

# PREA Facility Audit Report: Final

**Name of Facility:** Bullock Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 04/19/2025

## Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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.



**Auditor Full Name as Signed:** Darla P. OConnor

**Date of Signature:** 04/19/2025

## AUDITOR INFORMATION

**Auditor name:** OConnor, Darla

**Email:** doconnor@strategicjusticesolutions.com

**Start Date of On-Site Audit:** 02/13/2025

**End Date of On-Site Audit:** 02/15/2025

## FACILITY INFORMATION

**Facility name:** Bullock Correctional Facility

**Facility physical address:** 104 Bullock Drive, Union Springs, Alabama - 36089

**Facility mailing address:**

## Primary Contact

<b>Name:</b>	Alexis Turner
<b>Email Address:</b>	alexis.turner@doc.alabama.gov
<b>Telephone Number:</b>	3344737012

#### Warden/Jail Administrator/Sheriff/Director

<b>Name:</b>	Antonio McClain
<b>Email Address:</b>	Antonio.McClain@doc.alabama.gov
<b>Telephone Number:</b>	334-738-5625 ex. 101

#### Facility PREA Compliance Manager

<b>Name:</b>	Alexis Turner
<b>Email Address:</b>	alexis.turner@doc.alabama.gov
<b>Telephone Number:</b>	334-473-7012

#### Facility Health Service Administrator On-site

<b>Name:</b>	Katrina James
<b>Email Address:</b>	Katrina.James@yescarecorp.com
<b>Telephone Number:</b>	334-738-5625 ex.403

#### Facility Characteristics

<b>Designed facility capacity:</b>	1582
<b>Current population of facility:</b>	1522
<b>Average daily population for the past 12 months:</b>	1495
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Men/boys

<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	20-83
<b>Facility security levels/inmate custody levels:</b>	Level 4
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	105
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	110
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	0

AGENCY INFORMATION	
<b>Name of agency:</b>	Alabama Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	301 South Ripley Street, Montgomery, Alabama - 36130
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>
--

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Christy Slauson-Vincent	<b>Email Address:</b>	christy.vincent@doc.alabama.gov

Facility AUDIT FINDINGS	
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:	
0	
Number of standards met:	
45	
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:**

2025-02-13

**2. End date of the onsite portion of the audit:**

2025-02-15

#### 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?**

☒ Yes

☐ No

<p><b>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</b></p>	<p>Just Detention International was contacted and responded that their database did not reflect any contact from the facility or the residents.</p> <p>One Place Family Justice Center was contacted, and they confirmed they have an MOU with the facility. They provide a victim advocate when requested to accompany residents to forensic examinations. They provide a 24/7 crisis line for residents to call for emotional support regarding sexual abuse, past or present. They provide a 24/7 crisis line for residents to call to report sexual abuse while at the facility.</p> <p>One Place Family Justice Center confirmed that they conduct forensic examinations when requested by the facility. The inmate is brought to their location, and the forensic exam is conducted in the dedicated SANE space. A SANE nurse is always available to conduct forensic exams when needed.</p> <p>The agency has a MOU with Alabama Coalition Against Rape. ACAR has a service agreement with the Alabama Department of Corrections (ADOC) to provide SANE services to residents/inmates/detainees through the Rape Crisis Center in their area. The MOU includes provisions for victim advocates and emotional support for victims of sexual abuse, regardless of when or where the abuse occurred. It also covers the provision of a hotline for inmates to call for support.</p>
<p><b>AUDITED FACILITY INFORMATION</b></p>	
<p><b>14. Designated facility capacity:</b></p>	<p>1582</p>
<p><b>15. Average daily population for the past 12 months:</b></p>	<p>1495</p>
<p><b>16. Number of inmate/resident/detainee housing units:</b></p>	<p>25</p>

<b>17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?</b>	<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)
<b>Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1535
<b>19. 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:</b>	39
<b>20. 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:</b>	224
<b>21. 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:</b>	6
<b>22. 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:</b>	5

<b>23. 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:</b>	3
<b>24. 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:</b>	50
<b>25. 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:</b>	4
<b>26. 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:</b>	3
<b>27. 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:</b>	116
<b>28. 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:</b>	0



<p><b>29. 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):</b></p>	<p>The institutional inmate count on the first day of the on-site audit was 1,535. For a facility with a population of 1,535, the PREA Auditor Handbook indicates that a minimum of twenty targeted inmate interviews are required. Twenty from the targeted groups were interviewed.</p> <p>At the beginning of each interview, the Auditor clarified to the inmate why she was at the facility, her role in the PREA process, and why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and, while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the appropriate protocol questions.</p> <p>The Auditor interviewed the following:</p> <ul style="list-style-type: none"> <li>1 - transgender inmates</li> <li>2 - Physically disabled inmates.</li> <li>2 - Cognitively disabled inmates.</li> <li>2 - hearing impaired inmates.</li> <li>2 - visually impaired</li> <li>2 - Inmates who disclosed abuse in screening.</li> <li>2 - LEP inmates</li> <li>2 - Reported abuse</li> <li>5 - gay or bisexual inmates</li> <li>0 - Inmates in segregation housing for PREA</li> <li>0 - youthful offenders</li> </ul>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>30. 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:</b></p>	<p>105</p>
<p><b>31. 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:</b></p>	<p>1</p>

<b>32. 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:</b>	110
<b>33. 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:</b>	The facility reports 1 volunteers and 110 contractors approved to enter the facility and have contact with inmates. The volunteers and contractors are provided specific PREA training as it relates to volunteers, in addition to the GDC specific PREA training.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	20
<b>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>

**36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?**

The institutional count on the first day of the on-site audit was 1,535. According to the Auditor Handbook, with a population of 1,535, the auditor shall interview a minimum of 20 random and 20 targeted inmates.

Twenty random inmates were interviewed. These were inmates who were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race. During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information-gathering process.

A total of 20 formal random interviews were conducted.

As a result of the audit notice posting, the Auditor received zero letters from inmates. At the beginning of each interview, the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process, and why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and, while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willingly participated in the interview process. All responses were typed onto the interview form.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

**37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?**

☒ Yes

☐ No

**38. 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):**

The institutional count on the first day of the on-site audit was 1,535. According to the Auditor Handbook, with a population of 1,535, the auditor shall interview a minimum of 20 random and 20 targeted inmates.

Twenty random inmates were interviewed. These were inmates who were not part of the targeted inmate interviews. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates to interview, ensuring diversity in age and race. During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information-gathering process.

A total of 20 formal random interviews were conducted.

As a result of the audit notice posting, the Auditor received zero letters from inmates. At the beginning of each interview, the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process, and why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and, while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions.

All random inmates willingly participated in the interview process. All responses were typed onto the interview form.

During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.

**Targeted Inmate/Resident/Detainee Interviews**

<b>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	20
<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>	
<b>40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>41. 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:</b>	2
<b>42. 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:</b>	2
<b>43. 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:</b>	2

<b>44. 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:</b>	2
<b>45. 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:</b>	5
<b>46. 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:</b>	1
<b>47. 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:</b>	2
<b>48. 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:</b>	2
<b>49. 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:</b>	0

<b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>49. 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).</b>	The staff reported there were no inmates in the facility who fell into this category. The staff working the segregation unit confirmed this information. Therefore, no one from this category could be interviewed.
<b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	The institutional count the first day of the on-site audit was 1,535. According to the Auditor Handbook with a population of 1,535 the auditor shall interview a minimum of 20 targeted inmates. Twenty targeted inmates were interviewed. The Auditor requested and received a roster of inmates who fell into the targeted categories. The Auditor randomly chose inmates from each applicable category to interview, ensuring diversity in age and race. Once selected each inmate was put on "call-out" with a time to report to the private space designated for interviews.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>51. Enter the total number of RANDOM STAFF who were interviewed:</b>	20



<b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	There were no problems in selecting random staff. Random staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a specialized staff.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	21
<b>56. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>58. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>59. Were you able to interview the PREA Compliance Manager?</b>	<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)

**60. 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
- ☒ Intake staff

	<input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	Classification Staff and Mailroom Staff
<b>61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<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
<b>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>62. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other

<b>63. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	There were no problems in selecting specialized staff. Specialized staff were selected from the staff roster, who were available during the on-site audit who were also not a staff member interviewed as a random staff member.
<b>SITE REVIEW AND DOCUMENTATION SAMPLING</b>	
<b>Site Review</b>	
<p>PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.</p>	
<b>64. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>Was the site review an active, inquiring process that included the following:</b>	
<b>65. 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)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>66. 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)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No

**68. Informal conversations with staff during the site review (encouraged, not required)?**

☒ Yes

☐ No

**69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).**

#### Facility Overview – Bullock Correctional Facility (BCF)

Bullock Correctional Facility (BCF) is a medium custody male correctional institution located at US Highway 82 East, Union Springs, AL 36089. The facility officially opened in April 1987 and was established as Alabama's first correctional institution with a primary mission focused on mental health care to inmates. BCF has an operating capacity of 1,582 inmates.

#### Mission and Programming

BCF operates with a central mission to provide mental health care to inmates. BCF has a comprehensive health care program that encompasses medical and dental care to include free-world specialty services. Ingram State Technical College offers the following education programs at BCF: Adult Education and GED services.

#### Housing and Physical Layout

A is the infirmary; B is segregation; C1 – C4 are General Population; D1 is for Crime Bill inmates; D2 is general population; E1-E2 are general population; F1-F2 are general population; G1 is the intake dorm and G2 is general population; I1-I2 are general population; J1-J2 is for the Substance Abuse Program; K1-K7 is for outpatient mental health inmates and H dorms are for inpatient mental health inmates.

In addition to housing, the facility includes:

1. An administrative building with one holding cell
2. A Health Care Unit with infirmary beds
3. A visitation building
4. A chapel
5. A law library
6. A trade school and industry shop
7. A dining hall and canteen
8. A maintenance building
9. A laundry facility

#### Sanitation and Privacy Measures

Bathrooms in open-bay dormitories are located at one end of the dorm and are

equipped with half-height (saloon-style) doors at the entrance. Each bathroom contains multiple toilets and shower stalls. Toilets in cell housing units are located inside the cells, while showers are located on the tier and include privacy curtains. All showers and toilets throughout the facility are equipped with privacy features, such as curtains or stall surrounds, that prevent viewing by staff of the opposite gender.

#### Inmate Services and Daily Life

Inmates at BCF receive three meals per day, with the exception of Sundays and holidays when general population inmates receive two meals. However, wellness inmates receive three meals every day without exception. Inmates are provided access to telephones for maintaining family connections. The facility also offers access to a library, as well as educational and entertainment resources through computers and tablets. These devices allow for movie viewing, gaming, education, letter writing, and phone calls.

#### PREA Compliance and Awareness

The facility demonstrates strong commitment to PREA compliance. PREA signage is prominently posted throughout the institution, including entrance areas, food service, housing units, and near inmate telephones. Additionally, PREA drop boxes are strategically placed throughout the facility, providing a confidential method for inmates and staff to submit complaints or concerns related to sexual abuse or harassment.

### Documentation Sampling

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

**70. 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?**

☒ Yes

☐ No



**71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).**

**Personnel and Training Files Review**

According to the Pre-Audit Questionnaire (PAQ), Bullock Correctional Facility reported a total of 105 staff. Eighty-five (85) staff training records were selected for review. Staff were randomly selected from the roster to include a representative sample of new hires, recently promoted personnel, and seasoned employees.

Each of the 85 training files contained documentation confirming the staff member had received PREA training within the past 12 months. Training verification included signed acknowledgment forms and/or electronic training system records.

In addition, fifty (50) personnel files were reviewed to assess compliance with the requirement for criminal history background checks. Each of the 50 files had documentation confirming that a background check had been conducted within the past five years, consistent with PREA Standard §115.17.

**Inmate Records Review**

A total of 51 inmate records were reviewed to assess compliance with PREA education requirements. Inmates were selected randomly from the facility's master roster, with consideration given to individuals with varying dates of arrival to ensure a comprehensive review.

PREA Education at Intake: All 51 records contained signed PREA General Information Forms confirming that inmates received PREA education on the day of their arrival at the facility.

Comprehensive PREA Education within 30 Days: All 51 inmates received comprehensive PREA education within 30 days of arrival, as evidenced by signed Inmate Awareness Acknowledgment Forms.

Additionally, 52 inmate records were reviewed regarding screening for risk of sexual victimization and abusiveness:

Initial Risk Screening: All 52 inmates received their initial risk assessment on the day of arrival, verified by completed screening

forms.

30-Day Risk Reassessment: All 52 inmates received a reassessment within 30 days of arrival, consistent with PREA Standard §115.41.

#### Allegations of Sexual Abuse and Sexual Harassment

Per the PAQ, the facility reported a total of 75 allegations in the past 12 months: 68 allegations of sexual abuse and 7 allegations of sexual harassment.

The Auditor reviewed a total of 16 investigative files—10 from the first 20 and 10% of the remaining files—using the PREA Audit Investigative Records Review Tool. Each file was assessed for completeness and compliance with investigation requirements.

The review captured data including:

- Case ID
- Date of Allegation
- Date of Investigation
- Type of Allegation (sexual abuse or sexual harassment)
- Parties Involved (staff-on-inmate or inmate-on-inmate)
- Final Disposition
- Whether Disposition Was Justified
- Investigating Officers
- Notification to Inmate of Results
- Sexual Abuse Cases

All 68 allegations involved inmate-on-inmate sexual abuse.

Each was investigated criminally by appropriate investigative personnel.

Of these, 9 cases were deemed unfounded, 37 were unsubstantiated, and 22 remained ongoing at the time of the audit.

In all closed cases, prosecution was declined. In each case, the alleged victim was offered medical and mental health services.

Retaliation monitoring was conducted for 90 days or until the allegation was deemed unfounded, the inmate was released/ transferred, or no further need for monitoring existed.

