the PREA Hotline numbers posted throughout the facility. The inmate identified as totally blind stated in addition to reporting to staff he was able to use the inmate telephones while identifying the PREA Hotline *9222 and *9555. Those inmates identified with a cognitive disability also identified their awareness of the PREA Hotline *9222 and *9555 posted throughout the facility

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 relay 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 inmates' allegations under CFR 115.64 and Policy #502.06.2 Interviews with 19 random staff confirmed they would not utilize inmates as translators for an inmate when reporting a PREA allegation. The Shift Commander would be notified and would coordinate the appropriate translation services.

Based on the review of policies, Interagency Agreement between the State of Tennessee Department of Corrections and the University of Tennessee, interviews with staff, inmates with disabilities, the facility has demonstrated compliance with all the provisions of this standard

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>1</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 301.04 Job Requirements 3. TDOC Index 502.06 PREA Implementation, Education and Compliance 4. TDOC PREA Self Declaration Form 5. TDOC PREA Questionnaire for Prior Institution Employees 6. Hiring and Promotional Records 7. Criminal History Background Records Check Documentation 8. Interviews with: <ol style="list-style-type: none"> a. Human Resources Administrator b. DSNF Religious Services Chaplain c. Religious Services Volunteer <p>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>

The PAQ identified 116 staff who were hired during the 12-month review period. The auditor randomly selected 10 -TDOC staff, 11- medical; 3- mental health; 2 -Aramark; and 6 - Volunteers and 10 - staff 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.

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.

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.

Per an interview with the HRM, she explained during the background check for contract workers, the contract worker reports to an outside vendor to complete their fingerprints. The information collected goes directly to the Tennessee Bureau of Investigation and possibly the Federal Bureau of Investigations (FBI). The HRM stated although the contracting agencies conduct prior background investigations on their staff, the TDOC also conducts an individual background check on all contract staff prior to hiring and entering the facility. Contract staff background checks are conducted in July annually.

Per an interview with the facility's Chaplain, he inserts the required information for the completion of background checks and the results are received by the Director of Religious Services for all volunteers prior to their approval to serve as such. All volunteer background checks are required to be conducted annually. The auditor requested confirmation of (6) volunteers background checks with no discrepancies

noted. An interview with one religious services volunteer confirmed he was required to submit to a background check prior to entering the facility and the completion of the TDOC PREA Self Declaration for Sexual Abuse/Sexual Harassment.

TDOC utilized the NCIC to conduct all background investigations for new hires and annual background checks. The PAQ identified 116 staff was hired and 43 staff promotions during the 12-month review period. The auditor randomly selected the following for confirmation of background checks: 10 -TDOC staff, 11- medical; 3- mental health; 2 -Aramark; and 6 - Volunteers and 10 - staff annual background checks that included those staff who received promotions. There were no discrepancies noted.

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 each TDOC work location will be responsible for compiling a monthly list of employees who have birthdays with each month. 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. She continued in stating as staff are required to acknowledge that an annual background check is required to be completed annually during their birth month, notification to the affected staff members is not required. However, staff are required to submit an annual PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 to ensure compliance with PREA Standard during their birth month and in the event, they are seeking a promotion. The auditor randomly selected 10 staff for confirmation of an annual background check. Documentation supporting a criminal background investigation was completed through the NCIC for each 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, contact and volunteers in addition to a current employee request for promotion. They were provided for the following: 10 -TDOC staff, 11- medical; 3- mental health; 2

-Aramark; and 6 - Volunteers and 10 - 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 various departmental staff background checks to include TDOC staff, contract staff and volunteers to include annual background investigations, submission of completed PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, that is a section of the application process and required to be submitted annually by staff and when applying for promotions, review of agency policies, DSNF does met all provisions of the standard.

115.18	<p data-bbox="240 91 1503 1747">Upgrades to facilities and technologies</p> <p data-bbox="240 174 1503 241">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 248 1503 315">Auditor Discussion</p> <p data-bbox="240 322 1503 389">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="240 396 1503 851" style="list-style-type: none"> <li data-bbox="240 396 1503 463">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="240 470 1503 560">2. TDOC Index 108.01 Facility Construction, Renovation, and Physical Plant Maintenance <li data-bbox="240 566 1503 633">3. Observation <li data-bbox="240 640 1503 851">4. Interviews with: <ol data-bbox="240 716 1503 851" style="list-style-type: none"> <li data-bbox="240 716 1503 784">a. Warden <li data-bbox="240 790 1503 851">b. Agency Head Designee <p data-bbox="240 857 1503 1209">115.18(a) (b) 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. Per an interview with the DSNF Warden, there has not been any substantial expansion, and/or modifications to the facility since the last PREA audit. Additionally, although the facility has been awarded funds for the installation of additional cameras and/or upgraded, the project has not yet begun.</p> <p data-bbox="240 1216 1503 1568">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, all modification requires request and approval. Any request submitted must also account for any additional cameras or mirrors that will be necessary to add to the area to ensure sexual safety. Additionally, the agency utilizes video recording systems to monitor and record activities within the facilities. This tool is utilized to cover blind spots, to verify allegations, and to hold individuals accountable for their actions.</p> <p data-bbox="240 1574 1503 1747">Based on the review of policies, observation during site, auditor’s analysis and interviews with the Agency Head Designee, and DSNF Warden, DSNF meets all provisions of the standard.</p>
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115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1481 1276" style="list-style-type: none"> <li data-bbox="256 412 963 448">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1276 519">2. TDOC Office of Investigation and Compliance Evidence Protocol #005 <li data-bbox="256 555 1171 591">3. Warden’s Memorandum Identifying Facility’s Victim Advocates <li data-bbox="256 627 1481 707">4. TDOC Index 502.06.2-1 PREA Allegations, Investigation and Sexual Abuse Response Team (SART) <li data-bbox="256 743 807 779">5. DSNF Index 502.06.2-1 PREA (SART) <li data-bbox="256 815 810 851">6. MOU with The Sexual Assault Center <li data-bbox="256 887 992 922">7. PREA First Responder PREA Allegation Procedures <li data-bbox="256 958 549 994">8. Investigation Files <li data-bbox="256 1030 517 1066">9. Interviews with: <ol data-bbox="256 1102 944 1276" style="list-style-type: none"> <li data-bbox="256 1102 944 1137">a. OIC Special Agent/ OIC Institution Investigator <li data-bbox="256 1173 402 1209">b. Warden <li data-bbox="256 1245 549 1281">c. OIC Special Agent <p data-bbox="256 1312 1481 2060">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 within each TDOC facility. 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</p>

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.

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 staff 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/SAFE services. Per interviews with the Medical Supervisor and Director of Nurses, inmates would be transported to Nashville General Hospital - MeHarry for all forensic examinations. Per an interview with the Public Information Officer at the Nashville General Hospital - MeHarry, these services would be made available by a SANE. The hospital does not have a SANE on duty during all shifts, but one would be called to report to the facility as needed.

115.21(d) TDOC has a Memorandum of Understanding with The Sexual Abuse Center to provide victim advocacy services. The Sexual Abuse Center provide advocacy services and serves as an agency for the inmate population to report PREA allegations of sexual abuse and sexual harassment. DSNF has two staff members who have completed training to service as a victim advocate for the facility. Their names and positions as Counselors III are identified as such on all bulletin boards accessible to staff and the inmate population. The DSNF uses the local hospital (Nashville General Hospital - MeHarry) for forensic examinations and they also provide a victim advocate. An interview with the Public Information Officer at the outside hospital explained SANE/SAFE Nurses are not regularly on duty but the Sexual Assault Team is on call 24/7 to provide the services and report to the hospital normally within one hour of notification. Interviews with Warden, OIC Institution Investigator, OIC Special Agent, DSNF PCM and review of the sexual abuse investigative case files confirmed there were no forensic examinations performed during the 12-month review period throughout the site visit. An interview one inmate identified as the subject of a substantiated sexual abuse investigation, stated he and the alleged aggressor denied sexual contact, therefore, a forensic examination was not applicable, and he did not request a victim advocate.

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 The Sexual Assault Center and the DSNF has assigned two facility victim advocates. An interview was conducted with a DSNF assigned Victim Advocate who confirmed his responsibilities to serve as such for inmates who report sexual abuse to include emotional support, investigatory inv. He also stated he serves as a victim advocate for the DSNF inmates to include those who

are attending parole hearings, and his educational degree as a social worker includes training to serve as such. The two DSNF Victim Advocates have degrees as social workers and have completed Victim Services Training for proper training to serve as such. A review of a PREA Information Packet stated if requested by the victim and the services are reasonably available, have one of the following accompany, for the purpose of support, the victim through the forensic examination and investigation interviews with a qualified victim advocate, a department employee who is otherwise not involved in the incident and has received education and training concerning sexual assault and forensic examination issues and has been appropriately screened and determined to be competent to serve in this role or a non-department community-based organization representative who meets the criteria for a department employee.

The DSNF PCM indicated TDOC has a Memorandum with the Sexual Assault Center in Nashville that provide certified rape counselors who would serve as a victim advocate for the inmate population. Per an interview with the Sexual Assault Center PREA Coordinator, she explained upon an inmate reporting to the hospital she would be contacted and either herself or another qualified staff member will provide victim advocate services via tel-e-health as these procedures have been put in place since the outbreak of COVID. She added, a victim advocate from the center is available on call 24/7 to provide emotional support, crisis intervention, information on available resources, investigative procedures, assistance during legal issues regarding the sexual abuse, and referrals as needed for victims. She added on numerous occasions she and/or other counselors from the center have provided services to inmates at the facility to include via phone and in person visiting the facility. These services continue to be available to the inmate population within the prison via phone and in person upon the request of the inmate.

Although there were two substantiated sexual abuse cases during the review period, the inmates identified denied sexual contact and there were insufficient to support sexual contact, therefore, forensic examinations were not applicable. The inmates did not request the services of a victim advocate.

115.21(g) is not applicable as TDOC and DSNF conducted both administrative and criminal investigations.

Based on the review of policies, confirmation of available SANE and victim advocate services available through both The Sexual Assault Center and DSNF staff who have received the appropriate victim advocate training to serve as such, and analysis, the facility has demonstrated compliance with all the provisions of this stand

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigation and SART 3. DSNF Index 502.06.2-1 PREA Allegations, Investigation and SART 4. PREA PAS Tracking log (PREA Allegation System) 5. TDOC agency's website 5. Investigation Files 6. Interviews with: <ol style="list-style-type: none"> a. OIC Special Agent and OIC Institution Investigator b. Warden <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 Special Agent and the OIC Institution Investigator, indicated the investigation began upon the notification of the reported allegation. An OIC Institution Investigator is assigned at each TDOC correctional institutions to conduct administrative investigations and the Regional assigned OIC Special Agent 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, however depended on the circumstances of the reported allegations, the investigation may exceed 72 hours. The audit review period was scheduled for October 1, 2021, through September 30, 2022. There were 25 reported PREA allegations during this period. A review of the PREA Allegation Report identifies all were completed as an administrative investigation by OIC Institution Investigator and/or OIC Special Agent as applicable for possible criminal prosecution. The auditor's review of 20 of the 25 investigations confirmed all investigations were completed within 72 hours of being reported.</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</p>

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 investigations are completed in the same manner initiated 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 include criminal activity, the case is referred to the OIC Special Agent for additional review, investigation and prosecution as applicable.