	<p>In all closed cases, victims received written notification of the outcome.</p> <p>All substantiated or unsubstantiated (not unfounded) cases underwent a Sexual Abuse Incident Review.</p> <p><b>Sexual Harassment Cases</b></p> <p>Of the 7 reported allegations, 5 were inmate-on-inmate and investigated administratively. 4 were found to be unsubstantiated, and 1 were still under investigation at the time of the audit.</p> <p>2 staff-on-inmate sexual harassment allegation was investigated criminally and remained ongoing at the time of the audit.</p> <p>In all resolved cases, the inmate received written notification of the outcome of the investigation.</p> <p><b>Institutional Culture and Cooperation</b></p> <p>Throughout the on-site audit process, facility staff were cooperative, professional, and engaged. Their responsiveness and understanding of PREA protocols demonstrated a culture of awareness and commitment to maintaining a safe and secure environment free from sexual abuse and harassment.</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.

**72. 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
<b>Inmate-on-inmate sexual abuse</b>	67	67	0	0
<b>Staff-on-inmate sexual abuse</b>	1	1	0	0
<b>Total</b>	68	68	0	0

**73. 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
<b>Inmate-on-inmate sexual harassment</b>	5	0	5	0
<b>Staff-on-inmate sexual harassment</b>	2	2	0	0
<b>Total</b>	7	2	5	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.

#### 74. 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	20	0	0	0	0
Staff-on-inmate sexual abuse	1	0	0	0	0
Total	21	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	21	9	37	0
Staff-on-inmate sexual abuse	1	0	0	0
Total	22	9	37	0

### 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.

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual harassment</b>	1	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	1	0	0	0	0
<b>Total</b>	2	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	1	0	4	0
<b>Staff-on-inmate sexual harassment</b>	1	0	1	0
<b>Total</b>	2	0	5	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

**78. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:**

15

<b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	15
<b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<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 abuse investigation files)

<b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	1
<b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	1
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)



**Staff-on-inmate sexual harassment investigation files**

**91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:**

0

**92. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?**

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**93. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?**

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

**94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.**

No text provided.

**SUPPORT STAFF INFORMATION****DOJ-certified PREA Auditors Support Staff**

**95. 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.**

☐ Yes

☒ No

## Non-certified Support Staff

96. 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

96. Enter the **TOTAL NUMBER OF NON-CERTIFIED SUPPORT** who provided assistance at any point during this audit:

1

## AUDITING ARRANGEMENTS AND COMPENSATION

97. 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

Identify the name of the third-party auditing entity

Corrections Consulting Services

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>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.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>ADOC Pamphlet, Inmate Awareness (English and Spanish)</li> <li>ADOC Male Inmate Handbook, dated September 25, 2017</li> <li>ADOC Organizational Chart</li> <li>ADOC, PREA Director Qualifications</li> <li>ADOC, PREA Compliance Manager Qualifications and Training</li> <li>Standard Operating Procedure (SOP) #454-1</li> </ol> <p>INTERVIEWS:</p> <p>Institution PREA Compliance Manager (IPCM):</p>

The IPCM confirmed that sufficient time is allocated to fulfill all PREA-related responsibilities at the facility.

Agency PREA Director (PD):

The PD confirmed having adequate authority and resources to develop, implement, and oversee PREA compliance efforts across all ADOC facilities.

The PD also confirmed that each facility's PREA Compliance Manager (PCM) has no responsibilities outside of ensuring institutional compliance with PREA standards and possesses the authority to implement required changes related to PREA issues.

Provision (a):

The facility, as reported in the PAQ, has a comprehensive written policy establishing a zero-tolerance stance toward all forms of sexual abuse and harassment. The policy includes:

1. Definitions of prohibited behaviors
2. Sanctions for individuals found guilty of such conduct
3. Strategies and procedures to prevent, detect, respond to, and reduce incidents of sexual abuse and harassment
4. Supporting Documentation:

ADOC AR #454, Section II (p.1): Clearly establishes a zero-tolerance policy regarding sexual abuse, harassment, and sexual misconduct—whether inmate-on-inmate or staff-on-inmate, regardless of consensual or coercive context.

ADOC AR #454, Section III and ADOC Male Inmate Handbook (2017): Provides clear definitions of prohibited behaviors and types of findings (substantiated, unsubstantiated, unfounded), including relevant sanctions.

Policy also outlines staff responsibilities, response procedures, reporting protocols, and investigative processes—all in alignment with PREA standards.

Provision (b):

The PAQ confirms that the agency has appointed an agency-wide PREA Director (PD), who reports to the General Counsel, as corroborated by the ADOC organizational chart.

Supporting Documentation:

ADOC AR #454, Section E (p.7): Identifies and outlines the roles and responsibilities of the PD, including oversight of PREA compliance, coordination with senior leadership, and collaboration with the Legal Division.

The PD maintains regular contact with all ADOC facilities through direct communication and site visits. The PD oversees 26 Institutional PREA Compliance Managers (IPCMs) and 26 backup IPCMs, ensuring adequate coverage and support for compliance activities statewide.

	<p>Provision (c):</p> <p>According to the PAQ, each facility has a designated PREA Compliance Manager (PCM) who reports directly to the agency's PREA Director on PREA-related matters, and administratively to the Warden or Superintendent.</p> <p>Supporting Documentation:</p> <p>ADOC AR #454: Establishes and clearly defines the IPCM role, responsibilities, and coordination duties to ensure institutional compliance with PREA standards. The IPCM collaborates with various levels of institutional leadership to effectively implement the agency's sexual safety policies.</p> <p>CONCLUSION:</p> <p>Based on the documentation review, interviews with key personnel, and policy analysis, the Auditor concludes that the facility meets all provisions of PREA Standard §115.11 concerning the zero-tolerance policy and the roles of the PREA Coordinator and PREA Compliance Manager.</p>
--	---

115.12	Contracting with other entities for the confinement of inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided.</li> <li>2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Contract with Alabama Therapeutic Education Facility (ATEF)</li> </ol> <p>INTERVIEW:</p> <p>Agency Contract Administrator</p> <p>An interview with the Agency Contract Administrator confirmed that ADOC enters into contracts with both private and county facilities. It was clearly stated that all such contracts must contain language requiring the contracting entity's compliance with the Prison Rape Elimination Act (PREA) standards. The administrator emphasized that if an entity is not PREA-compliant, the contract will not be executed.</p> <p>PROVISIONS</p> <p>Provision (a):</p>

The PAQ indicated that there is one contract in place for the confinement of ADOC inmates. The facility affirmed that the Alabama Department of Corrections requires all contracting entities to comply with PREA standards. Each contract includes specific language outlining the expectation of PREA compliance, including obligations for training, reporting, and cooperation with monitoring efforts.

The facility does not engage in independent contracts for inmate confinement. Instead, compliance requirements are governed by ADOC AR #454, which, on page 7, Section D, specifies:

“The ADOC General Counsel shall be responsible for ensuring that contracts for confinement of inmates include a provision indicating to the contracting entity its obligation to comply with the PREA standards and the ADOC’s monitoring of such compliance.”

The ADOC Inmate Housing Agreement with ATEF reinforces this obligation, stating:

“Pursuant to 28 C.F.R. Part 115.12, ATEF is obligated to adopt and comply with all PREA standards, and the ADOC shall monitor the ATEF for compliance.”

Similarly, the ADOC Contract with ATEF explicitly requires:

“Vendor (ATEF) shall comply with Alabama Code Section 14-11-31, as well as 28 C.F.R. Part 115, the Prison Rape Elimination Act (PREA)... Pursuant to 28 C.F.R. Part 115.12, Vendor is obligated to adopt and comply with all PREA standards, and the ADOC shall monitor Vendor for compliance... Vendor shall provide reasonable access to the PREA Contract Monitor; provide relevant documentation as requested; require and provide training of all of its employees, agents, or contractors; and provide a Report from any PREA audit, which shall be performed by an independent, DOJ-certified auditor.”

Provision (b):

The PAQ confirmed that all contracts for inmate confinement include a requirement for the ADOC to monitor the contractor’s compliance with PREA standards. Furthermore, the PAQ reported that there are no contracts that fail to include this monitoring requirement, as outlined in §115.12(a)(3).

The Agency Contract Administrator confirmed that contractor policies and procedures are reviewed for compliance with PREA standards. Contractors are required to report any PREA-related allegations to ADOC and must provide copies of the allegation, investigation outcomes, and findings to the agency’s PREA Director for further review and oversight.

#### CONCLUSION:

Based on a comprehensive review of the PAQ, relevant contracts, ADOC policies and regulations, and interviews with facility leadership, the auditor has determined that the agency meets all provisions of Standard §115.12. The documentation and practices in place demonstrate a clear and consistent expectation of PREA compliance among all contracted confinement facilities, including provisions for ongoing monitoring and accountability.

115.13	Supervision and monitoring
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 517 376">DOCUMENTATION:</p> <ol data-bbox="320 443 1251 813" style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ), and supporting documentation:</li> <li>2. ADOC Administrative Regulation #454</li> <li>3. ADOC Form 454-J, Annual PREA Staffing Plan Review</li> <li>4. ADOC Form 454-G, Log of Unannounced Rounds</li> <li>5. Copies of the Staffing Deviation Log</li> <li>6. Facility Blueprint/Layout</li> <li>7. Facility Vulnerability Assessment Form</li> <li>8. Facility Staffing Plan Checklist</li> <li>9. Facility Staffing Plan, dated 23, 2024</li> </ol> <p data-bbox="256 857 485 891">OBSERVATIONS:</p> <p data-bbox="256 925 1453 1126">During the on-site assessment, the Auditor conducted a random review of unit logbooks and verified multiple entries documenting unannounced rounds conducted by intermediate- or higher-level staff. These observations confirmed the implementation and regular execution of unannounced supervisory rounds, as required by policy.</p> <p data-bbox="256 1171 443 1205">INTERVIEWS:</p> <p data-bbox="256 1238 628 1272">Facility Head or Designee:</p> <p data-bbox="256 1283 1453 1350">The Facility Head provided a detailed overview of key operational factors influencing supervision and safety. Discussion topics included:</p> <ol data-bbox="320 1417 1465 2089" style="list-style-type: none"> <li>1. The direct impact of staffing levels on inmate programming and rehabilitation opportunities.</li> <li>2. The importance of ongoing evaluation and potential upgrades to the video monitoring system to improve surveillance and enhance facility safety.</li> <li>3. Consideration of physical plant layout in surveillance, movement control, and operational efficiency.</li> <li>4. The roles of both internal and external oversight in ensuring transparency, accountability, and adherence to standards.</li> <li>5. The composition of the inmate population, with emphasis on custody levels, behavioral risks, and special needs requiring targeted supervision strategies.</li> <li>6. Strategic placement of supervisory staff to ensure effective oversight and timely response.</li> <li>7. The importance of addressing line staff needs, including workload, morale, and professional development.</li> <li>8. Emphasis on staffing plan compliance and the monitoring of deviations, with regular review and updates ensuring continued alignment with safety and</li> </ol>

programming requirements.

**Institutional PREA Compliance Manager (IPCM):**

The IPCM reported a strong focus on maintaining adequate staffing to support inmate programming. The facility regularly inspects and evaluates the video monitoring system to ensure proper functionality and adequate coverage. Any deficiencies identified are promptly addressed, reinforcing institutional safety and security.

**Intermediate- or Higher-Level Facility Staff:**

Supervisory staff confirmed that they regularly conduct and document unannounced rounds in accordance with policy. These reports were corroborated by a review of unit logbooks and informal conversations with line staff, all of whom confirmed the practice and its consistency.

**Random Staff:**

Randomly selected staff reported that supervisory personnel conduct unannounced rounds on every shift, interact with both staff and inmates, and routinely sign off on unit logbooks. Staff also demonstrated awareness of the policy prohibiting the alerting of others to the timing of rounds, ensuring the integrity of the unannounced system. During the facility tour, the Auditor observed active supervisory movement and interaction throughout the institution.

**Random Inmate:**

Inmates confirmed the presence and visibility of the IPCM and supervisory staff within housing and general population areas. They described staff as approachable and responsive to inmate concerns, reinforcing the perception of safety and oversight.

**PROVISIONS:**

**Provision (a):**

The facility submitted a detailed staffing plan through the PAQ, addressing all thirteen elements required under Provision (a). The plan outlines procedures for ensuring adequate coverage of all posts, including relieved and gender-restricted assignments.

The most recent ADOC Form 454-J includes analysis of:

1. Generally accepted correctional practices.
2. Allocation of duties between ADOC, facility, and external staff.
3. Internal/external oversight findings.
4. Physical plant layout and video surveillance capacity.
5. Inmate population characteristics.
6. Supervisory staff distribution.
7. Institutional programming and supervision strategies.
8. Relief factors and applicable regulations.
9. Incident data regarding sexual abuse/harassment.



The staffing plan, dated January 23, 2024, was based on a population of 1,580 inmates and is subject to annual QA audits. The facility reported an average daily population of 1,575 over the past 12 months, which the Facility Head confirmed.

Provision (b):

Deviations from the staffing plan are documented by the watch commander and addressed by either reallocating existing staff or authorizing overtime. Common causes of deviations include FMLA, sick call, military obligations, annual leave, holidays, and training. These instances are logged and reviewed to maintain operational continuity.

No incidents were reported in which inmate education or programming was suspended due to staffing shortages. Contracted personnel continue to deliver education services consistently.

Provision (c):

The staffing plan undergoes a formal annual review involving the Facility Head, PREA Director, IPCM, and other senior staff. This collaborative review evaluates:

1. Potential updates to the staffing plan.
2. Enhancements to video monitoring technology.
3. Allocation of agency resources to support supervision goals.
4. Shift rosters were reviewed and confirmed adequate coverage of mandatory posts.

The Auditor verified completion of the most recent ADOC Form 454-J, demonstrating formal compliance with the required annual review and submission processes.

Provision (d):

The facility maintains a robust practice of unannounced supervisory rounds. Documentation in unit logbooks, reviewed by the Auditor, confirmed compliance across all shifts. Staff interviews and facility observation confirmed that:

Supervisors conduct regular, unannounced rounds. Staff are prohibited from alerting others to the timing of these rounds. ADOC Form 454-G is used to document each round and related checks, including PREA hotline functionality. Policy guidance from ADOC AR #454 outlines the expectations for unannounced rounds and the submission of relevant documentation to the IPCM.

CONCLUSION:

Based on the thorough review of documentation, facility observations, and staff/ inmate interviews, the Auditor concludes that the facility meets all provisions under PREA Standard §115.13 – Supervision and Monitoring.

115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016.</li> <li>3. Institutional PREA Compliance Manager (IPCM) memorandum of non-occurrence, dated January 23, 2024.</li> </ol> <p>OBSERVATIONS:</p> <p>During the on-site facility tour, the Auditor did not observe any youthful inmates housed at the facility.</p> <p>INTERVIEWS:</p> <p>Facility Head:</p> <p>In both formal interviews and informal conversations, the Facility Head confirmed that the facility does not house youthful inmates.</p> <p>Institutional PREA Compliance Manager (IPCM):</p> <p>The IPCM likewise confirmed that youthful inmates are not housed at the facility, both through formal interviews and informal discussions.</p> <p>Youthful Inmates:</p> <p>As the facility does not house youthful inmates, no interviews were conducted with individuals in this population.</p> <p>PROVISIONS:</p> <p>Provision (a):</p> <p>The PAQ indicates that the facility does not house youthful inmates. This was verified during the on-site audit through a review of the inmate roster, which showed no inmates with birthdates later than 2006. Additionally, the IPCM memorandum dated January 23, 2024, affirmed that no youthful inmates are housed at the facility.</p> <p>Provision (b):</p> <p>Not applicable. The facility does not house youthful inmates.</p> <p>Provision (c):</p>

	<p>Not applicable. The facility does not house youthful inmates.</p> <p>CONCLUSION:</p> <p>Based on the review of the Pre-Audit Questionnaire, supporting documentation, staff interviews, and on-site observations, the Auditor concludes that the facility is in full compliance with PREA Standard §115.14. The facility does not house youthful inmates, and all evidence provided supports this finding.</p>
--	---

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation (AR) #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Administrative Regulation #336, Searches, dated February 8, 2016</li> <li>4. ADOC Form 302-A, Incident Report</li> <li>5. Training records related to cross-gender and transgender search procedures</li> <li>6. Transgender Inmate Search Preferences Form</li> </ol> <p>OBSERVATIONS</p> <p>During the facility tour, the Auditor observed that opposite-sex staff consistently announced their presence when entering inmate housing units, in accordance with policy. Both cisgender male inmates and transgender female inmates were observed within the facility, confirming a mixed population relevant to this standard's applicability.</p> <p>INTERVIEWS</p> <p>Non-Medical Staff:</p> <p>Interviews with non-medical staff confirmed that cross-gender strip or visual body cavity searches are not conducted. In the rare case of an exigent circumstance, such searches would only be conducted by medical staff, with prior approval from the Facility Head, and documented accordingly.</p> <p>Random Staff:</p> <p>Twenty randomly selected staff participated in formal interviews, with additional informal conversations held throughout the audit. Key findings included:</p>

1. All staff had received training on cross-gender and transgender search procedures during initial In-Service Training.
2. No staff reported having conducted or witnessed a cross-gender strip or visual body cavity search.
3. There are sufficient male staff available to perform searches on male inmates, eliminating the need for cross-gender search scenarios.
4. Female officers do not conduct strip searches or visual body cavity searches.
5. Staff were aware that searches of transgender or intersex inmates must not be conducted to determine genital status.
6. Staff affirmed that transgender or intersex inmates are given consideration for shower privacy, and alternative shower times are arranged when individual stalls are not available.

Random Inmates:

All interviewed inmates (100%) stated that:

1. They had not been subjected to cross-gender searches.
- 2.
3. They are able to shower and change clothes without being viewed by staff of the opposite gender.

Opposite-gender staff announce their presence before entering housing or restroom areas.

Transgender Inmates:

At the time of the on-site audit, there were no transgender inmates assigned to the facility. Therefore, no interviews specific to transgender individuals were conducted for this standard.

## PROVISIONS

Provision (a):

The facility does not conduct cross-gender strip or visual body cavity searches. This was confirmed via the PAQ, a review of incident reports, and staff interviews. Training sign-in sheets and search preference forms confirmed staff awareness and proper documentation procedures.

Relevant policies include:

AR #454 (p. 14, Section E.1) – prohibits cross-gender strip/visual searches except in exigent circumstances or when conducted by medical staff.

AR #336 (p. 4-5, Section F.3 & F.4) – outlines that such searches must be documented and are only permitted in exigent circumstances.

Provision (b):

The facility reported, and the audit confirmed, that no female inmates are housed at

this location.

Provision (c):

In the event of an exigent circumstance, cross-gender strip or visual body cavity searches would be authorized only by the Facility Head and performed by medical personnel, per policy. These searches must be documented using ADOC Form 302-A.

Relevant policies:

AR #336 (p. 5, No. 4; p. 6, No. 11) – mandates documentation requirements for such searches.

Provision (d):

Facility practices allow inmates to perform bodily functions, change clothes, and shower without opposite-gender staff viewing their genitals, buttocks, or breasts, except in exigent circumstances or when incidental to routine checks. Observations and inmate interviews confirmed consistent announcements by opposite-gender staff.

Relevant policy:

AR #454 (p. 14, Section E.3) – requires implementation of privacy measures and staff announcements.

Provision (e):

Staff are prohibited from searching transgender or intersex inmates solely to determine genital status. This was consistently affirmed during staff interviews. Training includes instruction on respectful and appropriate procedures.

Relevant policies:

AR #336 (p. 5, No. 6)

AR #454 (p. 15, Section E.4)

Provision (f):

Training documentation confirmed that staff receive instruction on proper procedures for cross-gender and transgender/intersex searches. Acknowledgment forms signed by staff and verified against the current roster confirmed participation. Training materials emphasized respect, professionalism, and compliance with PREA requirements.

CONCLUSION

After a comprehensive review of facility documentation, direct observations, and extensive staff and inmate interviews, the Auditor finds that the facility is in full compliance with PREA Standard §115.15. The agency has effectively implemented policies, training, and practices that ensure cross-gender searches and viewing are

	appropriately limited and respectful of inmates' dignity and privacy.
--	---

<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation.</li> <li>2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations &amp; Legal: Inmate Sexual Abuse and Harassment, dated January 4, 2016.</li> <li>3. Memorandum of Understanding (MOU) between ADOC and the Alabama Institute for the Deaf and Blind.</li> <li>4. Inmate Receipt of PREA Acknowledgment (specifically for inmates who are disabled, low-vision, or deaf).</li> <li>5. Materials and resources used for low-functioning individuals.</li> <li>6. Memo describing the use and availability of Google Translate to assist with language translation needs.</li> </ol> <p>OBSERVATIONS:</p> <p>During the on-site tour, the Auditor observed PREA-related postings prominently displayed in both English and Spanish in various areas, including housing units, work assignments, hallways, visitation rooms, and other communal areas. The Auditor also reviewed printed PREA materials, educational brochures, and training resources, all of which were available in both English and Spanish. Additionally, the Institutional PREA Compliance Manager (IPCM) has established PREA bulletin boards throughout the facility, offering educational content and promoting awareness of sexual safety and reporting processes.</p> <p>INTERVIEWS:</p> <p>Facility Head:</p> <p>The Facility Head confirmed that the facility has established procedures to ensure that inmates with disabilities and those who are Limited English Proficient (LEP) are afforded meaningful access to all aspects of the PREA program. This includes the use of professional interpreters, written communications, and alternative accessible</p>

formats to facilitate understanding and participation.

Random Staff:

Interviews with randomly selected staff confirmed that inmate interpreters, readers, or assistants are strictly prohibited from being used when inmates with disabilities or LEP inmates report allegations of sexual abuse or harassment. Staff unanimously stated they had never observed or participated in any violation of this policy.

Inmates with Disabilities and LEP Inmates:

Interviews with inmates in these populations revealed a consistent understanding of their rights under PREA and how to report incidents of sexual abuse or harassment. All inmates interviewed reported feeling safe and supported by the facility in light of their disabilities or language barriers. When asked:

1. "Do you understand your rights related to sexual abuse and how to report sexual abuse or harassment?" 100% responded affirmatively.
2. "Do you feel the facility does everything it can to assist you in feeling less vulnerable and safer in light of your disability?" 100% affirmed.
3. "Can you think of anything the facility could do to assist you better in light of your disability?" All respondents indicated satisfaction with the facility's current efforts and resources.

PROVISIONS:

Provision (a):

The facility reported through the PAQ that procedures are in place to ensure inmates with disabilities and LEP inmates have equal access to PREA protections. This was confirmed through documentation and interviews with the Facility Head.

The facility has access to professional interpreting services through a Memorandum of Understanding with the Alabama Institute for the Deaf and Blind.

Google Translate is available 24/7 and facilitated by the watch commander to assist with real-time translation needs.

Written PREA materials, including brochures and educational handouts, are available in both English and Spanish.

Relevant policy references:

ADOC AR #454 (p. 13, B.1.c) mandates that inmates receive accessible PREA education, including formats appropriate for language barriers, visual or hearing impairments, cognitive limitations, and other disabilities.

Provision (b):

	<p>The facility has implemented comprehensive resources and accommodations for LEP and disabled inmates. These include:</p> <ol style="list-style-type: none"> <li>1. PREA materials and videos in both English and Spanish, including closed-captioning.</li> <li>2. Visual and auditory formats for inmates who are hearing or visually impaired.</li> <li>3. Simplified materials, read-aloud options, and video explanations for inmates with cognitive impairments or limited reading skills.</li> </ol> <p>An ADA Coordinator ensures PREA materials are adapted appropriately and staff are trained to support inmates with special needs.</p> <p>Relevant policy references:</p> <p>ADOC AR #454 (p. 13, B.1, a-d) ensures information is presented in understandable forms for all inmates.</p> <p>ADOC AR #454 (p. 13, B.2, a-d) outlines required education topics: prevention, protection, reporting methods, and treatment options.</p> <p>Provision (c):</p> <p>The facility reported, and the audit confirmed, that no inmate interpreters, readers, or assistants were used for PREA-related communication during the past 12 months. This aligns with ADOC AR #454 (p. 13, B.1.c), which explicitly prohibits the use of inmates, family members, or friends in place of qualified interpreters or translators.</p> <p>CONCLUSION:</p> <p>Based on the review of the PAQ, supporting documentation, facility observations, and interviews with staff and inmates, the Auditor concludes that the facility is in full compliance with Standard §115.16. The facility demonstrates a clear commitment to ensuring all inmates, regardless of disability or language ability, have equal access to information, education, and reporting mechanisms related to sexual abuse and sexual harassment.</p>
--	--

115.17	Hiring and promotion decisions
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. ADOC Administrative Regulation (AR) #454 – Inmate Sexual Abuse and Harassment (Dated January 4, 2016)</li> </ol>



3. ADOC Administrative Regulation #216 – Background Investigations
4. Employee personnel records for current staff
5. Background check documentation for staff and contractors
6. Application and Pre-Employment Questionnaire (Form ADOC 216-B)

#### INTERVIEW:

Human Resources (HR) Administrative Staff

During the audit, the Auditor conducted an interview with the HR Director. The Director provided detailed information on hiring practices, background check procedures, and compliance efforts under the Prison Rape Elimination Act (PREA). Key takeaways included:

#### Background Check Requirements:

1. All new hires, promotions, and existing staff undergo background checks, with rechecks required at least every five years. A centralized tracking database is maintained by the Divisional HR Department.
2. Personnel Documentation & PREA Compliance:
3. HR ensures that all incoming hires complete required disclosures and background checks. A structured system is in place to meet PREA mandates related to hiring and promotion.
4. Employee Reporting Requirements:
5. Staff are required to report any arrest activity.

The ADOC also shares information regarding substantiated allegations of sexual abuse or harassment with institutional employers, when requested and permissible by law.

#### PROVISIONS

##### Provision (a):

The facility employs 105 staff, with 21 new hires in the past year. Additionally, there are 110 contractors and no volunteers with inmate contact.

The Auditor reviewed a random sample of personnel records, all of which included the required documentation—including completed criminal history checks and PREA compliance disclosures.

Per ADOC AR #454, Section V, A, 4(a), the ADOC prohibits hiring or promoting any individual with a history of:

1. Sexual abuse in any custodial setting
2. Convictions for forced or coerced sexual activity
3. Civil or administrative findings of such misconduct

Provision (b):

The facility considers incidents of sexual abuse and harassment in all hiring, promotion, and contractor decisions. This was confirmed through both the PAQ and staff interviews.

ADOC AR #216, Section V, B, outlines that such incidents are to be evaluated prior to employment or contracting.

Provision (c):

Before hiring, the ADOC conducts criminal background checks and contacts prior institutional employers regarding any substantiated allegations or resignations during ongoing sexual abuse investigations.

All 21 new hires in the past 12 months underwent background checks, confirmed through HR interviews and documentation.

ADOC AR #454, Section V, 4(b), outlines these requirements, in conjunction with AR #216 and Form 216-B.

Provision (d):

All contractors with potential inmate contact undergo criminal background checks before engagement and every five years thereafter.

The facility reported 40 service contracts requiring these checks. Documentation confirmed compliance.

Governing policy: ADOC AR #454, Section V, A, 4(b)(1).

Provision (e):

Criminal background checks are conducted every five years for current employees and contractors. This was confirmed through interviews and verified via documentation review.

Governing policy: ADOC AR #454, Section V, A, 4(f).

Provision (f):

Applicants and current employees must answer PREA-related questions in writing during hiring, promotions, and annually thereafter.

Interviews and reviewed forms (e.g., ADOC 216-B) confirmed that required disclosures include questions regarding any prior sexual misconduct.

These forms require employee signatures and are tracked by HR.

Provision (g):

The facility mandates termination for employees who omit material facts or provide false information related to sexual misconduct.