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.

The auditor reviewed the PREA Allegation System tracking log and elected to review 20 of the 25 reported PREA investigations that included allegations of sexual abuse and sexual harassment with investigative findings of substantiated, unsubstantiated, and unfounded. The 25 PREA investigations were identified with the listed investigative findings:

3 inmate-on-inmate sexual abuse case = 0 - substantiated; 0 - unsubstantiated; 3 - unfounded

2 inmate-on-inmate sexual harassment case = 1 - substantiated; 0 - unsubstantiated; 1 - unfounded.

5 staff-on-inmate sexual abuse = 2 - substantiated; 1 - unsubstantiated; 2 - unfounded.

15 staff-on-inmate sexual harassment = 0 substantiated; 1 - unsubstantial; 14 - unfounded.

An administrative investigation was completed by the OIC Special Agent and OIC Institution Investigation for all reported PREA allegations.

The auditor reviewed the TDOC website at www.TennesseeDepartmentofCorrections.com. TDOC has 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.

115.22 (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

	<p>policies, investigative case files, agency's website, interviews with TDOC Agency Head Designee, Warden, OIC Investigators, it is concluded that DSN meets the mandate of all standard provisions.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 110.05 In-Service Training 3. TDOC Index 502.06 PREA Implementation, Education, and Compliance 4. TCA PREA Training Lesson Plans 5. PREA Training records and Rosters 6. Interviews with: <ol style="list-style-type: none"> a. DSNF Training Specialist b. Random staff <p>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 PREA Correctional Program Director II and TDOC General Counsel. The TDOC Correction Academy Program Curriculum Lesson Title PREA Inmate Sexual Abuse/Assault a 2-hour Pre-Service and/ In-Service annual training course is used for training and covers 10 topics specified in this provision. Three hundred twenty TDOC staff were employed at DSNF during the review period. Each of those employees was required and received PREA training as noted in standard 115.31 (a).</p> <p>An interview with the DSNF Training Specialist identified new hires to include agency staff, and contractors receive PREA training during New Hire Orientation on the first day of employment. Academy training classes are now being held at the local correctional facilities by staff assigned to the TDOC Training Academy. In-service annual PREA training is conducted on-line by all staff to include agency staff, contract staff and volunteers. These individuals can access the PREA training at the facility, while at home or any available computer and the completion of a passing test score is required at the end of the course. The completion of the PREA training is monitored by the Training Specialist in the Learning Management System (LMS). Anyone who did not complete training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) and would be required to make up any missed training by the required deadline. A review of staff training records confirmed staff completed the required PREA training. Random staff interviews indicated that in-service training is provided annually and that PREA is part of this training. The auditor presented staff with a variety of scenarios during the interview process. 100% of the</p>

19 random staff and all specialized staff spoke with confidence and was very competent in their responses during their interviews about their knowledge of PREA training and responses to a reported allegation of sexual abuse and sexual harassment.

115.31(b) 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. DSNF houses male inmates; however, staff may transfer to any facility in the system.

115.31(c) The Department shall provide each employee with refresher training annually to ensure that all employees know the Department's current sexual abuse and sexual harassment policies and procedures. The auditor observed continuous PREA education posted throughout the facility. Security supervisors also conducted PREA refresher training during shift briefings. Interviews with the staff confirmed they were well informed of their understanding of PREA. Additionally, PREA education is required to be completed annually by all staff and documented in the LMS. Interviews with random 19 staff and specialized staff indicated they receive PREA training annually. Confirmation of completed PREA training was submitted for all TDOC staff noted and completed during the fiscal year for 2021 and 2022.

115.31(d) 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. Confirmation of staff's signatures noting "I acknowledge that I have received training on the PREA and understand the training" on the TDOC Employee PREA Training Acknowledgement Form.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated exceeds in compliance of this standard. The facility provides refresher PREA training for employees annually rather than standard provision requirement of every two-years. Additionally, PREA education is located on bulletin boards and throughout the institution. Staff responses during the interview process and presentation of various scenarios confirmed the commitment of DSNF to TDOC policies and the Department of Justice PREA standards with continuous PREA education.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. DSNF Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 110.01 Pre-Service (Basic) Training and Employee Orientation
3. TDOC Index 502.06 PREA Implementation, Education, and Compliance
4. TDOC Volunteer Orientation & Training Manual
5. PREA Training records and Rosters
6. Interviews with:
 - a. DSNF Training Specialist
 - b. Religious Services Chaplain
 - c. Volunteers
 - d. Contractors

115.32 (a), (b) (c) TDOC Index 110.01 states that part-time employees, volunteers, contract staff and other transferring employees NEO; part-time employee, volunteer, contract staff and employee who are permanent transferring from one location to another shall receive a minimum of 20 hours of work site orientation appropriate to their assignment. The TCA Curriculum for PREA will be used. TDOC Index 502.06 states that 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. An interview with the DSNF Training Specialist identified new hires to include agency staff, and contractors receive PREA training during New Hire Orientation on the first day of employment. Academy training classes are now being held at the local correctional facilities by staff assigned to the TDOC Training Academy. In-service annual PREA training is conducted on-line by all staff to include agency staff, contract staff and volunteers. These individuals can access the PREA training at the facility, while at home or any available computer and the completion of a passing test score is required at the end of the course. The completion of the PREA training for contractors is monitored by the Training Specialist in the Learning Management System (LMS). Anyone who did not complete training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) and would be required to make up any missed training by the required deadline. Per the PAQ, DSNF has 160 contract staff and 20 active volunteers that have contact with the inmate population. The auditor reviewed a sample of

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

115.32(c) Each volunteer and contractor receive their training at the facility. Training acknowledgement for volunteers and contractors is documented through signature on CR-3965 notating that they understand the training received. Contract staff attend the Non-Academy Pre-service Orientation training for new employees and attend annual in-service training with TDOC staff in Day 1 CORE Training. However, contract staff completion of new hire and annual PREA training is monitored by the facility's Training Specialist and entered into the Learning Management System (LMS) as all TDOC staff.

Contract medical staff, mental health and food service staff confirmed they also receive PREA training during their initial hiring and annually on-line from any computer. Each of the contract staff was very knowledgeable of TDOC policy against sexual abuse and/or sexual harassment and how to report it.

An interview with the Chaplain indicated he is responsible ensuring the volunteers completed the PREA training. He stated all volunteers are required to complete PREA training on-line (one and two) prior to approval for enter in addition to other mandatory courses. He stated he does not initiate their background check until all required training to include PREA has been completed. Upon approval and authorization to enter the facility, he conducts additional comprehensive PREA training during orientation. An interview with a religious services volunteer, confirmed his completion of PREA training and his understanding of his responsibility to notify the first available staff member upon his awareness of a PREA allegation. Six volunteers were randomly selected for confirmation of PREA training with no discrepancies noted. Volunteers signed the Volunteer Confidentiality and Policy Agreement Training Certification that includes PREA training while acknowledging that agree to abide by the policy.

Based on the review of policies, training lesson plans, documentation of contracts and volunteers PREA training records, interviews with the DSNF Training Specialist, contractors, volunteer and Religious Services Chaplain, the facility has demonstrated compliance with all the provisions of this standard.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. PREA Hotline Signs (English and Spanish) 5. DSNF Inmate handbook 6. PREA Sexual Assault Awareness Brochure (English and Spanish) 7. Inmate PREA Orientation Receipt 8. Observation on site 9. Interviews with: <ol style="list-style-type: none"> a. Intake Staff b. Staff who conduct risk screening c. Random and Targeted Group Inmates <p>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 at the diagnostic centers. 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. The facility identified 4546 was admitted to the facility during the 12-month review period. However, 3382 was housed at the facility for at least 72 hours and 828 inmates were housed at the facility for 30 days or more. Per interview with the DSNF Intake Staff and DSNF Correctional Counselor III (staff who conducts risk screening) immediately upon all inmate’s arrival at DSNF, each receive a PREA pamphlet and a DSNF Inmate Handbook detailing PREA information on their right o to free of sexual abuse and sexual harassment and how to report it. This includes temporary assigned inmates held at DSNF for court appearance, medical and/or mental health services, ordered by a Judge for mental health evaluation and from county jails. These inmates are held short term at DSNF as little as 3 days for scheduled appointments. Those inmates whose length of stay at the facility is for 30 days or more, are shown the PREA video “PREA: What You Need to Know” and receive comprehensive PREA education by the Intake Counselor during orientation. The inmates are required to sign orientation acknowledgement indicating that they understand the information provided. The 37 inmates interviewed indicated they received the handbook, pamphlet upon their arrival and observed the PREA video</p>

during orientation. The inmates also mentioned the PREA information that is posted on the bulletin boards and signage on the walls and on the inmate, telephones providing them with the internal and external PREA Hotline numbers to report PREA allegations. Random files were selected for the purpose of evaluating intake records. A review of inmate file documentation indicates that 100% (72) received comprehensive orientation within two weeks of arrival from the intake counselor prior to departing the transit unit and assignment to their assigned housing units.

115.33(d) (e) 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. Staff and the inmate population to include Hispanic inmates identified there were no inmates assigned at the facility identified as LEP and/or Spanish speakers that could not speak and/or understand the English language. The following inmates were identified and interviewed within this standard: 2- physically disabled; 2 - hard of hearing; 1- blind; 1 with low vision (blind in one eye); 2- cognitive disability and all identified they were provided PREA education within a manner that they could easily understand to include the PREA video and comprehension PREA orientation presented by staff well within 30 days of their arrival at DSNF. Random file reviews for 72 inmates indicated that the inmates signed the orientation acknowledgement forms for receipt of PREA education during the comprehensive orientation.

The auditor selected a random selection of six inmates for each of the 12-months for confirmation of 72 inmates who received PREA training and identified no discrepancies. Additionally, during interviews with 37 inmates both random and target, ALL inmates acknowledged receiving PREA education in addition to inmates who arrived at the facility during the 12-month review period and those who have been housed at the facility prior to the implementation of the PREA standards also acknowledged receiving PREA education at DSNF.

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 the inmate handbook that provides an extended section of PREA education.

Based on the review of policies, inmates' signature acknowledgement of receiving PREA education, inmates' extensive knowledge of PREA education during the interview process, continuous PREA education posted throughout the facility in all housing units, program areas, etc., and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF 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 Compliance Unit Authority, Responsibility, Personnel Selection and Training 4. Documentation of Specialized Training for Agency Investigators 5. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator b. OIC Special Agent <p>115.34(a) 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.) In accordance with TCA 4-3-609, the Commissioner shall select and commission each OIC Special Agent as a full time Law Enforcement Officer. TDOC Index 502.06.2 states that where the allegation of alleged sexual misconduct involves sexual abuse, the investigation shall be conducted within 72 hours of receiving the allegation. An interview was conducted with the OIC Special Agent assigned to the facility. Prior to his position as a OIC Special Agent, he served as an OIC Institution Investigator for numerous years within the TDOC. He confirmed his completion of the required law enforcement training in addition to additional agency training in order to serve in the position of a sworn law enforcement officer for TDOC. 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."</p> <p>115.34(b) An interview with the OIC Special Agent indicated the specialized training for the OIC Special Agents is through the Tennessee Police Training Academy, Tennessee Bureau of Investigations, and the Tennessee Law Enforcement Academy. The lesson plan is intended for use with Department personnel assigned to investigate an allegation of misconduct that involves a sex related offense. This training gives participants the information they will need to conduct criminal and administrative investigations compliant with the Prison Rape Elimination Act. This includes the definition, purpose, and history of PREA, definitions, first responder</p>

duties, medical examinations, comprehensive investigations, evidence collection, interviewing the victim, suspect and witnesses, Miranda rights, Garrity rights, and handling false accusations.

DSNF has an OIC Institution Investigator who conducts administrative investigations and an OIC Special Agent is assigned to conduct criminal investigations. During an interview, the OIC Institution Investigator indicated she completed the NIC course "PREA: Conducting Sexual abuse Investigation in a Confined Setting" that provided training to completed administrative investigations for the TDOC.

115.34(c) The PREA Audit Manual states, "The Department shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations." Upon completion of training, OIC Institution Investigator and OIC Special Agents are issued a certificate of completion indicating they have successfully completed training in conducting PREA investigations. The auditor reviewed training records and certification of the OIC Special Agent and OIC Institution Investigator completed specialized training for conducting sexual abuse investigations in a confined setting.

A review of the 20 PREA investigation casefiles confirmed the investigation was completed by the OIC Institution Investigator and/or OIC Special Agent who completed the required training per the standard.

Based on the review of training lesson plans, training documentation, interviews and analysis, the facility has demonstrated it meets the mandate of all standard provisions.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF 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. Training records 6. Interviews with: <ol style="list-style-type: none"> a. Medical and Mental Health Staff <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 consist of TDOC and contract employees with the contracting agency Centurion with a total of 133 mental health and medical staff. All staff must complete the Department's PREA training and specialized training for medical and mental health. The training curriculum Medical and Mental Health Care Standards Presentation was reviewed. This information covers the agency's zero tolerance policy, methods of reporting, consequences for participating in prohibited activities, and basic actions to take (i.e. separate victim and aggressor) during an incident. This includes a duty to report and how to report allegations of sexual abuse and sexual harassment. The information also covers characteristics of at-risk populations, predatory inmates, and the warning signs associated with victimization. During interviews with medical and mental health staff each indicated they received PREA training from both DSNF and on-line through their contracting agency. A review of the lesson plan confirmed the trainings covered the topics required by this provision. The auditor also reviewed training documentation.</p> <p>115.35(b) DSNF does not conduct forensic medical exams at the facility. All forensic examinations are performed off-site at a local medical facility, Nashville General Hospital MeHarry in Nashville, TN.</p> <p>115.35(c) (d) The auditor reviewed training records showing all medical and mental health staff attended and passed the TDOC PREA training.</p> <p>Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of this</p>

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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF 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. Interviews with: <ol style="list-style-type: none"> a. Staff who conduct PREA Risk Screening b. Intake Staff c. Random and Targeted Inmates d. PREA Correctional Program Director II <p>115.41(a) TDOC Index 502.06.1 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the TDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. The agency uses the PREA Screening System Application (PAS) 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 72 inmate PREA Screening System forms was selected for review. 100% of the sample was screened using the PREA Screening form. The initial 72-hour risk screening assessment is completed upon arrival to DSNF by the intake staff and/or the transit counselor on the day of the inmate’s arrival. If the inmate is designated to DSNF upon his arrival the inmate’s assigned counselor would conduct the 30-follow-up reassessment. The Correctional Counselor III (staff who conducts risk screening to include during intake) explained in detail the intake process of all inmates for risk screening for victimization of sexual abuse and prior aggressiveness on the day of their arrival during the intake process. The screening is conducted in a private setting and the PREA Screening System is utilized to conduct screening for the risk of sexual victimization and abusiveness.</p> <p>DSNF goes beyond the requirement of this standard in the performance of risk screening for victimization and abusiveness of the inmate population. Every inmate who departs the facility for an outside medical trip and/or court appearance who returns after a 24-hour period receives a new screening for risk of victimization and abusiveness. The DSNF Correctional Counselor III and PREA Correctional Program</p>

Director II explained this procedure was put in place to offer an additional safety measure for the inmate population while allowing the inmate to report any concerns or occurrences of sexual abuse and/or sexual harassment while away from the facility.

115.41(b) TDOC Index 502.06.1 directs that classification or unit management teams from diagnostic classification units will interview and evaluate all inmates for sexually aggressive/victim tendencies utilizing the PREA Screening System Application within 72 hours of arrival at a facility. The PAQ indicated that 3382 inmates had been admitted with a stay longer than 72 hours. This number is due to the DSNF being a special needs facility and provides a variety of both medical and mental health services of the TDOC inmate population throughout the various institutions. Numerous inmates depart the facility upon the completion of their services to include prior to 30 days. A random review of 72 risk screening intake forms demonstrated compliance with the 72-hour requirement. Specifically, the PREA Intake Screening forms reviewed were completed on the day of arrival.

115.41(c) TDOC Index 502.06.1 requires authorized users to utilize the PREA Screening System Application located on the TDOC intranet. User security access to this system is authorized by the Associate Warden of Treatment. The PREA Screening System Application form is the agency-approved standardized screening instrument. Copies of the Tennessee Inmate Management Information System (E-TOMIS system) PREA Screening form were provided with the PAQ in addition to those of random selected inmates completed forms. The PREA Screening form assigns a numerical point value to questions regarding risk of victimization and risk of abusiveness categories. The form considers 12 separate inmate risk of victimization factors and risk of abusiveness factors. Each risk factor is assigned a numerical point value based on the information obtained from an interview with the inmate and information from the inmate record.

115.41(d) (e) The review of the TDOC Risk Screening forms includes all elements of the standard provision to include those factors of a sexual victim and those of a sexual aggressor. 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

Per an interview with staff who conducts risk screening, although the inmate provides yes or no responses to several of the questions, much of the requested information is documented in the system, however any new or additional information is requested and noted as provided. Additionally, staff asks each inmate whether the inmate identify themselves as gay, bisexual, transgender, intersex, or gender nonconforming and whether they have previously experienced sexual victimization and their own perception of vulnerability. During the risk screening an inmate has the opportunity to report any incidents of prior sexual abuse not yet reported.

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 random sample of 72 inmate PREA Screening Application forms was

reviewed for compliance with the reassessment being completed within 30 days of arrival. 100% of the PREA Intake Screening forms reviewed were compliant with the 30-day requirement. The PAQ indicated that DSNF admitted 828 inmates whose stay was longer than 30 days. Staff who perform risk screening reassessments indicated that re-assessments are conducted within 30 days of arrival at the facility. The Correctional Counselor III who conducts the risk screening confirmed 30-day follow-up risk assessment indicated the facility has a 15-day monitoring system for assistance in monitoring the completion of 30-day assessments. The Transit Counselor conducts the 72 hour the Counselors assigned to the inmate's housing units conducts the 30-dya reassessments. If an inmate arrives at the facility for temporary assignment such as transit for medical or mental health care, or a receipt of an issued a warrant from other TDOC facilities, and their stay at DSNF will be longer than 30 days the inmate will be reassessed. If the inmate continues to stay at the facility for 60 days, another reassessment is completed. During this time, the inmate will be removed from temporary transit status at DSNF and will be designated at DSNF. The review of 72 random inmates risk screening to include the 72-hour and 30-day reassessment confirmed assessments were conducted in accordance with the agency policy and the standard provisions. Specifically, the 30-day reassessments were noted to be completed 11 days after the inmate's arrival and not to exceed 30 days of the inmate's arrival. During interviews with inmates who arrived at the facility during the 12-month review period, each acknowledged they were asked the assessment questions during intake and again by an additional counselor within 30 days of their 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 PREA Screening System Application is utilized to conduct any re-assessment. Staff who perform risk screening indicate that a re-assessment is conducted upon receiving information that an inmate has been abused, harassed, or something has changed regarding the initial assessment. This procedure was confirmed by the Correctional Counselor III, as an additional assessment is completed in accordance with the standard provision.

Per an interview with the PREA Correctional Program Director II, a weekly report "Monitoring Due Report" is automatically forwarded to each TDOC institution via E-TOMIS that is automatically generated to the PCM, Associate Warden (T), Chief Counselor and himself. The monitoring of victims and aggressors are conducted every 90 days for a minimum of 12 months, and each require approval by the PREA Correctional Program Director II for removal. The victim may request removal prior to 12 months of completion however, the option of removal from monitoring is not available to an aggressor. Negative conduct, additional sexual abuse allegations are included in circumstances that may prolong an aggressor's monitoring to extend beyond 12 months. This procedure was also identified by the Correctional Counselor III.

115.41(h) TDOC Index 502.06.1 states that inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions. Staff

who perform risk screening were interviewed and reported an inmate is not disciplined for refusing to respond or not disclosing complete information and stated most inmates are cooperative and provide responses. During inmate interviews, none reported being disciplined for refusing to answer PREA risk screening questions.

115.41(i) TDOC Index 502.06.1 indicates that screening information is strictly need-to-know. Access to the PREA Screening System Application is controlled through authorized user security access. Unit Management staff will ensure screening information is entered in the PREA Screening System Application, E-TOMIS. Per the PREA Correctional Program Director II, Counselors have access to conduct the risk assets but cannot review the responses in E-TOMIS after the input is uploaded. The Counselors can only observe the inmate's score once uploaded. Additionally, per the Correctional Counselor III, only staff with the need to know such as the PREA Coordinator, the screening staff, the DSNF PREA Compliance Manager and the OIC Investigators have access to all information but only security supervisors have access to the knowledge of how they are identified but the responses to the questions on the risk screening forms in order to ensure appropriate housing assignments.

The practice of staff performing an additional screening for risk of victimization and/or abusiveness for all inmates who depart the facility and their return to the facility is the following day as an additional safety measure for the inmate population exceeds the provisions of this standard. Therefore, based on the review of policies, documents, interviews and analysis, the facility has demonstrated compliance at an exceeding level of this standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. TDOC Index 113.37 Gender Dysphoria 4. Interviews with: <ol style="list-style-type: none"> a. DSNF PREA Compliance Manager b. Correctional Counselor III c. PREA Correctional Program Director II <p>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>The PREA Screening System Application factors considered in the risk of abusiveness category include prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. The instrument also considers a history of violent crimes including pending and current charges and a history of domestic violence including pending and current charges. A review of the PREA Screening System Application revealed it does consider all the criteria required by this provision. Specifically, the screening application considers factors that identify an inmate as being 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,</p>

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.