This policy was confirmed in interviews and supported by ADOC AR #454, Section V,

	<p>A, 4(b)(2).</p> <p>Provision (h):</p> <p>Unless prohibited by law, the ADOC provides information about substantiated allegations involving former employees upon request from potential institutional employers.</p> <p>This practice was verified during interviews with HR staff and is supported by policy.</p> <p>CONCLUSION:</p> <p>Based on the review of documentation, interviews, and on-site personnel record audits, the Auditor has determined that the facility is in full compliance with PREA Standard §115.17 – Hiring and Promotion Decisions.</p>
--	--

115.18	Upgrades to facilities and technologies
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454 – Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016.</li> <li>3. Facility Schematic – Detailed blueprint and layout of the facility used to assess camera coverage and identify potential blind spots.</li> </ol> <p>OBSERVATIONS:</p> <p>The Auditor conducted a comprehensive, on-site tour of the facility. Based on observations, there have been no substantial additions or structural modifications to the facility since the last PREA audit.</p> <p>During the tour, the Facility Head highlighted the facility’s use of strategically placed security cameras and mirrors. These technologies are intentionally positioned to enhance inmate and staff safety, particularly in areas identified as high-risk for potential sexual abuse or harassment. Security mirrors help eliminate blind spots, while camera placements are designed to provide broad and effective surveillance coverage.</p> <p>INTERVIEWS:</p>

	<p>Agency Head or Designee:</p> <p>The Agency Head's Designee discussed the agency's strategic planning regarding surveillance enhancements. Emphasis was placed on minimizing blind spots and ensuring that all camera placements respect inmate privacy by avoiding cross-gender viewing, in compliance with PREA standards.</p> <p>Facility Head or Designee:</p> <p>The Facility Head described ongoing efforts to improve safety through technological means. Key points included:</p> <ol style="list-style-type: none"> <li>1. The facility's long-term goal is full camera coverage of all areas to ensure the security of both staff and inmates.</li> <li>2. Future expansions of the surveillance system will prioritize areas identified as vulnerable or under-monitored.</li> <li>3. The monitoring system is actively maintained and monitored, with continuous access to live and recorded footage to ensure real-time and post-incident oversight.</li> </ol> <p>PROVISIONS:</p> <p>Provision (a):</p> <p>The PAQ confirms that there have been no new facilities acquired, nor significant physical modifications made to the current facility since the last PREA audit.</p> <p>Provision (b):</p> <p>The PAQ indicates that improvements have been made to the facility's video monitoring and surveillance systems since the previous audit. Executive leadership affirmed that the upgraded technology is a core component of the facility's broader safety and sexual abuse prevention efforts.</p> <p>CONCLUSION:</p> <p>Based on the Auditor's review of the Pre-Audit Questionnaire, supporting documentation, on-site observations, and interviews with key staff, it is concluded that the facility is in full compliance with PREA Standard §115.13. The facility demonstrates a clear commitment to safety through its continued investment in monitoring technologies, strategic supervision practices, and adherence to privacy protocols. These efforts are critical in maintaining a secure environment and in preventing, detecting, and responding to sexual abuse and harassment within the facility.</p>
--	--

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## Auditor Discussion

### DOCUMENTS

1. Pre-Audit Questionnaire
2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) 454, Inmate Sexual Abuse and Harassment, dated January 4, 2016
3. ADOC Administrative Regulation #300
4. Memorandum of Understanding (MOU) between ADOC and the Alabama Coalition Against Rape (ACAR)
5. National Protocol for Sexual Assault Medical Forensic Examinations
6. Specialized Investigator Training Certificates
7. Regional List of SANE Centers and Rape Crisis Centers

### INTERVIEWS

Agency PREA Director (PD):

The PREA Director confirmed that the ADOC adheres to the uniform evidence protocol consistent with the National Protocol for Sexual Assault Medical Forensic Examinations. This protocol is utilized in both administrative and criminal investigations and ensures forensic procedures are developmentally appropriate for youth. The Director emphasized that both types of investigations—administrative and criminal—are conducted for all sexual abuse allegations.

Institutional PREA Compliance Manager (IPCM):

Key points shared include:

1. Advocacy Services: Victim advocacy services are available through trained facility staff.
2. Forensic Examination Agreement: A formal MOU exists between ADOC and ACAR, establishing cooperation with 28 rape crisis centers across Alabama.
3. Examination Location: Forensic exams are conducted at One Place Family Justice Center, a dedicated SANE site.
4. Exam Statistics: Fifty-one (51) forensic examinations were conducted in the past 12 months.

SAFE/SANE Staff:

1. Examinations are conducted at One Place Family Justice Center.
2. The ADOC-ACAR service agreement ensures statewide coverage for SANE services.
3. SANE personnel are contacted via a designated call list and exams are held at One Place Family Justice Center in Montgomery, Alabama.
4. Inmates bear no financial responsibility for forensic exams.

Random Staff:

All interviewed staff demonstrated an understanding of their responsibilities following a sexual abuse report, including preservation of evidence and transferring the case to the appropriate authorities.

Inmates Who Reported Sexual Abuse:

1. Staff were responsive and supportive following reports.
2. Inmates were referred promptly for forensic medical examinations when appropriate.
3. Victim advocates were made available during the examination process.
4. No inmates were financially charged for medical treatment.
5. No inmates were required to take polygraph tests.
6. Inmates were notified in writing of the outcome of the investigations.

Rape Crisis Center Personnel:

ACAR's MOU with ADOC ensures the availability of SANE services and victim advocacy. Services, including emotional support and hotline access, are provided regardless of when or where the abuse occurred.

PROVISION

Provision (a):

The facility/agency conducts both administrative and criminal investigations into inmate-on-inmate sexual abuse and staff misconduct. ADOC has 37 designated investigators.

ADOC AR #300 outlines the agency's evidence protocol and commitment to fair, impartial investigations while protecting constitutional rights and confidentiality.

Provision (b):

No youthful inmates were housed at the facility at the time of the audit. However, the evidence protocol is developmentally appropriate for youth. One Place Family Justice Center provides 24/7 SANE services, and all examinations are free of charge, funded by the Alabama Crime Victims Compensation Fund. Victim advocates are present during exams. The facility reported 51 SANE exams in the past year.

Provision (c):

All inmates who experience sexual abuse have access to forensic medical exams at no cost. Exams are conducted by SANE personnel, with ER physicians used only if necessary. One Place Family Justice Center maintains a dedicated SANE facility with on-call staff. Advocacy services are embedded in the exam process. The MOU between ADOC and ACAR supports this partnership and access to services.

ADOC AR #454 reaffirms that treatment services are provided free of charge,

	<p>regardless of whether the victim cooperates with the investigation.</p> <p>Provision (d):</p> <p>Victim advocates are present during forensic exams. Sixty-eight (68) allegations of sexual abuse and seven (7) of sexual harassment were reported in the past year, with 51 forensic exams conducted. Advocacy is a standard part of the forensic response protocol.</p> <p>Provision (e):</p> <p>If requested by the victim, advocacy support is provided through a qualified agency staff member or community-based organization. Services include emotional support, crisis intervention, and referrals.</p> <p>Provision (f):</p> <p>As outlined previously, the facility is responsible for conducting both administrative and criminal investigations into sexual abuse and staff misconduct.</p> <p>Provision (g):</p> <p>Auditors are not required to assess this provision.</p> <p>Provision (h):</p> <p>Advocacy services are integrated into the forensic medical examination process and are supported through the MOU with ACAR.</p> <p>CONCLUSION</p> <p>Based on the review of policies, documentation, and interviews with staff, inmates, and external partners, the Auditor concludes that the agency/facility meets all provisions of Standard §115.21 regarding evidence protocol and forensic medical examinations.</p>
--	--

115.22	Policies to ensure referrals of allegations for investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment</li> <li>3. ADOC Standard Operating Procedure – Investigations &amp; Intelligence #454</li> </ol>

4. ADOC Administrative Regulation #300 – Operations
5. ADOC Duty Officer Report (DOR)
6. National Institute of Corrections (NIC) Investigations Course Certificates & Continuing Education Credits

#### INTERVIEWS:

##### Agency Head or Designee

During the interview, the Agency Head’s designee affirmed that the Alabama Department of Corrections (ADOC) takes every allegation of sexual abuse and sexual harassment seriously. All allegations, whether administrative or criminal in nature, are investigated immediately and thoroughly. ADOC does not rely on external agencies for investigations. Policies related to the referral and investigation of allegations are posted on the ADOC website. All criminal referrals are documented and tracked.

##### Investigative Staff

Investigative staff confirmed during interviews that both administrative and criminal allegations are investigated by trained agency personnel. Staff reiterated that the ADOC Law Enforcement Services Division (LESD) is responsible for all investigations and that appropriate referrals are made when criminal activity is substantiated.

#### PROVISIONS:

##### Provision (a):

The agency refers all investigations to the ADOC Law Enforcement Services Division (LESD). According to the PAQ, LESD consists of 32 trained investigators. Documentation reviewed confirms that these investigators have completed specialized training through the National Institute of Corrections (NIC).

In the past 12 months, the PAQ reflects:

1. 68 allegations of sexual abuse
2. 7 allegations of sexual harassment
3. 51 forensic medical exams conducted
4. All forensic examinations were completed by certified SAFE/SANE personnel at One Place Family Justice Center, Montgomery, AL.

ADOC Administrative Regulation #454 (p. 22, Section I, 1, b) states that LESD is responsible for conducting prompt, thorough, and objective investigations, regardless of criminal outcomes or employment status. Substantiated criminal cases are referred to the local District Attorney for prosecution, with LESD available for support as needed.

##### Provision (b):



	<p>The agency has policies and practices to ensure all allegations of sexual abuse or harassment are referred for investigation by personnel with legal authority to conduct such investigations.</p> <ol style="list-style-type: none"> <li>1. Of the 68 sexual abuse allegations, all were referred for criminal investigation.</li> <li>2. Of the 7 sexual harassment allegations, 2 were referred for criminal investigation; 5 were handled administratively.</li> <li>3. All LESD investigators are trained peace officers with the authority to investigate these matters. The ADOC Duty Officer Report (DOR) is used to document each allegation and to initiate appropriate investigative processes.</li> </ol> <p>As outlined in ADOC Administrative Regulation #454 (p. 7, Section C, 5), LESD is responsible for notifying the alleged victim of the outcome of the investigation—whether substantiated, unsubstantiated, or unfounded.</p> <p>Provision (c):</p> <p>As previously noted, all investigations are conducted by the ADOC Law Enforcement Services Division (LESD).</p> <p>Provisions (d) and (e):</p> <p>These provisions are not applicable to the audit process and are therefore not evaluated.</p> <p>CONCLUSION:</p> <p>Based on the review of agency documentation, interviews with key staff, and evaluation of investigative practices, the Auditor finds that the agency/facility meets the requirements of Standard §115.22 – Referral of Allegations for Investigations. The agency has demonstrated a consistent and thorough process for referring and investigating all allegations of sexual abuse and harassment, in accordance with PREA standards and ADOC policy.</p>
--	--

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment</li> </ol>

3. PREA Training Curricula developed by The Moss Group
4. "What Staff Should Know About Sexual Misconduct with Inmates" Pamphlet
5. Annual Staff Training Records (85 reviewed)
6. PREA Training Test
7. PREA Information Bulletin Board
8. IPCM (Interpersonal Communication Management) Training Materials
9. Staff Meeting and Shift Turnout Training Documentation

#### OBSERVATIONS:

During the on-site facility tour, the Auditor observed a PREA Information Board prominently displayed. The board provided key educational materials including:

1. Definitions and terminology relevant to PREA
2. Reporting mechanisms and the zero-tolerance policy
3. Information on the inmate's right to be free from sexual abuse and harassment
4. Contact number (6611) used by inmates to report incidents of sexual abuse

#### INTERVIEWS:

##### Random Staff

Staff consistently demonstrated understanding of their PREA-related responsibilities. Interviewed staff recalled:

1. Completing initial PREA training prior to any inmate contact
2. Participating in annual in-service training and regular shift-based PREA refreshers
3. Being trained on all ten elements required under the standard

#### PROVISIONS:

##### Provision (a):

The Pre-Audit Questionnaire confirms that all employees who may have contact with inmates receive comprehensive training that includes:

1. Zero tolerance for sexual abuse and sexual harassment
2. Responsibilities under agency policy for prevention, detection, reporting, and response
3. Inmate rights regarding freedom from sexual abuse/harassment
4. Protection from retaliation for reporting
5. Dynamics of abuse in confinement

6. Common victim responses
7. Recognition and response to signs of abuse
8. Avoidance of inappropriate relationships
9. Professional communication with LGBTI and gender nonconforming individuals
10. Legal obligations for mandatory reporting

The PREA training curriculum—developed by The Moss Group—thoroughly covers each of these topics. The training is tailored by role and includes visual and written materials, along with training reinforcement strategies such as numbered sections for retention.

The Auditor reviewed 85 staff training records and verified that each staff member received and acknowledged the required PREA training. Attendance rosters and signed training acknowledgment forms confirm that all employees completed this training. Specialized training is also provided based on job function.

Provision (b):

Training content has been customized to reflect the realities of working in a male correctional setting, while still addressing gender-specific considerations as required by PREA.

The Auditor verified signed attendance sheets that support participation in the training sessions referenced under Provision (a).

Provision (c):

Of the 85 staff files reviewed, 100% had documentation confirming they received PREA training within the last twelve months.

Staff are also issued a pamphlet titled “PREA: What Staff Should Know About Sexual Misconduct with Inmates,” which outlines key PREA definitions, reporting responsibilities, and other fundamental elements.