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 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.

Per an interview with the DSNF PREA Compliance Manager and Correctional Counselor III and the PREA risk screening is utilized to ensure inmate safety through proper placement of housing and that 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. Due to a large inmate population at DSNF housed due to a mental disability and or medical treatment, a vast majority of inmates are housed in single cells.

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 DSNF PREA Compliance Manager and Correctional Counsel III, 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.

Per the PREA Correctional Program Director II, every offender that comes into the TDOC agency is initially housed based on the outcome of the initial PREA screening. If an offender is identified as gay, lesbian, transgender, bisexual, or intersex, there is a panel that reviews the offender's housing assignment on a case-by-case basis to determine what's best for the offender's safety.

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 DSNF during the 12-month audit review period. Per interview interviews with staff who conduct risk screening they were aware of the requirement to conduct reclassification of inmates identified as transgender and/or intersex bi-annually. Throughout their designation at DSNF. However, they stated they have not had an inmate identified as such on their case log and was unaware of one being designated at DSNF.

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. There zero inmates designated at DSNF during the 12-month review period and/or site visit who identified as gay, transgender, intersex and/or bi-sexual. However, the Warden and DSNF PCM indicated the facility does not house inmates identified as gay, bisexual, transgender, or intersex inmates in dedicated units or wings.

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

115.43	Protective Custody
	<p data-bbox="256 188 986 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1264 878" style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 4. Inmate Investigative Casefile 5. Interviews with: <ol data-bbox="256 770 750 878" style="list-style-type: none"> a. Warden b. Staff who supervise segregation <p data-bbox="256 913 1481 1621">115.43(a) TDOC Index 502.06.2 states that 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 and Warden confirmed there have been no 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 DSNF. The facility does not use involuntary segregated housing for inmates determined to be at a high risk of victimization. The SART would become aware of the situation and alternate housing would be arranged. As a medical and mental health facility in addition to inmates reporting for court appearances, numerous inmates are housed at the facility short term. Additionally, 15 of the 24 housing units are single cells. An inmate identified as at risk of victimization would be housed alone without placement in segregated housing.</p> <p data-bbox="256 1657 1481 2024">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. However, restrictive housing is not utilized for inmates for at high risk of sexual victimization.</p>

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. Staff utilize other methods to include making alternate housing arrangements within other housing units as a large number of inmates at DSNF are assigned to the mental health units and are assigned to a single cell. However, a transfer would be initiated as needed for inmates as needed. There were no inmates assigned to involuntary segregated housing during the review period and or during the site visit.

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. However, an interview with the Warden confirmed the facility does not use involuntary segregated housing for inmates who are determined to be at a high risk of victimization.

115.43(e) TDOC Index 502.06.2 states that 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 does not utilize involuntary segregated housing for an inmate who has been identified at a high risk for sexual victimization. An interview with staff who supervise inmates in segregated housing indicated the alleged victim and the alleged aggressor would be separated without the victim's placement in segregation and an investigation would be conducted. There were no inmates placed in segregation during the 12-month review period and or onsite visit identified as at a high risk of sexual victimization.

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

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. MOU Between TDOC and The Sexual Assault Center 4. TDOC Website 5. PREA Tip line Posters 6. PREA Posters 7. Inmate Handbook 8. Testing of inmate's phones 9. Interviews with: <ol style="list-style-type: none"> a. Random staff b. DSNF PCM c. Random Inmates <p>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. These include but are not limited to: (a) written communication (includes electronic documents); (b) Reporting directly to staff (Verbally); (c) Third-party reporting; or (d) Facility PREA Tip Line. The Inmate Handbook and posters contain information on how to report sexual assault. Random inmate interviews indicate all inmates were aware of the reporting options available. They indicated there is signage on the walls and on each inmate telephone on how to report allegations of sexual abuse and/or sexual harassment to the PREA Hotline and calling the hotline number was a common response. Random staff interviews indicated they were also aware of the internal and external reporting options available to the inmates and themselves. The auditor utilized the inmate housing unit telephone system to confirm their access to the two identified toll-free hotline numbers as *9222 internal and *9555 for external reporting as methods to report PREA allegations for investigations. The 37 inmates selected for interview were able to identify there are two PREA hotline numbers to the auditor as *9222 internal and *9555 for external reporting as these numbers are stenciled on walls in the housing units, on bulletin boards and are located on PREA posters in program and work areas in addition to include in the inmate handbook.</p> <p>115.51 (b) TDOC established and Memorandum of Understanding (MOU) with The</p>

Sexual Assault Center that was signed on January 16, 2014, and per interviews with the PREA Correctional Program Director II and the Sexual Assault Center PREA Coordinator, the MOU remains in effect. The Sexual Assault Center PREA Coordinator stated her organization has agreed to receive reports of sexual abuse and sexual harassment and to serve as a victim advocate for inmates at numerous TDOC correctional facilities to include DSNF. She and other agency staff have received calls on a regular basis from numerous inmates. She stated however, not all calls have been to report recent allegations of sexual abuse and/or sexual harassment but also to request counseling services for prior incidents of sexual assault. When authorized by an inmate to release the reported information, only then does she report it to the PREA Correctional Program Director II through the TDOC PREA Tip Line. This authorization is required to be submitted in writing and/or via a recorded phone conversation from the reporting inmate and only then may staff share the information provided by the inmate. Ongoing services to include victim advocacy, assistance during the legal procedures, emotional support through counseling, referrals for additional outside resources upon release within their release area, etc., has often been provided to the TDOC inmates to include inmates assigned to DSNF. Thirty-seven formal inmate interviews were conducted. The inmate population was familiar with both PREA Hotline numbers internal *9222 and external *9555, in addition to reporting directly to staff as their most common method of reporting. Per an interview with the DSNF PCM, he acknowledged the inmate's accessibility to the external source to report PREA allegations with The Sexual Assault Center where the inmate may remain anonymous upon request.

DSNF does not house inmates who are detained solely for civil immigration purposes

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 20 PREA investigative case files confirmed the OIC Institution Investigator included within the summary of the investigative reports the method that each allegation was reported. The inmates reported the allegations of sexual abuse and/or sexual through use of the PREA Hotline, written notes to staff, verbally to staff, via grievances, and via a third-party. Per an interview with the DSNF mailroom staff, although the inmate's mail addressed as PREA is not authorized to be sealed without screening by staff during placement in the outgoing mailboxes, it is treated in the same manner as legal mail.

115.51(d) TDOC Index 502.06.2 and the PREA Lesson Plan instruct staff on various methods of reporting PREA sexual abuse, sexual harassment, retaliation by other inmates or staff or reporting sexual abuse and sexual harassment, and staff neglect of violation for responsibilities that may have contributed to an incident of sexual abuse and sexual harassment to include inmates to the Central Office PREA Tip Line

(615-253-8178). This information is also noted on the agency's website. During interviews with random and specialized staff, all were identified to have in their possession a 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; 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, documents, website, interviews with the inmate and staff, testing of the internal and external PREA Hotlines, inmates capability to forward confidential outgoing mail identified as PREA and analysis, the facility has demonstrated compliance with all the provisions of this standard.

115.52	Exhaustion of administrative remedies
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 995 878" style="list-style-type: none"> <li data-bbox="256 412 963 448">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 995 519">2. TDOC Index 501.01 Inmate Grievance Procedures <li data-bbox="256 555 916 591">3. Grievance Filed and Investigative Case Files <li data-bbox="256 627 517 663">4. Interviews with: <ol data-bbox="256 698 676 878" style="list-style-type: none"> <li data-bbox="256 698 676 734">a. OIC Institution Investigator <li data-bbox="256 770 580 806">b. Grievance Sergeant <li data-bbox="256 842 549 878">c. Inmate Population <p data-bbox="256 913 1461 1245">115.52(a)(b)(c) (d)(e) (f) (g) 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 grievances from other facility grievances filed by the inmate population</p> <p data-bbox="256 1281 1477 1818">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 also be permitted to file such request on behalf of inmates. If a third-party files a grievance on behalf of the inmate, he/she may agree to pursue or withdraw the grievance. If the inmate chooses not to pursue the grievance his/her decision shall be documented.</p> <p data-bbox="256 1854 1461 2051">Per a conversation with the Grievance Sergeant, upon receiving a grievance alleging PREA allegations, she immediately calls the OIC Institution Investigator, Associate Warden (T)/DSNF PREA Coordinator, while informing them verbally of the reported PREA allegation and forward the grievance to each via email for an immediate investigation.</p>

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.

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 complaint and such grievance shall not be referred to a staff member who is the subject of the complaint.

A review of the 20 reported PREA investigative case files confirmed there were two (2) allegations of sexual harassment were reported through the grievance process and one staff on inmate sexual abuse allegation that alleged touching of the groin via arm and shoulder during a pat search. All grievances were immediately forward to the OIC Institution Investigator for investigation. 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.

TDOC Index 501.01 states an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance shall not be referred to a staff member who is the subject of the complaint. Per the PAQ, review of the PREA investigative case files and interviews with the Grievance Sergeant, and OIC Institution Investigator, there were two (2) sexual harassment allegation and one (1) sexual abuse allegations reported through the grievance process. The allegations were forwarded to the OIC Institution Investigator for an investigation.

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 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 by the Grievance Sergeant to the OIC Institution Investigator for the completion of an investigation. The three reported PREA allegations investigations were completed by the OIC Institution Investigator within 72 hours of the reported allegations.

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 files such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed and document such on the Inmate Grievance form. The inmate shall be required to personally pursue any subsequent steps in the grievance process. The inmate may decline to have the grievance processed on his/her behalf and the decision shall be

documented on the original Inmate Grievance. A review of the 20 PREA investigative case files, confirmed the three (3) reported PREA allegations that included one (1) sexual abuse and two (2) sexual harassment allegations were reported by the alleged victim and not via a third party.

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 eight (8) completed PREA sexual abuse 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. The statements provided by OIC Institution Investigator and the Grievance Sergeant regarding the procedure of referring grievances of sexual abuse and sexual harassment for investigation was confirmed during the review of the three (3) PREA allegations filed through the grievance process and the investigative case files. All PREA investigative cases were completed within 72 hours of being reported,.

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 inmate's availability to report PREA allegations through the grievance process. Inmates are provided separate mailboxes within each housing unit that is collected by the Grievance Sergeant. Per an interview with the Grievance Sergeant, the grievance boxes are checked Monday - Friday just as all outgoing mail. Interviews with ??? inmates to include random and targeted groups confirmed their awareness of their accessibility to report PREA allegations through the Grievance process.

Based on the review of policies, PREA investigative case files to include grievance filed allegations, interviews with the Grievance Sergeant, OIC Institution Investigator, 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
	Auditor Discussion
	<ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.06.2 PREA Allegations, Investigations, and SART 3. DSNF Inmate Handbook 4. MOU with The Sexual Assault Center 5. Observation during site visit 6. Interviews: <ol style="list-style-type: none"> a. The Sexual Assault Center PREA Coordinator a. Inmate Population b. Inmate who reported sexual abuse <p>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. The facility does not detain persons solely for civil immigration purposes, and/or immigrant services agencies.</p> <p>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. Upon each inmate's arrival to DSNF, they are given a DSNF 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 "Victims of sexual assault may also contact the following public help lines: Sexual Assault Center of Middle Tennessee 101 French Landing Nashville, Tennessee 37228 1-800-879-1999; calls to this number cannot be monitored 615-259-9055 and the National Sexual Assault Hotline 800-656-HOPE (4673). The inmate population signs for the receipt of the handbook.</p> <p>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</p>

are to be approved by the TDOC General Counsel. The TDOC established and Memorandum of Understanding (MOU) with The Sexual Assault Center that was signed on January 16, 2014, and per interviews with the PREA Correctional Program Director II and the Sexual Assault Center PREA Coordinator, the MOU remains in effect. The Sexual Assault Center PREA Coordinator stated her organization has agreed to receive reports of sexual abuse and sexual harassment and to serve as a victim advocate for inmates at numerous TDOC correctional facilities to include DSNF. She and other agency staff have received calls on a regular basis from numerous inmates. She stated however, not all calls to the center have been to report recent allegations of sexual abuse and/or sexual harassment but also to request counseling services for prior incidents of sexual assault. When authorized by an inmate to release the reported information, only then does she report it to the PREA Correctional Program Director II through the TDOC PREA Tip Line. This authorization is required to be submitted in writing and/or via a recorded phone conversation from the reporting inmate and only then may staff share the information provided by the inmate. Interviews with the 37 inmates confirmed their awareness of the two PREA Hotline numbers posted that included the internal and external numbers. The 37 inmates interviewed quoted the PREA Hotlines numbers that are stencils above and/or near all inmate telephones in all housing units.

One inmate identified in a substantiated sexual abuse investigation was presented at the facility during the site visit and was interviewed. However, the inmate and identified aggressor denied sexual contact and the investigation did not sustain sexual contact. The inmate victim stated he did not seek outside resources and/or services from a victim advocate, nor did he report the allegation.

Based on the review of agency policy, the established Memorandum of Understanding with The Sexual Assault Center and interview with The Sexual Assault Center's PREA Coordinator, review of DSNF Inmate Orientation Handbook, posting of internal and external PREA Hotline numbers, mailboxes within housing units and interviews with staff, and inmates that demonstrated their knowledge of the available resources, DSNF does meet all standard pro

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.06.2 PREA Allegations, Investigations, and SART 3. DSNF Inmate Handbook 4. TDOC website 5. Observation during site visit 6. Interviews: <ol style="list-style-type: none"> a. Inmate Population <p>115.54(a) TDOC Index 502.06.2 states, The Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment. It indicates that third-party reporting is included in the ways to report. It states this information shall be made available through the Inmate Handbook. DSNF Handbook indicates that any DSNF employee may receive a report of sexual misconduct from many different sources, including outside persons or agencies. The reported incident may be in writing, verbal, anonymous or from third parties. Interviews with staff confirmed they were aware of the various methods reports of sexual abuse and/or harassment could be report while noting the identified. During the site visit, the auditor observed signage posted throughout the facility advising staff, inmate population and visitors of ways to report PREA allegations in the front lobby, inmate visiting area, program areas and housing units.</p> <p>The auditor reviewed the agency’s website. It contains the necessary PREA contact information. The information provided on the website includes a Tip line for third-party reporting of sexual abuse and sexual assault at (615) 259-9055.</p> <p>Interviews with both random and targeted group inmates revealed the majority were aware that a third-party could report a sexual assault allegation such as a family member, friend, or another inmate.</p> <p>Based on the review of policies, documents, website, interviews with random and targeted group inmates and analysis, DSNF meets all provisions of the standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Interviews: <ol style="list-style-type: none"> a. Warden b. PREA Correctional Program Director II c. DSNF Warden d. Medical and Mental Health Staff e. Random 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. In interviews with staff and inmates they reported they are aware of their requirement and duty to report. Staff carry a PREA refresher card on their badge with reporting guidelines. The 19 random staff selected for interview and facility specialized staff indicated they would immediately report 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.</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. Selected authorized staff only have access. Staff interviewed was aware of the extent in which information of sexual abuse and/or sexual harassment should be shared only with authorized staff necessary to make treatment, investigation and other security and management decisions.</p> <p>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 that medical and mental health staff are aware of their duties required by this provision and this information is shared with the inmate upon the</p>

initiation of services.

115.61(d) The PREA Audit manual states, "If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the Department shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws." TDOC received guidance from Adult Protective Services which indicates that TDOC may investigate within their facilities. Per an interview with PREA Correctional Program Director II, and DSNF Warden no inmates under the age of 18 years old are housed at DSNF and the TDOC. Specially, DSNF and TDOC only houses male inmates 18 years of age or older.

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. Per an interview with the DSNF Warden, regardless of the manner in which an allegation of sexual harassment and/or sexual abuse is reported to include via third-party, or anonymously are immediately referred for an investigation by the OIC Institution Investigator and/or OIC Special Agent. Additionally, they are investigated in the same manner as those reported directly by an alleged victim.

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

115.62	Agency protection duties
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1062 374">Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li data-bbox="256 412 963 445">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1212 517">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="256 555 517 589">3. Interviews with: <ol style="list-style-type: none"> <li data-bbox="256 627 477 660">a. Agency head <li data-bbox="256 698 400 732">b. Warden <li data-bbox="256 770 675 804">c. PREA Compliance Manager <li data-bbox="256 842 485 875">d. Random staff <p data-bbox="256 913 1461 1238">TDOC Index 502.06.2 states “If facility staff receives information that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. The auditor interviewed random and specialized staff. They all stated that they would remove the inmate from the area of threat and notify the Shift Commander. Staff to include contract and volunteers are issued and carry a PREA Refresher Training card on their badge which list the steps to take to protect an inmate. The facility stated in the PAQ that there have been no instances in which an imminent threat was of sexual abuse reported.</p> <p data-bbox="256 1276 1469 1731">An interview with the Agency Head Designee indicated upon receipt of information that an inmate is subject to a substantial risk of imminent sexual abuse, the inmate would be immediately removed from danger, the incident would be investigated, and the appropriate steps would be followed. The alleged aggressor would be placed in segregation throughout the investigation and upon completion, the alleged aggressor would be moved to another housing unit or transferred to another TDOC facility. The three (3) reported inmate-on-inmate sexual abuse allegations were determined as Unfounded by the OIC Investigator. The one (1) Substantiated inmate-on-inmate sexual harassment investigation, resulted in the inmate aggressor (mental health subject) removal from the victim’s housing unit and reassignment to another housing unit. All aggressors and victims are monitored for further incidents.</p> <p data-bbox="256 1769 1461 2011">The Warden indicated an inmate identified as at substantial risk of imminent sexual abuse, would be immediately separated for his safety and an investigation would be initiated. Specifically, the alleged aggressor would be moved to another housing unit or involuntary segregation pending an investigation depending the allegations reported, as a large majority of the inmate population are on the mental health case log. As a last resort an inmate would be transferred.</p> <p data-bbox="256 2049 1461 2083">The auditor used a variety of scenarios when interviewing staff regarding their action</p>

to this standard. Each staff interviewed responded appropriately and stated they would immediately remove the inmate subject to a substantial risk of imminent sexual abuse and notify their supervisor.

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

115.63 Reporting to other confinement facilities

Auditor Overall Determination: Meets Standard

Auditor Discussion

- 1. DSNF Completed Pre-Audit Questionnaire (PAQ)
- 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART
- 3. PREA allegation logs and files
- 4. Interviews with:
 - a. Agency head
 - b. Warden
 - c. PREA Compliance Manager
 - d. OIC Institution Investigator

115.63 (a) (b) (c) (d) TDOC Index 502.06.2 states 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 PREA Coordinator they indicated that they would make the notification immediately. The auditor was presented with two (2) notifications of inmates reporting prior PREA allegations having occurred at their previous institutions after their arrival at DSNF. Specifically, one inmate reported the allegation via the PREA Hotline and the other via a written note to staff.

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.

Documentation of two notifications of inmates reporting PREA allegations having occurred at their previous institutions after their arrival at DSNF was documented in writing as forward to the affected facilities during the shift of staff's notification.

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. Documentation of notification to the two facilities where two (2) alleged PREA allegations were documented via email to the affected facility by the Warden's designee noting the Wardens in the routing process. Confirmation of notification and receipt of the information was documented within the email threads between staff.

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. An interview with the Warden indicated that he would ensure that upon receiving notification from any source to include from another facility that an allegation of sexual abuse and/or sexual harassment had been reported would result in an

immediate investigation by the OIC Institution Investigator and/or OIC Special Agent. He concluded he had not been aware of any reported prior PREA allegations having been reported after an inmate's departure from DSNF during the review period. A review of the 20 PREA investigative case files, and interviews with the DSNF PREA Compliance Manager and OIC Investigators indicated there were zero allegations reported to DSNF that had previously occurred during an inmates' designation regarding the provisions of this standard. However, all would be immediately forward for an investigation.

Based on the review of policies, two email notifications of reported PREA allegation having occurred at other facilities, investigative case files, interviews and analysis, the facility has demonstrated compliance with all the provisions of this Standard.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Sexual Abuse Casefiles 4. Staff PREA Cards 5. Interviews with: <ol style="list-style-type: none"> a. Security First Responder b. Non- Security First Responder c. Random staff d. Inmate Identified in Sexual Abuse Case <p>115.64(a) TDOC Index 502.06.2 indicate 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. There were eight (8) reported allegations of sexual abuse. However, none was reported within under the circumstances in which the sexual abuse included sexual contact and/or involved the immediate separation of the victim and aggressor, preservation and protect of a crime scene, actions to protect physical evidence by the alleged victim and/or aggressor. Although, two staff on inmate sexual abuse allegations were determined as Substantiated by the investigative staff, no sexual contact was determined. Interviews with a security and non-security staff who served as such, confirmed their knowledge of first responder duties of securing the area, preservation and collection of evidence when an inmate reports an allegation of sexual abuse. An interview with an inmate identified in a substantial staff on inmate sexual abuse investigation indicated he did not report the allegation and there was no physical evidence to collect.</p> <p>115.64(b) TDOC Index 502.06.2 states, "If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander. All staff interviewed, including non-custody staff, were aware of their responsibilities as first responders. All reported they would immediately separate inmates and maintain sight of a victim, do what they could to preserve a crime scene</p>

including advising involved inmates not to shower, change clothing, brush teeth, eat, drink, or use the toilet. All staff are trained as first responders and wear a pocket card on their badge that list the steps to take when responding to an allegation that an inmate was sexually abused. There were no reported allegations where a security and/or security staff served as a first responder duties that included the actions of advising the alleged victim to not destroy physical evidence and/or staff securing the affected area. The first responder staff members did notify the shift commander and OIC Institution Investigator of the allegation.