Additionally, staff are provided with a laminated, pocket-sized spiral reference booklet titled “Prison Rape Elimination Act (PREA): A Trauma-Informed Guide for First Responders.” This guide contains sections on:

1. PREA Overview
2. Definitions
3. Key PREA Components
4. Prevention and Detection Strategies
5. First Responder Responsibilities
6. Resource Summary

Provision (d):

All PREA training is documented. Staff are required to sign either a training attendance sheet or a receipt of training acknowledgment upon completion. The

	<p>Auditor verified these documents in every training file reviewed. Training logs and acknowledgment forms confirm consistent tracking and compliance.</p> <p>CONCLUSION:</p> <p>Based on documentation, observations, and interviews, the Auditor finds that the facility is in full compliance with Standard §115.31 – Employee Training. All required provisions are met, training is comprehensive and role-specific, and employee understanding is consistently verified</p>
--	--

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment</li> <li>3. ADOC Administrative Regulation #216 – Volunteer Services</li> <li>4. Volunteer Training Records</li> <li>5. Contractor Training Records</li> <li>6. Training Curricula for Volunteers and Contractors</li> </ol> <p>INTERVIEWS</p> <p>Volunteer Interview:</p> <p>During the interview, a volunteer confirmed having received PREA training prior to being authorized to work with inmates. The volunteer indicated that the training was tailored to their role and responsibilities within the facility. When asked by the Auditor to describe their understanding of PREA, the volunteer demonstrated a clear knowledge of the Act and articulated their role and obligations in the event of witnessing or receiving a report of sexual abuse or sexual harassment.</p> <p>Contractor Interview:</p> <p>A contractor interviewed also reported receiving PREA training before being permitted to interact with inmates. The contractor confirmed the training addressed specific responsibilities associated with their role. When questioned, the contractor accurately described the purpose of PREA and their duty to report and respond to incidents of sexual abuse or harassment involving inmates.</p>

## PROVISIONS

### Provision (a):

The facility indicated in the PAQ that all volunteers and contractors who have inmate contact are trained in their responsibilities regarding the prevention, detection, and response to sexual abuse and harassment. The facility reported 110 contractors and 1 volunteer approved for facility access. However, actual numbers entering the facility are significantly lower, which was corroborated during the interview process.

The Auditor reviewed PREA training records for 1 volunteer and 48 contractors, all of which documented completion of PREA training. The training curriculum, developed in collaboration with The Moss Group, includes all ten elements required by the standard. The training is role-specific, with complexity aligned to the duties of the volunteer or contractor.

### Policy References:

ADOC AR #454, p.11, K(8): Designates the IPCM as responsible for ensuring all volunteers and contractors receive appropriate PREA training.

ADOC AR #454, p.11, Section M: Specifies that employees, contractors, and volunteers must comply with all policies related to sexual abuse, harassment, and custodial sexual misconduct.

### Provision (b):

According to the PAQ, training content and depth are determined by the nature of the volunteer or contractor's duties and level of inmate contact. All are informed of ADOC's zero-tolerance policy and trained on how to report sexual abuse or harassment. Interviews with contractors and the volunteer confirmed this.

Supporting documentation included a four-page handout titled "PREA Training for Volunteers and Contractors", which outlines:

1. PREA overview and objectives
2. ADOC reporting procedures
3. Definitions of Sexual Assault, Sexual Harassment, and Custodial Misconduct
4. Acknowledgment form retained in the IPCM's training files
5. Medical personnel, as contracted staff, receive specialized training titled "Prison Rape Elimination Act and What Healthcare Providers Need to Know," in addition to ADOC-specific PREA training.

A tri-fold pamphlet is also distributed, summarizing PREA elements and emphasizing key definitions and reporting expectations for volunteers and contractors.

### Provision (c):

The facility maintains documentation that confirms understanding of PREA training by both volunteers and contractors. As noted under Provision (b), signed

	<p>acknowledgment forms are kept in the IPCM training files.</p> <p>The Auditor reviewed seven PREA training sign-in sheets dated within the past 12 months, each containing participant signatures confirming receipt and understanding of the training.</p> <p><b>CONCLUSION</b></p> <p>After a comprehensive review of policies, training documentation, and through interviews with relevant parties, the Auditor concludes that the agency/facility fully meets the requirements of Standard §115.32. All volunteers and contractors who have contact with inmates receive appropriate, role-specific PREA training and demonstrate understanding of their responsibilities under the Prison Rape Elimination Act.</p>
--	---

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment</li> <li>3. Inmate PREA Training Curriculum</li> <li>4. ADOC Male Inmate Handbook (Dated 09/25/2017)</li> <li>5. Inmate Orientation Material on Sexual Assault</li> <li>6. Inmate PREA Receipt and Acknowledgment Forms (ADOC Form 454-A)</li> <li>7. "What You Should Know About Sexual Abuse and Assault" Pamphlet</li> <li>8. PREA Informational Posters located throughout the facility</li> <li>9. Miscellaneous PREA Training Materials</li> <li>10. Posters and Visual Aids (available in Spanish and low-vision formats)</li> <li>11. Outside Confidential Support Services Agency Postings</li> <li>12. Inmate PREA Orientation Sign-in Sheets (January 2024 - April 2024)</li> <li>13. Inmate PREA 30-Day Education Attendance Sheets</li> <li>14. Inmate PREA Education Tracking Spreadsheet (with education dates)</li> </ol> <p>OBSERVATIONS:</p> <p>During the on-site tour, the Auditor observed PREA-related informational materials prominently posted in inmate housing areas, common spaces, and adjacent to inmate telephones. These materials included:</p> <ol style="list-style-type: none"> <li>1. Clear, accessible information on sexual abuse and sexual harassment</li> <li>2. Reporting instructions for both internal (*ADOC PREA Unit - Dial 6611) and</li> </ol>

external (One Place Family Justice Center) resources

3. Posters emphasizing the agency's zero-tolerance policy
4. Materials available in English, Spanish, and accessible formats (Braille, closed-captioned and ASL videos)
5. Visual materials and postings from outside confidential support service providers
6. The facility also provides the "Discussing PREA" video in both English and Spanish, with closed captioning and ASL interpretation
7. These materials were strategically placed and easily accessible, reinforcing the agency's commitment to PREA compliance and inmate education.

#### INTERVIEWS:

##### Intake Staff:

1. Confirmed inmates receive PREA information upon arrival as part of the intake process
2. Stated that all inmates receive comprehensive education within 15 days via video or in-person presentations
3. Explained that inmates are educated on their right to be free from sexual abuse and retaliation, and are informed of various reporting options
4. Noted education is adapted for inmates with special needs, including LEP, visually/hearing impaired, and cognitively limited individuals
5. Confirmed that all inmates receive the Inmate Handbook and sign acknowledgment forms

##### Random Inmates:

1. Universally confirmed they received PREA education and written materials
2. Recalled receiving the Inmate Handbook and watching the PREA video upon arrival
3. Demonstrated understanding of how to report sexual abuse or harassment

#### PROVISIONS:

##### Provision (a):

All inmates receive information at intake regarding ADOC's zero-tolerance policy, definitions of sexual abuse and harassment, and how to report incidents. This preliminary information ensures immediate awareness until comprehensive education is delivered. Intake staff and documentation confirmed that all 869 inmates admitted over the past 12 months received this information at intake.

##### Provision (b):

The PAQ indicates 100% of inmates admitted for over 30 days received comprehensive education within the required timeframe. This education includes

	<p>additional discussion, videos, and Q&amp;A sessions to reinforce understanding.</p> <p>ADOC AR #454 (p.13, B, 1, b) mandates comprehensive education within 30 days of arrival. Facility documentation, attendance logs, and inmate files verified compliance with this provision, demonstrating that 100% of inmates received the required education.</p> <p>Provision (c):</p> <p>Signed acknowledgments and training logs were reviewed and confirmed for 51 inmate records. Each record included a dated PREA acknowledgment form (ADOC Form 454-A), confirming inmates received the handbook, orientation materials, and completed the video training.</p> <p>Provision (d):</p> <p>PREA education is available in multiple formats. Materials and videos are presented in English and Spanish, with accommodations for inmates who are LEP, visually or hearing impaired, or have other special needs. The facility utilizes accessible posters, visual aids, and video content with ASL interpretation and closed captioning. ADOC AR #454 strictly prohibits relying on other inmates for translation or accessibility assistance.</p> <p>Provision (e):</p> <p>All inmates sign an acknowledgment (Form 454-A), which is stored in the inmate file. The ADOC also maintains a PREA education database that allows verification of inmate education history by name or facility, ensuring accountability.</p> <p>Provision (f):</p> <p>The agency employs multiple education strategies including posters, handbooks, videos, and orientation sessions. Posters throughout the facility vary in design to maintain visibility and impact. All areas visited during the on-site tour included clearly posted PREA materials, reflecting the facility's commitment to ongoing inmate education.</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of the PAQ, supporting documentation, inmate records, staff and inmate interviews, and on-site observations, the Auditor concludes that the facility meets all requirements of the PREA standard concerning inmate education. Inmates are informed in a timely, accessible, and verifiable manner of their rights under PREA and the processes available for reporting sexual abuse and harassment.</p>
--	--



**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ)
2. ADOC Administrative Regulation #454
3. Specialized Training Curriculum for Investigators
4. Training Certificates for Investigators
5. Training Materials from The Moss Group, Alabama Department of Corrections (ADOC), Training Force USA, and the National Institute of Justice (NIJ)

INTERVIEWS:

Investigative Staff

During interviews, investigative staff confirmed they had completed specialized training in conducting sexual abuse investigations within confinement settings. Staff demonstrated knowledge of essential investigative procedures, including the use of Miranda and Garrity warnings, victim-centered interview techniques, and evidence collection methods specific to correctional environments.

PROVISIONS

Provision (a):

The PAQ and supporting documentation confirm that ADOC policy mandates all investigators receive specialized training in the investigation of sexual abuse in confinement settings.

Interviews with investigative staff corroborated this requirement and demonstrated their understanding of the training content.

The Auditor reviewed training certificates for forty investigators affiliated with the facility, verifying successful completion of courses delivered by The Moss Group, ADOC, and Training Force USA.

Training topics included:

1. Trauma-Informed Sexual Assault Investigations
2. Human Trafficking Awareness
3. Prison Rape and Sexual Assault Investigation
4. Specialized PREA Investigation Techniques

Additionally, all 52 Institutional PREA Compliance Managers (IPCMs) statewide have completed the same specialized training.

The Auditor also reviewed relevant portions of the National Institute of Justice's online

course Sexual Abuse and the Initial Responder, which includes modules on:

1. PREA Investigations
2. Collaborating with Victims
3. Interviewing Techniques
4. Institutional Culture and Investigations

Provision (b):

The agency confirms that investigator training includes instruction on the following topics, as supported by documentation and staff interviews:

1. Techniques for interviewing sexual abuse victims
2. Proper application of Miranda and Garrity warnings
3. Evidence collection protocols in confinement settings
4. Criteria for determining whether allegations warrant administrative or criminal action

The Auditor reviewed NIJ/NIC training content and verified completion through training records and direct confirmation from investigative staff.

Provision (c):

The agency maintains detailed documentation of training completion for each investigator. This was verified by the Auditor through:

1. Review of signed training certificates for twenty PREA investigators currently employed by the ADOC Law Enforcement Services Division
2. Confirmation of training through both in-person sessions and online modules
3. Per ADOC Administrative Regulation #454, all training must be documented, signed, and maintained in personnel files.

The Auditor confirmed compliance with these documentation practices, ensuring a consistent and verifiable training record for each investigator.

Provision (d):

This provision is not applicable for this audit.

**CONCLUSION:**

Based on a comprehensive review of policy documentation, training materials, personnel records, and investigative staff interviews, the Auditor concludes that the agency/facility is in full compliance with PREA Standard §115.34 – Specialized Training: Investigations. The agency has established and implemented a robust system to ensure that investigators are well-prepared, appropriately trained, and capable of conducting thorough and effective sexual abuse investigations within correctional settings.

115.35	Specialized training: Medical and mental health care
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454</li> <li>3. Training Records of Medical and Mental Health Practitioners</li> <li>4. Specialized Training Curricula</li> </ol> <p>INTERVIEWS CONDUCTED</p> <p>Facility Head:</p> <p>Confirmed that medical and mental health practitioners receive both general and specialized PREA training.</p> <p>Medical Staff:</p> <p>Verified they had received the general PREA training as well as the specialized training designed specifically for medical and mental health professionals.</p> <p>Mental Health Staff:</p> <p>Also confirmed receipt of both general and specialized PREA training.</p> <p>PREA Compliance Manager (PCM):</p> <p>Affirmed that medical and mental health care practitioners receive all employee-mandated training in accordance with §115.31.</p> <p>PROVISIONS</p> <p>Provision (a):</p> <p>The facility reported through the PAQ that the agency has a policy in place requiring specialized training for medical and mental health practitioners who work regularly in the facility. A total of 65 medical and mental health professionals are assigned to the facility, and all have received the required training as outlined in agency policy.</p> <p>Review of the lesson plans and training materials confirmed that the content covers:</p> <ol style="list-style-type: none"> <li>1. Detecting and assessing signs of sexual abuse and harassment</li> <li>2. Preserving physical evidence</li> <li>3. Responding professionally to victims</li> <li>4. Proper reporting procedures</li> <li>5. Addressing the special medical and mental health needs of inmates</li> </ol>

	<p>6. Assessing risk factors for sexual victimization</p> <p>This training requirement is codified in ADOC Administrative Regulation #454, Section V, paragraphs 3a–g. The policy mandates documentation of training completion and comprehension, as evidenced by staff signatures. Auditor review of training records and staff interviews confirmed full compliance with this provision.</p> <p>Provision (b):</p> <p>This provision is Not Applicable. Facility procedures prohibit medical staff from performing forensic examinations on victims of sexual abuse.</p> <p>Provision (c):</p> <p>The PAQ indicated, and documentation confirmed, that the agency retains records showing completion of the required training by all medical and mental health practitioners. Training records reviewed by the Auditor, in conjunction with staff interviews, support that all training requirements have been met. Training documentation is maintained in each employee’s personnel file.</p> <p>Provision (d):</p> <p>The PAQ and interview responses confirmed that medical and mental health care practitioners also receive the general PREA training required of all employees, contractors, and volunteers. The Auditor reviewed sign-in sheets and training materials that document participation in the general training in addition to specialized sessions. The materials and attendance records confirm that all required training has been delivered.</p> <p>CONCLUSION</p> <p>Based on a thorough review of agency policy, training materials, training records, the Pre-Audit Questionnaire, and interviews with relevant staff, the Auditor concludes that the agency/facility meets all requirements of PREA Standard §115.35 – Specialized Training: Medical and Mental Health Car</p>
--	--

115.41	Screening for risk of victimization and abusiveness
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment</li> </ol>

3. ADOC Administrative Regulation #637: Gender Dysphoria
4. ADOC Form 454-C: Classification PREA Risk Factors Checklist
5. ADOC Form 454-K: PREA Risk Assessment
6. Risk Assessment Checklist
7. Inmate Initial Risk Assessment Records
8. Inmate 30-Day Risk Reassessment Records

#### \INTERVIEWS:

##### PREA Director (PD)

During the interview, the PREA Director confirmed that designated staff—including medical, mental health, classification, and the PREA Compliance Manager (PCM)—have authorized access to the intake screening information. The PD emphasized that this information is shared strictly on a need-to-know basis, with access limited to staff members whose responsibilities relate to treatment, security, or institutional management decisions. These decisions may include housing and cell assignments, as well as work, education, or programming placements. The PD also confirmed that the Alabama Department of Corrections (ADOC) does not detain individuals solely for civil immigration purposes.