Based on the review of policies, interviews with security and non-security staff, inmate involved in sexual abuse allegation, investigative casefiles, and analysis, the facility demonstrated compliance with all the provisions of this standard.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. DSNF Index 502.06.2-1 PREA Allegations, Investigations, and SART 3. Interviews with: <ol style="list-style-type: none"> a. Warden b. Random staff <p>115.65 Per an interview with DSNF Warden he confirmed the institutional plan to coordinate actions taken in response allegations of sexual abuse is noted in the DSNF Index 502.06.2 policy. The plan states, the facility shall coordinate actions taken in response to an incident of alleged sexual abuse or harassment among staff first responders and SART, which includes medical and behavioral health practitioners, OIC Institutional Investigator, and facility leadership. The purpose of this policy is to establish standardized procedures to request, approve, and govern the actions; reporting procedures; and authority of the TDOC regarding PREA investigations and the role of the Sexual Abuse Response Teams (SART). DSNF Index 502.06.2-1 includes a section on First Responder duties to include a PREA First Responder Checklist which lays out the steps of the plan of action for first responders. All staff interviewed were aware of the steps of the action plan and all carried a PREA refresher card on their badge if needed.</p> <p>Based on a review of the policy, interviews with staff who were aware of the facility's policy to include staff with less than five (5) months with the agency and all seasoned staff, 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
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. Tennessee Code Annotated 50-1-207 3. Interview with: <ol style="list-style-type: none"> a. Agency Head Designee <p>115.66(a) The PREA Audit Manual states, “Neither the Department nor any other governmental entity responsible for collective bargaining on the Department’s behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the Department’ 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.”</p> <p>TCA Code 50-1-207 states “Prohibition against requiring any employer or employee to waive their rights under the National Labor Relations Act or require acceptance or agreement to any provisions that are mandatory or non-mandatory subject of a collective bargaining under Federal law. The Agency Head designee reported that TDOC does not have a union. TDOC has discretion regarding the assignment, hiring and firing of staff and no limitations to the agency’s ability to remove employee sexual abusers from contact with inmates.</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
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1062 374">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1214 947" style="list-style-type: none"> <li data-bbox="256 412 963 445">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1214 517">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="256 555 831 589">3. Retaliation Monitoring Documentation <li data-bbox="256 627 517 660">4. Interviews with: <ol data-bbox="256 698 1166 947" style="list-style-type: none"> <li data-bbox="256 698 480 732">a. Agency Head <li data-bbox="256 770 400 804">b. Warden <li data-bbox="256 842 963 875">c. Staff assigned to conduct retaliation monitoring <li data-bbox="256 913 1166 947">d. Inmate Identified in Substantiated Sexual Abuse Investigation <p data-bbox="256 985 1477 1352">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. DSNF has designated the following position title to serve as retaliation monitoring as these staff are members of the SART: Administrative Lieutenant, medical and mental supervisors, Associate Warden (T)/ PREA Coordinator, and the DSNF PREA Compliance Manager.</p> <p data-bbox="256 1391 1477 2054">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 the inmate population and staff from retaliation. TDOC monitors victims and aggressors for retaliation on a 30-, 60-, and 90-day time frame. In addition, TDOC offers the victim the ability to transfer facilities. Should the victim decide to remain, the aggressor is transferred to another facility. At a minimum, the victim and aggressor are listed as incompatible and prohibited from being housed together. An interview with an inmate identified in a Substantiated staff on inmate sexual abuse allegation confirmed staff meet with him for three months (90) following his notification of the substantiated sexual abuse investigation. He stated the staff member would inquire if he was having any negative issues with staff and/or other inmates, etc. He stated he did report one concern to a Lieutenant, and the incident</p>

was immediately handled without any further incidents. There were no inmates in segregated housing for being at a risk of sexual victimization and/or who allege to have suffered sexual for interviews per the standard provision.

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. The auditor reviewed the Retaliation Monitoring forms for two (2) Substantiated, and one (1) Unsubstantiated staff on inmate sexual abuse investigations in addition to one (1) Unsubstantiated staff on inmate sexual harassment and one (1) Substantiated inmate on inmate sexual harassment investigations. The remaining 20 PREA investigations were determined as Unfounded by the OIC Investigators. Due to PREA investigations being normally initiated immediately upon awareness of the allegation, retaliation monitoring had not begun and was not required for Unfounded reported PREA allegations. The retaliation monitoring forms include inmate name and case number, the facility, victim, report date, retaliation monitor and preliminary protection measures. The tracking portion of the form identifies housing changes, programming changes, disciplinary record, etc., as items to monitor, and provides designated spaces for documenting retaliation monitoring of 30 days, 60 days, and 90 days, in addition to areas for extended monitoring. It also includes a column for the retaliation monitor to include notations regarding negative interactions with staff or inmates. No victims of sexual abuse and/or sexual harassment were placed on extended monitoring during the 12-month review period.

115.67 (e) Pursuant to TDOC Index 502.06.2 if any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation. Per the Agency Head, 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).

Per an interview with the DSNF Warden, all protective measures would immediately be initiated to protect an inmate and/or staff member from retaliation. The victim of retaliation would be monitored for a minimum of 90 days and longer as needed. Emotional support would also be offered. Job assignments could be considered, housing assignments, and transfers as applicable. The identified individual performing retaliation would receive discipline up to dismissal upon the completion of an investigation by the OIC Institution Investigator or OIC Special Agent.

115.67 (f) The Department's obligation to monitor shall terminate if the agency determines that the allegation is unfounded. The review of the PREA investigations determined to be Unfounded did not include the retaliation monitoring of the alleged victim as all investigations were completed within 72 hours of being reported and retaliation monitoring within 72 hours were not required.

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

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF 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. PREA Compliance Manager c. Special Housing Supervisor <p>115.68 (a) TDOC Index 502.06.2 indicates that any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241, shall clearly indicate the basis of concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. Every Protective Custody placement is, by policy reviewed every 30 days. Inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If inmate access to programs, privileges, education, or work opportunities is restricted, the facility shall document what opportunities have been limited; the duration of the limitation; and the reasons for such limitations. This is documented on LCDG Contact Notes. Per the PAQ and interviews with the Warden, staff who supervise segregation and PCM, there were no inmates placed in involuntary segregated housing during the in the past 12 months based on their reported allegation of sexual abuse. The alleged aggressor may be placed in restrictive housing but not the alleged victim.</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
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC PREA Allegation Documentation Checklist 4. PREA Investigation Case Files 5. Interviews with: <ol style="list-style-type: none"> a. Warden b. PREA Coordinator c. DSNF PREA Compliance Manager d. OIC Institution Investigator and OIC Special Agent <p>115.71(a) The PREA Audit Manual states, “When the Department conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.” TDOC Index 502.06.2 states in part, that sexual abuse investigations in confinement settings shall be investigated promptly, thoroughly, and objectively, including third-party and anonymous reports. There were 25 completed administrative investigations that included both sexual abuse and sexual harassment reported during the 12-month review period.</p> <p>115.71(b) The PREA Audit Manual states, “where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations.” TDOC Index 502.06.2 states a SART member who have received special training in conducting sexual abuse investigations in confinement settings shall investigate. The OIC Institution Investigator is a member of the SART and conduct all administrative investigations of alleged sexual abuse and sexual harassment. The OIC Institution Investigator refers all investigations that could result in criminal charges to the OIC Special Agent for investigation. Training records noted the completed investigations were completed by an investigator who had received specialized training in accordance with standard 115.34.</p> <p>115.71(c) TDOC Index 502.06.2 indicates that OIC Special Agents shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. A review of investigation</p>

files supported the investigators utilizing all available evidence and data to include but not limited to the inmate's phone system, video monitoring, witness statements, interviews, written documentation, and review of previously reported allegations. Per interviews with the OIC Special Agent, the first steps in initiating an investigation would be on a case-by-case basis depending on the circumstances of the allegations reported and where it was alleged to have occurred. However, they would ensure the victim and aggressor is immediately separated while ensuring the safety of the victim is treated by medical to include a forensic medical examination and offered a victim advocate, collect all available evidence, photograph the affected area, review available video, conduct interviews with those involved, witnesses and others within the area to include staff and inmates, review inmate telephone calls to include victim, aggressor, and other inmates assigned to the area. A review of the prior complaints and reports of sexual abuse is conducted. All information gathered is documented and uploaded within the PREA Allegation System (PAS) where it is secured with limited access to authorized staff only. When the evidence supports criminal charges, the investigation is preferred for criminal prosecution. All reported allegations of sexual abuse and sexual abuse to include those reported anonymously and third-party are investigated in the manner as those reported directly.

115.71(d) The PREA Audit Manual 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." 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 he has communicated with the State Assistant District Attorney depending on the circumstances of the case and evidence obtained such as if a confusion is obtained.

115.71(e) TDOC Index 502.06.2 states, "The credibility of a victim, suspect, or witness, shall be assessed on an individual basis, and shall not be determined by the person's status as inmate or staff. Inmates who allege sexual abuse shall not be required to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation." Review of investigation files did not indicate the use of a polygraph or other truth-telling device or examination. Investigators interviewed stated the credibility of an alleged victim, suspect, or witness is considered on an individual basis. Additionally, neither investigator indicated under no circumstance would a victim be requested and/or required to submit to a polygraph examination.

115.71(f) TDOC Index 502.06.2 indicates that administrative investigations shall include an effort to determine whether staff actions or failures to act facilitated the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings. A review of administrative investigations and sexual abuse incident reviews demonstrated the OIC Institution Investigator and SART team members include a review to determine the effect of staff actions or failures as it

pertains to the reported allegation. An interview with both the OIC Institution Investigator and the OIC Special Agent confirmed they include detailed information in the investigative report if staff 's actions or lack of responsibilities contributed in facilitating the abuse.

115.71(g) TDOC 502.06.2 states that criminal investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence. Copies of all documentary evidence shall be attached where feasible. Interviews with both investigative staff confirmed there were no criminal investigations referred for criminal prosecution during the review period and/or since the last PREA audit. However, there were two (2) Substantiated staff on inmate sexual abuse investigations determined since the last PREA audit, the investigations were concluded as an administrative investigation and remain pending further review by the OIG Special Agent for possible criminal prosecution. All investigative case files contain the reviewed documentation to include statements, video footage, collected physical, and testimonial evidence that was used to determine an investigative finding.

115.71(h) TDOC Index 502.06.2 states, "Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. The PAQ identified two (2) investigations that were referred for criminal prosecution. However, per an interview with the OIG Special Agent, a determination to refer the two (2) Substantiated staff on inmate sexual abuse cases for criminal prosecution have not yet been determined and remain in the review status.

115.71(i) TDOC Index 502.06.2 states that such investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five additional years. This practice was confirmed by the OIC Institution Investigator and OIC Special Agent. He continued in stating, the agency does not destroy the investigative case files, as they are held indefinitely and are available for referencing in the internal database.

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. Review of investigative files and interviews with both the OIC Institution Investigator and OIC Special Agent confirmed although staff may resign during an investigation, the investigation would continue to include the arrest and prosecution of staff when applicable. The alleged abuser could be requested to report to the facility for an interview or the investigative staff (OIG Special Agent) may report to the alleged abuser's residence to conduct an interview. An investigation for reported allegations of sexual abuse and/or sexual harassment also continues if an inmate is transferred or released of the alleged victim and/or alleged aggressor.

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. Per interviews with the OIC Investigator, OIC Special Agent, Warden, and Associate Warden (T) /Facility

PREA Coordinator, TDOC OIC Investigators complete all investigations.

Based on the review of TDCO policy, interviews with OIC Institution Investigator and OIC Special Agent, investigators' training, and investigative reports that meets the standard provisions, and analysis, DSNF has demonstrated compliance with all provisions of this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Investigation files 4. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent <p>115.72(a) TDOC Index 502.06.2 states, “The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated.” A review of the investigation documents indicates that the 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. Per interviews with the OIC Special Agent and OIC Institution Investigator a preponderance of evidence is the standard necessary to substantiate an allegation of sexual abuse and/or sexual harassment for an administrative investigation and probably cause is the requirement for criminal prosecution of substantiated criminal charges.</p> <p>Based on the review of agency policy, investigative case files, interviews with the OIC Special Agent and OIC Institution Investigator, and analysis, the facility has demonstrated compliance with this standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC PREA Status Notifications CR-3984 4. Interviews with: <ol style="list-style-type: none"> a. Warden b. DSNF PCM c. OIC Institution Investigator and OIC Special Agent d. Inmate Who Reported PREA Allegations <p>115.73(a) TDOC Index 502.06.2 states 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 as to whether the allegation has been determined to be substantiated or unsubstantiated or unfounded. The auditor’s selected 20 of the 25 completed PREA investigative case files for review and confirmed all contained a copy of the Inmate PREA Allegation Status Notification form for allegations of sexual abuse and sexual harassment. Of the 25 investigations, there were eight (8) administrative and 0 criminal investigations for inmate sexual abuse.</p> <p>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>115.73(c) TDOC Index 502.06.2 states that following an inmate’s allegation that a staff member has committed sexual abuse, the Department shall subsequently inform the inmate in writing whenever: the staff member is no longer posted within the inmate’s unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; and the staff member has been convicted on a charge related to sexual abuse within the facility. There five (5) reported allegations of staff on inmate sexual abuse with the investigative findings as the following: two (2) substantiated, one (1) unsubstantiated and two (2) Unfounded. The three (3) inmates on inmate sexual abuse investigations were determined as unfounded. The review of the investigative files confirmed an Inmate PREA Allegation Status Notification identifying the investigative findings were prepared for each inmate victim. The two (2) Substantiated staff on inmate sexual abuse investigative casefiles forms noted “The employee is no longer employed at the facility.” Criminal charges were not identified during the completion of the</p>

administrative investigation. However, both staff were terminated from employment with the TDOC and DSNF. An interview with one inmate involved in a staff on inmate substantiated sexual abuse investigation confirmed he was notified that the staff was no longer employed at the facility.

115.73(d) TDOC Index 502.06.2 indicates that following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing whenever the facility learns that an alleged abuser has been indicted on a charge related to sexual abuse within the facility. There were three (3) inmates on inmate sexual abuse allegations reported in which all were determined as Unfounded. The review of the investigative files confirmed an Inmate PREA Allegation Status Notification identifying the investigative findings were prepared for the inmate victim, however, no criminal charges and/or indictment was applicable during the 12-month review period.

115.73(e) TDOC Index 502.06.2 states that all notifications shall be done in writing using Inmate PREA Allegation Status Notification, CR-3984, and the inmate shall acknowledge by signature that he/she has received such notification. The notification becomes part of the allegation file. If the inmate refuses to sign the acknowledgement, a staff witness is required to sign. The investigative staff will document the inmate's refusal to sign for acknowledgment of notification. Interviews with the Investigative staff and the Warden indicated that both were aware of the agency requirement for notifications to be made by Investigative staff. The DSNF reported 25 PREA allegations during the 12-month review period and the auditor elected 20 investigations for review. Each of the reviewed casefiles confirmed an Inmate PREA Allegation Status Notification identifying the investigative findings prepared for the inmate victim. The review included instances in which the victim acknowledged receipt of the notification, his refusal to acknowledge receipt and/or the victim did not receive a copy of the notification due to their mental health observation to include placement on mental observation and not allowed to such as ink pens, etc. for safety concerns. In such instances, a second staff member documented their signature as a witness of the inmate's notification of the investigative finding. Per interviews with the DSNF PCM, OIC Institution Investigator, and DSNF Warden in addition to the review of the inmate's housing units during the period of several PREA allegations and the completed investigations confirmed numerous inmates were on medical health monitoring to include suicide watch and was not allowed to possess items such as pencils and/or ink pens due to the possibility of performing harm to themselves and/or others. However, the inmate was verbally notified of the investigative finding and the notification was signed by two staff.

Based on the review of policies, completed Inmate PREA Allegation Status Notification forms, interviews and analysis, the facility has demonstrated compliance with this standard.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Staff Dismissal Documentation 4. Interviews with: <ol style="list-style-type: none"> a. Warden <p>115.76 (a-d) TDOC Index 502.06.2 states staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or PREA policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. Sanctions shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of the Department’s sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. Per interview with the Warden, staff are disciplined based on the outcome of sexual misconduct and/or sexual harassment investigations. The facility would use progressive discipline for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p>There were two (2) Substantiated staff on inmate sexual abuse investigations during the 12-month review period. Both staff was terminated for violation of #302.08 Code of Conduct; and #305.03 Employee/Offender Interaction; #305.01 Employee Disciplinary Action(s) resulting in Dismissal. The reporting of the two staff members to relevant licensing bodies was no applicable.</p> <p>Based on the review of policies, review of staff dismissals, interviews and analysis, the facility is compliant with all provisions of this standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement 4. 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 that if after 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 restrict a volunteer to entering only the assigned TDOC location which shall be designated as the volunteer's primary site. The approving authority may terminate the services of a volunteer, and such termination shall apply to all institutions. There were no allegations of sexual abuse and or sexual harassment alleged against volunteers during the 12-month review period.</p> <p>Per interview with the Warden, any allegation against a contractor or volunteer would result in prohibiting that individual from entering the facility during the investigation. If substantiated the individual would be terminated and subject referred to criminal prosecution and reported to relevant licensing bodies if applicable. Per the Warden, there were zero (0) reported sexual abuse and/or sexual harassment allegations reported against contractors and/or volunteers during the 12-month review period.</p> <p>Based on the review of policies, and interview with the Warden, the facility is compliant with all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 558 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1212 806" style="list-style-type: none"> <li data-bbox="256 412 965 448">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1212 519">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="256 555 528 591">3. Interviews with: <ol data-bbox="256 627 853 806" style="list-style-type: none"> <li data-bbox="256 627 403 663">a. Warden <li data-bbox="256 698 853 734">b. DSNF PREA Compliance Manager (PCM) <li data-bbox="256 770 675 806">c. OIC Institution Investigator <p data-bbox="256 842 1477 1335">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 DSNF PAQ, OIC Institution Investigator, DSNF PCM and review of DSNF PREA Allegation Tracking Spreadsheet, there were no inmate-on-inmate substantiated sexual abuse cases in the past 12 months of the audit review period. No inmates received disciplinary sanctions and/or was referred for criminal prosecution. Per an interview with the Warden, he indicated an inmate would be subject to disciplinary sanctions to include disciplinary segregation, followed by an increase in security scoring, transfer to another correctional facility and if criminal charges were sustained, the inmate would be referred for criminal prosecution.</p> <p data-bbox="256 1370 1477 1908">115.78(b) & (c) TDOC Index 502.06.2 states that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The discipline process shall consider whether an inmate's behavior disabilities or behavioral illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Per an interview with the Warden, he indicated sanctions for disciplinary action would be as noted in this provision. There was one (1) Substantiated inmate on inmate sexual harassment and zero (0) sexual abuse investigations during the 12-month review period. The one identified aggressor of inmate-on-inmate sexual harassment investigation was identified with a mental disability that resulted in the determination to not issue disciplinary sanctions. The aggressor was separated from the victim with no further occurrences and/or actions.</p> <p data-bbox="256 1944 1461 2069">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</p>

inmate to participate in such interventions as a condition of access to programming or other benefits.

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. Two staff on inmate sexual abuse investigations was determined as Substantiated. The two TDOC staff members were terminated at the conclusion of the investigation; however, the two inmates identified as victims did not receive disciplinary sanctions.

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 no incidents in which an inmate received disciplinary action in accordance with this provision.

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. In the past 12 months of the review period there was zero (0) administrative findings of inmate-on-inmate sexual activity reported. Therefore, disciplinary sanctions were not applicable.

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

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. TDOC Index 113.84 Clinical Assessments, Mental Health Appraisals, and Psychological Testing 4. PREA Mental Health Referrals 5. Interviews with: <ol style="list-style-type: none"> a. Correctional Counselor III b. Medical and Behavioral Health Staff c. Inmate who disclosed prior victimization during PREA Screening <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/or behavioral health provider within 14 days of the screening. TDOC Index 113.84 states that each mental health appraisal conducted as part of the initial classification or reclassification process shall be documented on Mental Health Intake Appraisal, CR-3772. The PAQ indicated that 100% of inmates that reported prior sexual victimization were offered a follow-up meeting with a mental health provider. Per an interview with staff who conduct risk screening, all inmates identified during the intake screening and/or follow-up assessment as prior victimization and/or prior aggressiveness are referred to mental health. The referrals are documented and forward to mental health. The referring staff member conducts a follow-up and document notes of the referral and the completed mental health evaluation. The auditor also randomly reviewed six (6) inmate files for confirmation of timely completed mental health referrals. The review confirmed five (5) inmates' referrals to mental health were seen by mental health staff the following day after being referred and the sixth inmate was seen on the 11th day of the initial assessment and referral. An interview with an inmate who reported prior sexual victimization during risk assessment, confirmed he was seen by mental health within a couple of days of arrival at DSNF.</p> <p>Interviews with Behavior Health staff and the review of documented referral confirmed the inmates were seen by Behavior Health staff within 7 days after the referral was made. The date of the completed referral is documented in E-TOMIS.</p>

Inmates that reported prior sexual victimization indicated upon requesting for mental health services they were seen within a week and as soon as the same day.

115.81(c) DSNF is not a jail.

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 staff who conducts risk screening indicated the specific details related to sexual victimization or abusiveness is strictly limited. Staff have access to the identification of victims and abusers as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments.

115.81(e) TDOC Index 502.06.3 states that Medical and Behavioral Health providers shall obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in the institutional setting. In addition, interviews with both medical and mental health staff verified that staff do obtain informed consent from inmates before reporting any knowledge or suspicion of sexual abuse. The facility does not house inmates under the age of 18 years.