##### PREA Compliance Manager (PCM)

The PCM explained that the risk screening process serves the primary purpose of enhancing inmate safety within the facility. The PCM noted that the data collected through the screening process is used to assess whether an inmate is at elevated risk of sexual victimization or sexual abusiveness. This information helps staff make informed decisions to safely manage inmate housing placements, thereby reducing opportunities for sexual harm. The PCM affirmed that the screening tools are applied consistently and with the goal of creating safer institutional environments.

##### Risk Screening Staff

Risk screening staff provided detailed insight into the screening process, affirming that initial screenings are completed within the first 24 hours following an inmate's arrival at the facility. The staff explained that these initial screenings account for factors such as prior acts of sexual abuse, previous convictions for violent offenses, and a history of institutional violence or sexual abuse. A follow-up assessment is completed within 30 days of the initial screening.

Staff further reported that reassessments are conducted as needed, including in situations where:

1. An inmate makes a PREA-related allegation,
2. The inmate temporarily departs and returns to the facility, or
3. New information emerges that may impact the inmate's safety status.
4. For transgender inmates, risk assessments are completed within 24 hours of

arrival, reassessed within 30 days, and reviewed at least every six months thereafter.

Screening staff emphasized that inmates are never disciplined for refusing to answer screening questions. If an inmate hesitates or declines to respond, staff may attempt to re-engage or explain the importance of the questions. However, refusal to participate does not result in disciplinary action, and staff proceed without coercion.

#### Random Inmate

Inmates interviewed at random confirmed that they were asked questions regarding their personal safety, fears of sexual harm, and other risk indicators such as sexual orientation, gender identity, history of sexual victimization, and first-time incarceration status. Inmates consistently reported that their initial risk screening was conducted within 24 hours of arrival, with follow-up screenings completed within the following few weeks. Inmates appeared aware of the purpose of these assessments and acknowledged their role in promoting safety within the facility.

#### Transgender Inmates

At the time of the on-site audit, there were no transgender inmates assigned to the facility. As a result, no interviews with transgender inmates were conducted in relation to this standard.

#### PROVISIONS:

##### Provision (a)

The Pre-Audit Questionnaire (PAQ) indicates that the facility has a policy in place requiring the screening of all inmates upon admission to the facility or transfer from another facility for risk of sexual victimization or for the risk of sexually abusing other inmates.

During the on-site audit, facility staff described the intake screening process in detail. Intake staff walked the Auditor through the intake screening procedure and demonstrated how each screening document and assessment tool is utilized. Staff modeled the risk screening process by going through each question and explaining the rationale and process for documentation, which provided the Auditor with a thorough understanding of the intake and classification procedures.

The Auditor reviewed a total of 52 inmate records. All 52 records showed documentation confirming the completion of the initial risk screening assessment within the required 72-hour timeframe following intake. The majority were completed within 24 hours.

The facility's policy requirements are clearly outlined in the following documents:

ADOC Administrative Regulation (AR) 454, Operations & Legal, Inmate Sexual Abuse

and Harassment, dated January 4, 2016, p. 15, section F(1), mandates that all ADOC facilities conduct a PREA risk screening for all new inmates within 72 hours of intake. The screening must assess for potential risk of sexual vulnerability and potential risk of sexual aggression using ADOC Form 454-C – PREA Risk Factors Checklist.

ADOC AR 454, p. 15, section F(2), also requires all inmates transferring from another ADOC facility to be screened within 72 hours of arrival using the same risk assessment process and documentation.

These policies and the implementation practices observed during the audit confirm compliance with Provision (a).

#### Provision (b)

According to the PAQ, facility policy states that inmates are to be screened for risk of sexual victimization or risk of abusing other inmates within 72 hours of arrival.

As supported by the policies cited in Provision (a), all inmates, whether newly admitted or transferred from another ADOC facility, must receive a risk screening assessment within 72 hours of arrival.

The PAQ reported that, over the past 12 months, only 211 out of 869 inmates (24.3%) were screened within the 72-hour window. However, this data was not consistent with the Auditor's findings during the record review. The Auditor randomly reviewed 52 inmate records representing inmates from multiple housing units and a variety of ethnic and racial backgrounds. All 52 (100%) records showed the initial risk screening was completed within the required 72 hours—many within the first 24 hours after arrival.

In addition to the documentation review, intake staff were interviewed and confirmed that all PREA-related questions are consistently asked during initial intake and during any subsequent classification screenings. This includes gathering information required to identify inmates at risk of victimization or abusiveness, ensuring appropriate housing, supervision, and treatment decisions.

These findings confirm the facility's adherence to the 72-hour risk screening requirement outlined in Provision (b).

#### Provision (c):

The ADOC utilizes objective, validated tools for assessing risk: ADOC Forms 454-C and 454-K. These forms guide staff through standardized risk factors, ensuring uniform application across all assessments. Each intake screening is scored using weighted questions that align with the elements specified in the PREA standard. Intake staff were able to explain the process thoroughly, and document review verified consistent use of these tools.

#### Provision (d):

The Auditor verified that the ADOC's screening tools include all factors required by

this provision, including:

1. Mental, physical, or developmental disabilities
2. Age and physical build
3. Prior incarcerations
4. Criminal history (including sex offenses)
5. Sexual orientation and gender identity
6. History of sexual victimization
7. Inmate's self-perception of vulnerability
8. Immigration status (if applicable)

These elements are found in Part 1 of the Classification PREA Risk Factors Checklist (Form 454-C).

Provision (e):

The Auditor confirmed through document review and staff interviews that the ADOC's screening process considers prior acts of sexual abuse, convictions for violent offenses, and a history of institutional violence. These factors are clearly listed in Part 2 of the PREA Risk Factors Checklist.

Provision (f):

ADOC policy requires that all inmates are reassessed within 30 days of their initial intake. The Auditor reviewed 52 inmate records and verified that 100% had documented 30-day reassessments. This contradicts the PAQ's reported compliance rate of 24.3% and demonstrates consistent adherence to the standard in practice.

Provision (g):

Staff interviews confirmed that inmates are reassessed when there is a referral, request, report of sexual abuse, or receipt of additional information related to risk. ADOC AR #454, p. 14, F.5, outlines this requirement clearly. Staff were able to articulate scenarios where such reassessments would occur and provided examples during interviews.

Provision (h):

Per ADOC AR #454, p. 16, F.7, inmates are not subject to any formal or informal disciplinary action for declining to answer screening questions. Screening staff reported they attempt to explain the relevance of each question and may revisit unanswered items at a later time, but ultimately respect the inmate's choice without consequence.

Provision (i):

The facility reported and staff confirmed that screening information is restricted to individuals with a legitimate need to know (e.g., medical, mental health, classification, and PREA staff). Per AR #454, p. 16, F.8, strict controls are in place to



	<p>ensure that this information is not exploited or inappropriately disclosed. The Auditor verified these practices through interviews and document review.</p> <p>Conclusion:</p> <p>Based on a thorough review of documentation, interviews, and observation of intake procedures, the Auditor concludes that the facility meets all requirements of PREA Standard §115.41 – Screening for Risk of Sexual Victimization and Abusiveness. Intake and classification processes are in place, staff are trained, policies are adhered to, and assessments are being completed timely and thoroughly. Reassessments and information protections are properly implemented and enforced.</p>
--	--

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>2. ADOC Administrative Regulation (AR) #454</li> <li>3. ADOC Standard Operating Procedure (SOP) Number 454-5</li> <li>4. ADOC Form 454-C, Classification PREA Risk Factors Checklist</li> <li>5. ADOC Form 454-K, PREA Risk Assessment</li> <li>6. ADOC PREA Director Memo (February 20, 2020), Transgender Reassessment and Housing</li> <li>7. Inmate Records</li> <li>8. Intake Risk Assessment Checklist</li> <li>9. Risk Assessment Checklist</li> <li>10. Housing Designation Spreadsheet</li> </ol> <p>INTERVIEWS:</p> <p>PREA Director (PD):</p> <p>The PREA Director reported that the gender identity of inmates is initially based on their legal sex, typically assigned at birth. However, each inmate is then assessed individually to ensure safety and appropriate classification. For transgender or intersex inmates, their own views regarding safety are given significant weight when determining housing and programming. These decisions are further supported by reassessments at least every six months or following any sexual incident. Inmates are also interviewed to identify enemies or perceived threats to help guide placement decisions.</p>

Staff Responsible for Risk Screening:

Staff indicated that all inmates are evaluated individually using agency assessment procedures. Classification and housing decisions are informed not only by the tools but also by direct conversations with inmates. Staff affirmed that decisions are made to ensure safety and appropriate placement.

Institutional PREA Compliance Manager (IPCM):

The IPCM confirmed that neither the facility nor agency is under any consent decree, legal settlement, or legal judgment requiring a dedicated LGBTI unit. LGBTI inmates are housed in general population unless specific concerns arise, in which case appropriate staff review and address those concerns. Staff confirmed that transgender or intersex inmates' views of their safety are given thoughtful consideration and each assessment contributes to informed housing and programming decisions. Special attention is given to inmates at elevated risk of victimization to ensure they are not housed with inmates considered at risk of being sexually abusive.

Transgender Inmate:

At the time of the on-site audit, there were no transgender or intersex inmates housed at the facility; therefore, no inmate interviews relevant to this standard were conducted.

PROVISIONS:

Provision (a):

The PAQ reported that the facility uses risk screening information to make housing, bed, work, education, and program assignments in a manner that separates inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The IPCM confirmed this practice.

The Auditor reviewed 48 inmate records and confirmed that risk assessment information was consistently used in classification decisions.

Policy Reference: AR #454, p. 16, Section F.9.a, requires that PREA Mental Health Assessments be used during screening to guide individualized, safety-based decisions regarding classification and institutional assignment.

Provision (b):

The PAQ indicated that individualized determinations are made to ensure each inmate's safety.

Policy Reference: AR #454, p. 16, Section F.10.a, confirms that risk screening and mental health assessments are used for classification and to guide work, education, and programming assignments.

Provision (c):

	<p>Housing and programming assignments for transgender or intersex inmates are made on a case-by-case basis, considering potential management or security concerns.</p> <p>Policy Reference: AR #454, p. 17, Section F.10.f, mandates case-by-case evaluations for facility placement, housing, and programming, ensuring inmate health, safety, and consideration of potential management concerns.</p> <p>Provision (d):</p> <p>The PAQ and staff interviews confirmed that placements for transgender and intersex inmates are reassessed at least twice a year or following incidents affecting safety.</p> <p>Policy Reference: AR #454, p. 17, Section F.10.d, requires these reassessments to review threats to inmate safety.</p> <p>Provision (e):</p> <p>Transgender or intersex inmates' views on their own safety are given thoughtful consideration when determining placement.</p> <p>Policy Reference: AR #454, p. 17, Section F.10.e, affirms this practice.</p> <p>Provision (f):</p> <p>Transgender and intersex inmates are allowed to shower separately from other inmates. The Auditor confirmed that housing areas include private single-stall showers. Staff also stated that separate shower times—typically 30 minutes before or after others—would be arranged upon request.</p> <p>Policy Reference: AR #454, p. 17, Section F.10.g.</p> <p>Provision (g):</p> <p>The PAQ and staff interviews confirmed that LGBTI inmates are not placed in dedicated units solely based on their identification or status, unless required by a legal mandate.</p> <p>Policy Reference: AR #454, p. 17, Section F.10.c.</p> <p><b>CONCLUSION</b></p> <p>Based on a comprehensive review of documentation, inmate records, policies, staff interviews, and agency practices, the Auditor has determined that the agency/facility meets all provisions of PREA Standard §115.42 – Use of Screening Information.</p>
--	--

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard

## Auditor Discussion

### DOCUMENTATION

1. Pre-Audit Questionnaire (PAQ) and supporting documentation
2. ADOC Administrative Regulation 454: Inmate Sexual Abuse and Harassment (January 4, 2016)
3. ADOC Administrative Regulation 435: Segregated Housing
4. Housing Designation Spreadsheet
5. Segregation Log/Holding Cell/Crisis Cell documentation
6. Post Allegation Protective Custody Form

### INTERVIEWS

Facility Head or Designee:

The Facility Head confirmed that every placement in segregated housing is documented and reviewed at least every thirty (30) days, regardless of the reason for placement.

Staff Who Supervise Inmates in Segregated Housing:

Segregation unit staff, through both formal interviews and informal discussion, stated they have not observed any victims of sexual abuse or retaliation placed involuntarily in segregation for protective reasons.

Inmates in Segregated Housing:

At the time of the on-site audit, no inmates in segregated housing had been placed there due to sexual abuse allegations or risk of victimization. All segregated inmates were housed there for administrative reasons or due to disciplinary actions.

PREA Compliance Manager (IPCM):

The IPCM confirmed that within the last twelve months, no inmates were placed in involuntary administrative or punitive segregation for reasons related to sexual victimization or as victims of sexual abuse.

### PROVISIONS

Provision (a):

The PAQ states that ADOC policy strictly prohibits placing inmates at high risk for sexual victimization in involuntary segregated housing unless all alternative options have been assessed and ruled out. No such placements have occurred in the past twelve months. This was verified through documentation and interviews with the IPCM and Facility Head.

	<p>Policy reference: ADOC AR 454, p. 23, Section J(1) outlines this requirement.</p> <p>Provision (b):</p> <p>The PAQ and staff interviews confirmed that, should protective custody be deemed necessary, inmates will retain access to programs, privileges, education, and work to the extent possible. No such placements have occurred in the past twelve months.</p> <p>Policy reference: ADOC AR 454, p. 23, Section J(2) supports this practice, stating that any such placement shall be temporary and documented with justification.</p> <p>Provision (c):</p> <p>Agency policy mandates protective custody is used only as a last resort and ensures access to programs and services remains available. The Facility Head confirmed that these procedures are followed. No placements under this provision have occurred in the past year.</p> <p>Provision (d):</p> <p>The PAQ and IPCM confirmed zero instances of inmates being placed in protective custody under this standard during the past twelve months. As a result, no inmate interviews were conducted.</p> <p>Provision (e):</p> <p>There have been no inmates placed in involuntary segregation for protective purposes in the past twelve months.</p> <p>Policy reference: ADOC AR 454, p. 23, Section J(3) states that any such placements require review every thirty (30) days to determine continued need.</p> <p>CONCLUSION:</p> <p>After a thorough review of facility documentation, staff and inmate interviews, and relevant agency policies, the Auditor concludes that the facility meets all provisions of PREA Standard §115.43 – Protective Custody. There were no instances of inmates being placed in involuntary segregation for protective purposes during the audit review period, and agency policy aligns with the standard’s requirements.</p>
--	--

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <p>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</p>

2. ADOC Administrative Regulation (AR) #454, "Inmate Sexual Abuse and Harassment" (dated January 4, 2016)
3. ADOC Male Inmate Handbook (dated September 25, 2017)
4. Inmate legal mail envelopes
5. Memorandum of Understanding (MOU) with Securus Technologies for hotline services
6. "NO MEANS NO" awareness posters

#### OBSERVATIONS:

During the on-site audit, the Auditor confirmed the facility's commitment to promoting awareness and accessibility to reporting mechanisms:

**Visual Messaging:** "NO MEANS NO" posters were prominently displayed throughout the facility in both English and Spanish. These were located in housing units, common areas, intake holding areas, hallways, and the dining hall, reinforcing the facility's zero-tolerance stance on sexual abuse and harassment.

**PREA Drop Boxes:** Clearly labeled "PREA" boxes were visible throughout the facility, offering a secure and private reporting method.

**Telephone Hotline:** The Auditor tested phones in various housing units to verify functionality of the PREA hotline (\*6611). In all instances, the hotline was operational. A recorded message advised callers that the call was anonymous, toll-free, and subject to recording. Inmates can leave a two-minute message, which is forwarded for follow-up.

**Legal Mail System:** Interviews with mailroom staff confirmed that inmates can request pre-addressed envelopes to confidentially contact the Director of the Law Enforcement Services Division (LESD). This allows inmates to report PREA-related concerns securely through the legal mail process.

#### INTERVIEWS:

**Institutional PREA Compliance Manager (IPCM):**

The IPCM affirmed that inmates have multiple ways to report abuse, including to internal staff or external agencies such as the State Board of Pardons and Paroles and the Office of Victim Services. The MOU with Securus Technologies enables inmates to anonymously leave messages with an external agency, which are forwarded directly to the PREA Director via email.

**Random Staff:**

Staff confirmed they would immediately report any inmate allegations of sexual abuse or harassment and ensure proper documentation and follow-up. Staff understood that reports could be made verbally, in writing, anonymously, or through third parties. They also acknowledged multiple internal and external reporting options

available to inmates. Additionally, staff reported being able to confidentially report incidents involving inmates to supervisors, the IPCM, or the PREA Director.

Random and Targeted Inmates:

Inmates consistently reported being aware of several reporting options, including the hotline, PREA Compliance Manager, drop boxes, telling a staff member, or involving a family member.

PROVISIONS:

Provision (a):

The PAQ and interviews confirmed that inmates can report:

1. Sexual abuse and harassment,
2. Retaliation for reporting, and
3. Staff neglect or policy violations contributing to such incidents.

According to AR #454 (p. 21, Section H, 2, a), inmates may report:

1. Verbally or in writing,
2. Anonymously or through third parties,
3. Using PREA drop boxes,
4. By calling the PREA hotline,
5. By filing a grievance,
6. Or by contacting LESD via pre-addressed envelopes.

Provision (b):

The facility offers at least one method for inmates to report externally. The MOU with Securus (effective May 15, 2019) supports 24/7 telephone access to:

- \*6611 PREA Hotline (recorded),
- ADOC Crime Tip Hotline,
- ACAR Hotline (unrecorded, confidential support).

The hotline service allows inmates to report to a public or private entity outside the agency.

Provision (c):

Staff are required to accept and document reports from any source—including anonymous and third-party reports. Staff interviews confirmed this requirement is well understood and consistently applied.

The Inmate Handbook (p. 23) reinforces the agency's commitment to confidentiality and safety: "All reports are investigated and are confidential – the ADOC and its staff

	<p>want to keep you safe!”</p> <p>AR #454 (p. 19, Section H, 1, a &amp; b) requires immediate reporting of any known or suspected abuse, retaliation, or contributing staff misconduct.</p> <p>Provision (d):</p> <p>The PAQ and IPCM interviews confirmed staff may report sexual abuse or harassment privately. This is also outlined in AR #454, Section H, which ensures staff have secure, confidential avenues to report allegations.</p> <p>CONCLUSION:</p> <p>Based on a thorough review of documentation, observations, and interviews, the Auditor concludes that the facility fully meets the requirements of PREA Standard §115.51 – Inmate Reporting. The facility provides multiple, accessible avenues for both inmates and staff to report sexual abuse and harassment, and maintains policies and practices that support timely, confidential, and effective reporting and response</p>
--	--

115.52	Exhaustion of administrative remedies
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. ADOC Administrative Regulation #454 (Inmate Sexual Abuse and Harassment – PREA)</li> <li>3. ADOC Administrative Regulation #406 (Inmate Grievance Policy), dated August 1, 2023</li> <li>4. Inmate Handbook</li> </ol> <p>INTERVIEW:</p> <p>Random Staff Interviews:</p> <p>Staff reported that allegations of sexual abuse and sexual harassment are considered grievable issues under current agency policy.</p> <p>Random Inmate Interviews: Inmates confirmed that they are informed that allegations of sexual abuse and sexual harassment may be addressed through the grievance process.</p> <p>PROVISIONS</p>



Provision (a)

The PAQ confirms that the agency and facility have an administrative procedure in place to address inmate grievances regarding sexual abuse. The facility reported zero grievances filed alleging sexual abuse in the past 12 months. Those grievances that were filed reached a final decision within the 90-day timeframe as required by the standard.

The Auditor reviewed ADOC Administrative Regulation #454 and the Inmate Handbook, both of which clearly articulate the agency's inmate grievance procedures. These documents confirm that a process exists for the handling of sexual abuse-related grievances.

Provision (b)

The agency policy permits inmates to submit grievances regarding allegations of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Additionally, inmates are not required to use any informal grievance process prior to filing a formal grievance.

Relevant policy references include:

ADOC AR406, p. 6, Section F: Encourages informal resolution when possible but does not mandate it.

ADOC AR406, p. 6, Section G: Affirms there is no time limit for submitting grievances related to sexual abuse or sexual harassment.

Provision (c)

The agency's policy allows inmates to submit grievances alleging sexual abuse without submitting grievance to the staff member who is the subject of the complaint. Furthermore, such grievances are not referred to that staff member for resolution.

Relevant policy references include:

ADOC AR406, pp. 5-6, Section E: States inmates are not required to submit grievances through or to the subject of the grievance.

ADOC AR406, p. 8, Section R: States that sexual abuse/harassment allegations are logged and forwarded to the Institutional PREA Compliance Manager (IPCM) for investigation under AR454.

Provision (d)

In the past 12 months, there were no grievances filed that alleged sexual abuse. The policy ensures timely responses to grievances.

Policy reference:

ADOC AR406, pp. 9-10, Section Z.1.d: Requires the Institutional Grievance Officer

	<p>(IGO) to provide a Step 1 response within ten (10) days of receipt.</p> <p>Provision (e)</p> <p>Agency policy permits third-party assistance in filing grievances, including assistance from fellow inmates, staff, family members, attorneys, and outside advocates. If an inmate declines third-party assistance, this decision is documented.</p> <p>Policy reference:</p> <p>ADOC AR406, p. 5, Section D: Permits inmates to receive assistance in preparing a grievance but does not allow third parties to submit grievances on their behalf.</p> <p>Provision (f)</p> <p>The agency has a procedure for filing emergency grievances alleging substantial risk of imminent sexual abuse. An initial response is required within 48 hours, and resolution within 5 calendar days.</p> <p>According to the PAQ, no emergency grievances alleging imminent sexual abuse were filed in the past year.</p> <p>Policy references:</p> <p>ADOC AR406, pp. 10–11, Section AA.1: Describes emergency grievance process, including roles of the IGO, Warden, IPCM, and LESD.</p> <p>ADOC AR406, p. 11, Section AA.4: Requires emergency grievance appeals to be decided within 72 hours.</p> <p>Provision (g)</p> <p>The agency has a written policy prohibiting discipline of inmates for filing grievances alleging sexual abuse unless it is demonstrated that the grievance was made in bad faith. In the past year, no inmates were disciplined for filing such grievances in bad faith.</p> <p>Policy reference:</p> <p>ADOC AR406, p. 7, Section L: Prohibits retaliation and outlines consequences for reprisal by inmates or staff related to the grievance process.</p> <p>CONCLUSION</p> <p>Based on the review of the Pre-Audit Questionnaire, supporting policies, documentation, and staff and inmate interviews, the Auditor has determined that the agency and facility meet all requirements of PREA Standard §115.52 – Exhaustion of Administrative Remedies.</p>
--	--

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

**DOCUMENTATION:**

1. Pre-Audit Questionnaire
2. ADOC Administrative Regulation #454
3. A Memorandum of Understanding (MOU) with the Alabama Coalition Against Rape (ACAR)
4. MOU with One Place Family Justice Center
5. PREA informational posters displayed in English and Spanish throughout the facility
6. The Alabama Advocacy Hotline (\*6611) and informational flyers
7. A current list of ACAR-affiliated Crisis Centers with county-specific contact information

**OBSERVATIONS:**

During the facility tour, the Auditor observed “NO MEANS NO” PREA posters prominently displayed throughout the housing units and common areas. These posters were available in both English and Spanish, ensuring accessibility for limited-English proficient inmates.

**INTERVIEWS:**

**Inmates:**

Inmates interviewed demonstrated awareness of their right to access outside confidential support services. Several inmates correctly identified the \*6611 ADOC PREA hotline, acknowledging that the calls are recorded and may be shared with facility staff for safety and investigative purposes. Additionally, inmates confirmed they had been informed about the availability of outside victim advocacy services.

**Institutional PREA Compliance Manager (IPCM):**

The IPCM confirmed that the facility maintains a current MOU with an outside confidential support service agency. The IPCM also provided documentation detailing the facility’s procedures for connecting inmates with victim advocates from local service centers, including One Place Family Justice Center.

**Representative from One Place Family Justice Center:**

The Auditor conducted a phone interview with a representative from One Place Family Justice Center, located at 530 S. Lawrence Street, Montgomery, AL 36104, phone number (334) 262-7378. The representative affirmed that their agency provides trained victim advocates who are available to accompany inmates before, during, and

	<p>after forensic exams. They also provide follow-up services to ensure that aftercare is arranged and sustained. The representative further clarified that inmates are informed some information shared with advocates may need to be disclosed to facility staff for institutional security, medical treatment, or investigatory purposes.</p> <p>PROVISIONS:</p> <p>Provision (a):</p> <p>The PAQ and facility documentation confirmed that inmates are provided access to outside victim advocates for emotional support services related to sexual abuse. This was verified through the interview with the IPCM and supported by documentation, including an MOU with the Alabama Coalition Against Rape (ACAR) and the ACAR Crisis Center contact listing.</p> <p>Provision (b):</p> <p>During the on-site tour, the Auditor tested multiple inmate payphones and verified that the PREA hotline (*6611) was operational. Facility policy requires staff at the intermediate level or above to test these phones once per shift. The One Place Family Justice Center confirmed that victim advocates are available for in-person and follow-up support and are responsible for notifying victims of any limitations on confidentiality.</p> <p>Provision (c):</p> <p>The Auditor reviewed the MOU between the ADOC and ACAR, which outlines ACAR's role in providing confidential emotional support services to inmates. The MOU specifies that ACAR must maintain or enter into agreements with community-based service providers to ensure support is accessible to inmates at all facilities. The ACAR support hotline, 1-800-639-4357, is not recorded or monitored, in accordance with confidentiality requirements.</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of the PAQ, supporting documentation, facility observations, and interviews with staff, inmates, and external partners, the Auditor concludes that the agency/facility meets all requirements of PREA Standard §115.53. Inmates are appropriately informed of, and provided access to, outside confidential emotional support services in connection with sexual abuse incidents.</p>
--	---

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

#### DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ)
2. Alabama Department of Corrections (ADOC) Website Links:
3. ADOC PREA Webpage <http://www.doc.state.al.us/PREA>.
4. ADOC Administrative Regulation #454
5. PREA Reporting Forms for Law Enforcement Sensitive Disclosures (LESF)
6. Website Publication Displaying DOC PREA Email Address

#### INTERVIEWS:

##### Inmates:

During the inmate interview process, individuals housed in the facility were able to articulate their understanding of third-party reporting options. Inmates expressed an awareness that reports of sexual abuse or sexual harassment could be made by individuals outside the facility on their behalf, and indicated they would use or accept such assistance if necessary.

#### PROVISIONS:

##### Provision (a):

The Alabama Department of Corrections (ADOC) has established accessible third-party reporting mechanisms in accordance with PREA standards. This process is made available to the public through the agency's official website.

On the ADOC website, individuals may access the PREA reporting page via the PREA link, located under the "About ADOC" tab.

This page includes the name of the PREA Director and provides two primary third-party reporting options:

1. Request an Investigation - A dedicated link that initiates a form submission for third-party allegations.
2. Email Reporting Option - A clearly displayed email link (DOC.PREA@doc.alabama.gov) allowing third parties to submit reports electronically.

These publicly available avenues ensure that family members, friends, attorneys, and advocates can report allegations of sexual abuse or sexual harassment on behalf of incarcerated individuals.