Based on a review of policies, mental health referrals and timely completion, interviews and analysis, the facility is compliant with all provisions of this standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 5. Interviews with: <ol style="list-style-type: none"> a. PCM b. Medical Staff/ Behavior Health Staff c. Security and Non-Security 1st Responder d. Inmate Involved in Substantiated Sexual Abuse Investigation <p>115.82(a) TDOC Index 502.06.3 states victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and behavioral health providers, according to their professional judgment. Interviews were conducted with the medical and mental health supervisors Each indicated victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Once the report is received, the inmate would be seen immediately as medical staff is on duty 24 /7 and mental health is accessible 24/7. 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 such as first aide type, ice bandages etc., necessary to stabilize the inmate prior to and during transfer to a facility for forensic examination as applicable. The inmate would receive continued medical treatment as needed upon the inmate’s return from the outside hospital. They also verified that the nature and scope of the treatment and crisis intervention services are determined by their professional judgment, medical protocol, and mental health recommendations. The victim would receive follow-up services as needed but not less than 30, 60 and 90 days for medical services and continued counseling and therapy from mental health staff. A pharmacy at the facility assists in providing access to the continuation of medication needs. Due to the mission of the facility in providing mental health and medical care for inmates throughout the TDOC services are provided by a master level of staff. An interview with an inmate identified in a substantiated staff on inmate sexual abuse investigation, identified there were no incidents of a sexual nature determined during the investigation and such actions were denied by him. He concluded in stating he refused any medical treatment and he was and continue to be on the mental health case log but did not require additional services due to the allegation of sexual abuse.</p>

115.82(b) TDOC Index 502.06.3 states, "If no qualified medical staff are on duty at the time of a report of a recent abuse, a correctional officer trained to render first aid may help as needed." Medical staff are on duty 24/7 at DSNF and medical services are provided as needed in addition to accessible 24/7 mental health staff. All staff selected for interviews were aware that medical staff would be notified of reported PREA allegations. Their description of actions taken included notifying the Shift Commander and medical staff while keeping the victim safe and separated from the abuser. Interviews conducted a security staff and non-security staff who served as first responders stated the allegations did not include sexual contact and/or penetration.

115.82(c) TDOC Index 502.06.3 indicates that 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 and as medically appropriate. DSNF reported there were no instances in where a test for sexually transmitted infections and/or sexual transmitted infections prophylaxis was warranted during the 12-month review period. There were no reported allegations of sexual abuse/assault that included sexual penetration or a forensic medical examination by a SANE.

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.

Based on the review of policies, documentation, interviews and analysis, the facility meets the mandate of all standard provisions.

115.83	<p data-bbox="252 107 1449 197">Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p data-bbox="252 230 986 271">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 309 560 349">Auditor Discussion</p> <p data-bbox="252 383 1066 423">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="252 456 1326 898" style="list-style-type: none"> <li data-bbox="252 456 970 497">1. DSNF Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="252 530 1326 607">2. TDOC Index 502.06.03 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims <li data-bbox="252 640 523 680">3. Interviews with: <ol data-bbox="252 714 1166 898" style="list-style-type: none"> <li data-bbox="252 714 772 754">a. Staff who conducts risk screening <li data-bbox="252 788 804 828">b. Medical and Behavioral Health Staff <li data-bbox="252 862 1166 898">c. Inmate Identified in Substantiated Sexual Abuse Investigation <p data-bbox="252 931 1481 1429">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. In an interview with medical staff, they stated that they would ensure the victim is stable and then follow up with treatment plans per the physician or local hospital. An interview with behavior health staff said they would meet with the victim immediately upon becoming aware and offer supportive counseling.</p> <p data-bbox="252 1462 1481 1921">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 the Director of Nurses, Health Services Administrator, a case manager would discuss follow-up services upon an inmate’s release for medical and mental health services. An interview with an inmate identified as a victim in a staff on inmate sexual abuse allegations indicated the investigation did not include sexual activity as confirmed during the review of the investigation. He was also not the individual who reported the allegation. The inmate is also identified as a patient within the mental health unit and monitored by mental health staff.</p> <p data-bbox="252 1955 1481 2078">115.83(c) Interviews with the Health Services Administrator, Director of Nurses and Behavior Health staff 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 some cases</p>
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in an excess.

115.83(d) & (e) DSNF houses male inmates. These provisions are not applicable.1

115.83(f) TDOC 502.06.3 states that 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. Per the Director of Nurses, Health Services Administrator, victims of sexual abuse have access to these services with a follow-up every 30, 60 and 90 days.

115.83(g) TDOC Index 502.06.3 states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Per the Director of Nurses, Health Services Administrator, and Behavior Health staff, the victim would not incur any financial cost for treatment services. There were no instances within the provision of this standard during the past 12 months of the audit.

115.83(h) TDOC Index 502.06.3 states that 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. In interview with staff who perform risk screening for victimization or abusiveness, inmates disclosing prior sexual abusiveness, as well as inmates who disclose prior sexual victimization, in addition to inmates identified in substantiated sexual abuse investigations are offered a referral to Behavioral Health. Per the Behavior Health staff, if an inmate is identified as an aggressor through an investigation, updated evaluations would be conducted within 7 days of the referrals.

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

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Sexual Abuse Incident Review Report 4. Interviews with: <ol style="list-style-type: none"> a. Warden b. PCM c. Incident Review Team Member <p>115.86(a)(b)(c) TDOC 502.06.2 states, "That 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 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 Abuse Response Team (SART). The auditor reviewed the two (2) Substantiated and one (1) Unsubstantiated sexual abuse/sexual misconduct investigative cases. A Sexual Assault Incident Review was conducted following the conclusion of each investigation within 30-days of completion. The reviews were thorough and followed the requirements of the standard provisions.</p> <p>115.86(d) TDOC 502.06.2 requires that the team consider if 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, that the team examine the area in the facility where the incident allegedly occurred to determine if there are physical plan issues that may have contributed to the incident and assess staffing levels in the area and whether monitoring technology should be deployed or augmented to supplement supervision by staff in these areas. The team is required to prepare a report of findings for the Warden that identifies problem areas, necessary corrective action, and recommendation for improvement. The auditor reviewed the three (3) incident reviews completed by members of the Sexual Abuse Response Team. The review indicated they contained the required information. There were no recommendations made by the SART. However, there are areas on the documents for recommendations</p>

to noted.

115.86(e) TDOC Index 502.06.2 indicates that the facility shall implement the recommendations for improvement or shall document the reason for not doing so. A copy of the incident review is scanned and electronically forwarded to the PREA Correctional Program Director II. Per review of the three (3) completed incident reviews, there were no recommendations made that needed to be addressed.

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

115.87	Data collection
	<p data-bbox="256 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 297">Auditor Discussion</p> <p data-bbox="256 340 1062 374">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1291 730" style="list-style-type: none"> <li data-bbox="256 412 948 445">1. DSN Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 483 1291 517">2. TDOC Index 502.06 PREA Implementation, Education, and Compliance <li data-bbox="256 555 724 589">3. 2021 Annual SSV PREA Report <li data-bbox="256 627 504 660">4. Interview with: <ol data-bbox="256 698 823 732" style="list-style-type: none"> <li data-bbox="256 698 823 732">a. PREA Correctional Program Director II <p data-bbox="256 770 1461 1055">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 PREA Correctional Program Director II, 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 data-bbox="256 1093 1461 1294">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 data-bbox="256 1332 1477 1534">115.87(c) The PREA Correctional Program Director II 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 data-bbox="256 1572 1453 1859">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 PREA Correctional Program Director II, he is actively involved in the notification of all reported PREA allegations from each of the TDOC facilities. He has program access 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 data-bbox="256 1897 1453 2054">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</p>

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 State-wide PREA Coordinator, in addition to the contract monitor assigned at each privately operated contract facility, he also monitors the reported PREA allegations at each.

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 PREA Correctional Program Director II provided the auditor a copy of the 2021 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 2022.

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

115.88	Data review for corrective action
	<p data-bbox="256 188 983 224">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 557 300">Auditor Discussion</p> <p data-bbox="256 340 1062 376">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1289 878" style="list-style-type: none"> 1. DSN Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. Agency website 4. 2021-2022 Annual PREA Report 5. Interviews with: <ol style="list-style-type: none"> a. PREA Correctional Program Director II b. TDOC Agency Head Designee <p data-bbox="256 913 1481 1702">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 PREA Correctional Program Director II, 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="256 1738 1481 2069">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</p>

victims, and staff reporter was born out of trends observed.

The PREA Correctional Program Director II confirmed he prepares an annual report that is submitted to the Commissioner for review. Upon the review and approval by the Commissioner, the annual report is then posted on the TDOC's website for review by the public.

The auditor reviewed the website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html> and verified the 2021 - 2022 Annual Report was signed by the Commissioner and published. A review of the report indicated a comparison of 2020-2021 and 2021 - 2022. The report was dated October 6, 2022 and signed by the TDOC Interim Commissioner. The report is identified as professionally written and addresses the requirement of each standard provision.

Based on a review of policy, TDOC's website, agency's annual PREA reports, interviews with the TDOC Agency Head Designee and PREA Correctional Program Director II, the agency meets the mandate of all standard provisions.

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. DSNF Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. Agency website 4. 2021-2022 Annual PREA Report 5. Review of Contract Facilities Reported PREA Data 6. Interview with: <ol style="list-style-type: none"> a. PREA Correctional Program Director II <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 PREA Correctional Program Director II shall maintain sexual abuse data for at least 10 years after the date of the initial collection.</p> <p>Per an interview with the PREA Correctional Program Director II, he indicated data is securely maintained for a minimum of 10 years within an agency restricted 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 2021-2022 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 with PREA Correctional Program Director II and analysis, DSNF meets all mandate of the standard provisions.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>TDOC Index 502.06 PREA Implementation, Education, and Compliance was reviewed and meets the requirements 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 was the first audit of the fourth quarter and the fourth PREA audit for Lois M. Deberry Special Needs Facility. The Agency oversees 11 facilities and the PREA audits for each of these facilities were posted on the agency’s website for the previous audit cycles. The auditor received all requested documentation throughout the pre-audit, on-site visit, and post audit phases that included a sufficient sampling based on the size of the facility of case records, training records, investigative reports, additional program information and documents to support a conclusion of compliance with each PREA standard. An excess of the required number of staff and inmates were interviewed, and all were knowledgeable regarding PREA education and how to report. The auditor was granted access to tour and visit all areas of the facility. Inmates confirmed their observation of the notice of the audit posted throughout the institution that included 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 a legal counselor. However, the auditor did not receive any correspondence from staff and/or the inmate population.</p> <p>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
	Auditor Discussion
	<p>Per TDOC directives and standard requirements, TDOC ensures all final reports will be published on their websites to be available to the public. A review of the TDOC website at www.tn.gov/correction/sp/prisonrape-elimination-act.html contained the final 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>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	yes

	for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	
	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.)	na
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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who 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.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a) Inmate education		
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b) Inmate education		
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c) Inmate education		
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d) Inmate education		
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

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

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	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).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually 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.)	no

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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	<p>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.)</p>	yes