#### CONCLUSION:

Based on a comprehensive review of the Pre-Audit Questionnaire, supporting documentation, institutional website content, and interviews with inmates, the Auditor has determined that the Alabama Department of Corrections fully meets the

	requirements of PREA Standard §115.54 – Third-Party Reporting. The agency provides multiple, accessible avenues for third parties to report allegations, and facility staff and inmates demonstrate awareness of these mechanisms
--	---

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. ADOC Administrative Regulation #454</li> <li>3. ADOC Administrative Regulation #302</li> </ol> <p>INTERVIEWS</p> <p>Random Staff</p> <p>During the interview process, staff acknowledged their responsibility to immediately report any allegation of sexual abuse in a manner compliant with agency policy. All staff members confirmed that information related to sexual abuse reports must remain confidential. They are only authorized to share this information with staff who need to know, such as their supervisor or medical personnel. Disclosure to others is prohibited unless necessary for treatment, investigation, security, or management purposes. All interviewed staff (100%) confirmed that all PREA-related allegations and reports are forwarded to the IPCM, who subsequently notifies the investigative staff.</p> <p>Medical and Mental Health Practitioners</p> <p>Medical and mental health professionals confirmed their understanding of the policy and their reporting obligations under it. They articulated their duty to immediately report any allegation of sexual abuse. They also affirmed their responsibility to inform the inmate (victim) about the limitations of confidentiality before providing any services due to mandatory reporting requirements.</p> <p>Facility Head or Designee</p> <p>The Facility Head confirmed during the interview process their awareness of the legal requirement to report abuse allegations to the appropriate agencies, in addition to the PCM and agency investigators. The Facility Head also confirmed that all staff must immediately report any knowledge, suspicion, or information regarding sexual abuse or sexual harassment, whether or not the incident is part of the agency. The same directive applies to cases involving retaliation or staff neglect related to sexual abuse or sexual harassment.</p>

PREA Director (PD)

The PD confirmed during the interview process that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are reported to the facility's designated investigator.

PROVISIONS

Provision (a)

The facility reported on the PAQ that all staff are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, regardless of whether it is part of the agency. The same directive applies to retaliation or staff neglect as it relates to sexual abuse or sexual harassment. The Facility Head confirmed this during the interview process.

The policies addressing this provision include:

ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment (January 4, 2016), p. 19, Section H, 1, a, specifies that ADOC employees/staff receiving information about sexual abuse, sexual harassment, custodial sexual misconduct, retaliation, or staff neglect must immediately report the incident through their chain of command.

AR #454, p. 19, Section H, 1, b, mandates that any knowledge, suspicion, or information related to sexual abuse, sexual harassment, and custodial sexual misconduct be reported.

The ADOC provides all first responders with a pocket-sized spiral booklet, Prison Rape Elimination Act (PREA): A Trauma-Informed Guide for First Responders, which serves as a quick reference for all aspects of the PREA process, including staff responsibilities to preserve evidence and the process for disseminating information.

Provision (b)

The facility reported on the PAQ that staff must refrain from revealing any information related to a sexual abuse report to anyone, apart from reporting to designated supervisors or officials. Any disclosure is only permitted to the extent necessary for treatment, investigation, or other security or management purposes. This was confirmed by random staff during the interview process.

The policy addressing this provision is ADOC Administrative Regulation (AR) #454, p. 19, Section H, 1, c, which specifies that employees or staff shall not disclose information related to a PREA incident, except when necessary for investigation, management, or treatment decisions. Initial interviews with potential sexual abuse victims should only include information required to protect the victim from immediate harm until an investigator arrives for a more detailed interview.

The Auditor reviewed the inmate's Informed Consent for Medical Services document, which releases and permits the medical or mental health care provider to share pertinent information with those who need to know.

Provision (c)

The facility reported on the PAQ that medical and mental health practitioners are required to inform inmates of the practitioner's duty to report and the limitations of confidentiality at the initiation of services. This was verified by medical and mental health practitioners during the interview process.

The policy addressing this provision is ADOC Administrative Regulation (AR) #454, p. 20, Section H, 1, f, which states that medical and mental health practitioners must inform all inmates, prior to initiating services, of the limits of confidentiality and their obligation to report information about sexual victimization to the facility IPCM.

The ADOC provides all first responders with the Prison Rape Elimination Act (PREA): A Trauma-Informed Guide for First Responders booklet, which outlines the responsibilities of medical staff to preserve evidence and manage the dissemination of information.

Provision (d)

The facility reported on the PAQ that if the alleged victim is under 18 or considered a vulnerable adult under a state or local statute, the agency will report the allegation to the designated state or local services agency as required by mandatory reporting laws. This was verified by the Facility Head during the interview process.

The policy addressing this provision is ADOC Administrative Regulation (AR) #454, p. 20, Section H, 1, g, which mandates that any allegation of sexual abuse or sexual harassment involving a youthful inmate or a vulnerable adult inmate must additionally be reported to the Alabama Department of Human Resources under state statute.

Provision (e)

The facility reported on the PAQ that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are forwarded to the facility's designated investigator. This was verified by the PREA Coordinator during the interview process.

The policy addressing this provision is ADOC Administrative Regulation (AR) #454, p. 19, Section H, 1, b, which specifies that any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, or custodial sexual misconduct must be reported to the IPCM, PREA Director, and I&I investigator immediately, in accordance with AR302, Incident Reporting.

CONCLUSION

Based upon the review and analysis of all available evidence, the Auditor has determined that the agency/facility meets every provision of the standard regarding staff and agency reporting duties.



115.62	Agency protection duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and Supporting Documentation</li> <li>2. ADOC Administrative Regulation #454</li> <li>3. Transfer of Inmate Due to Sexual Safety</li> <li>4. Housing Placement (Housing Designation Log)</li> <li>5. Coordinated Response Plan</li> </ol> <p>INTERVIEWS</p> <p>Facility Head or Designee</p> <p>During the interview, the Facility Head confirmed that immediate action would be taken to protect any inmate identified as being at risk of sexual abuse. Depending on the situation and necessary precautions, the victim may either be relocated to a different housing area or transferred to another facility. If the perpetrator is known, they will be placed in segregated housing to separate them from the victim.</p> <p>Random Staff</p> <p>Interviews with randomly selected staff consistently confirmed that they are trained to respond swiftly when an allegation of sexual abuse is received. Staff stated that their first priority would be to immediately separate the victim from the alleged perpetrator, ensure the victim's safety and well-being, inform their supervisor without delay, and preserve any potential evidence. The staff emphasized the importance of ensuring inmate protection above all.</p> <p>PROVISIONS</p> <p>Provision (a)</p> <p>The facility's response to the Pre-Audit Questionnaire (PAQ) indicated that when the agency or facility becomes aware that an inmate faces a substantial risk of imminent sexual abuse, immediate protective actions are taken. Over the past twelve months, there have been 64 reported incidents where an inmate was found to be at substantial risk of imminent sexual abuse. Inmates are always moved to another dorm or facility immediately once reporting a sexual abuse and/or harassment incident. This movement generally takes 2 or 3 hours. This was corroborated through interviews with the Facility Head and informal discussions with staff.</p> <p>Policies Addressing this Provision:</p>

	<p>ADOC Administrative Regulation (AR) #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 23, Section J, 1, states that inmates at high risk for sexual victimization, or those who report such incidents, will not be placed in involuntary administrative or punitive segregation unless an assessment determines that no other alternatives are available.</p> <p>ADOC Administrative Regulation (AR) #454, p. 10, Section K, 3, designates the Institutional PREA Compliance Manager (IPCM) as responsible for recommending inmate placement and/or transfers following reports of sexual abuse or harassment. The IPCM is required to take immediate action if an inmate is believed to be at substantial risk of imminent sexual abuse, with final approval from the Warden or their designee.</p> <p>CONCLUSION</p> <p>After conducting a thorough review of the relevant documentation, conducting staff interviews, and evaluating agency policies, the Auditor concludes that the facility meets the requirements of this standard.</p>
--	--

115.63	Reporting to other confinement facilities
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment, effective January 4, 2016</li> <li>3. ADOC Form 454-F – Reporting to Other Confinement Facilities</li> </ol> <p>INTERVIEWS</p> <p>Agency Head Designee:</p> <p>The Agency Head Designee confirmed through the interview process that all notifications received regarding PREA-related incidents—whether allegations of sexual abuse, sexual harassment, or staff sexual misconduct—are investigated following the established procedures outlined by the Georgia Department of Corrections (GDC) guidelines.</p> <p>Facility Head:</p> <p>The Facility Head confirmed that upon receiving an allegation of sexual abuse or sexual harassment from another agency, the allegation is promptly assigned for investigation. If an inmate reports that they experienced sexual abuse or harassment</p>

at another facility, the facility where the abuse is alleged to have occurred is notified as soon as possible, and always within the 72-hour timeframe, in accordance with policy.

#### PROVISIONS

##### Provision (a):

The PAQ indicates that when the facility receives an allegation that an inmate was sexually abused at another facility, the head of the receiving facility must notify the head of the facility (or appropriate office) where the incident is alleged to have occurred. This requirement is outlined in ADOC AR #454, Section H.1.d, which mandates that the Warden notify the head of the other facility within 72 hours of receiving the allegation. There were zero such allegations reported in the past 12 months.

##### Provision (b):

As reported in the PAQ and confirmed by the Facility Head, agency policy requires the head of the facility to provide notification to the other facility as soon as possible, but no later than 72 hours after receiving the allegation. Again, there were no such occurrences in the past 12 months.

The PREA Compliance Manager provided a copy of ADOC Form 454-F for the Auditor's review.

##### Provision (c):

The facility affirmed via the PAQ that notifications are documented using ADOC Form 454-F to ensure compliance with the 72-hour requirement. The Facility Head verified that there were no notifications required in the last 12 months.

The applicable policy remains ADOC AR #454, Section H.1.d, requiring documentation of such notifications.

##### Provision (d):

The facility confirmed in the PAQ that any allegations received from other facilities or agencies are investigated in accordance with PREA standards.

There were no such allegations received in the past 12 months. This was verified during the Facility Head interview.

#### CONCLUSION

Based on the review of the Pre-Audit Questionnaire, applicable policy and documentation, and staff interviews, the Auditor concludes that the agency/facility meets all provisions of PREA Standard §115.63 – Reporting to Other Confinement Facilities.

The agency has appropriate policy in place, ensures timely notification within 72 hours, uses the proper documentation form, and adheres to investigative requirements as stipulated by PREA.

115.64	Staff first responder duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire</li> <li>2. ADOC Administrative Regulation #454</li> <li>3. PREA First Responder Duty Card</li> <li>4. PREA Pocket Guide for First Responders</li> </ol> <p>INTERVIEWS</p> <p>Security Staff - First Responders</p> <p>Security staff interviewed consistently acknowledged receiving training on PREA first responder duties through annual in-service training, on-the-job training, and recurring staff meetings. These staff members were able to articulate the required steps to be taken when responding to a sexual abuse allegation.</p> <p>Non-Security Staff - First Responders</p> <p>Non-security staff also demonstrated an understanding of their responsibilities in the event of a PREA incident. They reported that they would immediately notify security staff, ensure the victim and alleged abuser were separated, advise both parties not to take any actions that could destroy evidence, and secure the area until security personnel arrived. They emphasized the importance of confidentiality and articulated a trauma-informed approach to response.</p> <p>All Staff</p> <p>Across all interviews, staff were consistently able to describe, step-by-step, how to respond to an incident of sexual abuse. Staff demonstrated knowledge of the importance of preserving physical evidence, seeking medical care as necessary, and immediately reporting all allegations. Their responses reflected thorough and consistent training aligned with agency policies.</p> <p>Inmates Who Reported Sexual Abuse</p> <p>Inmates who had reported sexual abuse shared that:</p> <ol style="list-style-type: none"> <li>1. Staff responded promptly when the incident was reported.</li> <li>2. They were immediately referred for forensic examinations.</li> <li>3. A victim advocate was offered and accompanied them during the exam, helping them understand the process.</li> <li>4. They were not charged for medical treatment.</li> </ol>

5. 100% reported they were not asked to submit to a polygraph.
6. Each was notified in writing of the investigation outcome.

## PROVISIONS

### Provision (a)

The Pre-Audit Questionnaire (PAQ) confirmed that the agency has a formal first responder policy for handling allegations of sexual abuse, in accordance with ADOC Administrative Regulation (AR) #454. Interviews with both security and non-security staff confirmed awareness and understanding of this policy.

All interviewed staff possessed a laminated First Responder Duty Card, which outlines required steps for responding to a PREA incident. This card reflects agency policy and supports staff in fulfilling their responsibilities during such events.

In addition, the Auditor received a spiral-bound pocket guide titled: "Prison Rape Elimination Act (PREA) – A Trauma-Informed Guide for First Responders."

This resource, issued to all staff, includes sections on:

1. Introduction to PREA
2. Definitions
3. PREA Components
4. Prevention
5. Detection
6. Response
7. Summary and Resources

This comprehensive guide reinforces agency expectations and staff responsibilities during a sexual abuse incident response.

The PAQ and PREA tracking data showed:

1. 68 allegations of sexual abuse:
2. 67 involved inmate-on-inmate abuse; all were investigated criminally.
3. 9 unfounded, 37 unsubstantiated, 21 ongoing.
4. No prosecutions occurred in closed cases.
5. All victims were offered medical and mental health care.
6. Retaliation monitoring was conducted per policy.
7. Written notifications of investigation outcomes were provided in each closed case.
8. Sexual Abuse Incident Reviews were completed within 30 days for all substantiated and unsubstantiated cases.
9. 1 allegation of staff-on-inmate sexual abuse:
10. Criminal investigation ongoing at the time of audit.
11. 7 allegations of sexual harassment:

12. 5 inmate-on-inmate, investigated administratively: 4 unsubstantiated, 1 ongoing.
13. 2 staff-on-inmate, investigated criminally: 1 unsubstantiated, 1 ongoing.
14. Inmates received written notice of outcomes in all resolved cases.

In 65 of the 68 cases the first responder was a security staff member, documentation confirmed that staff followed policy by:

1. Separating the victim and abuser
2. Preserving the crime scene
3. Instructing the alleged victim not to engage in any activities that could destroy physical evidence
4. Ensuring the alleged abuser did not take actions that could destroy evidence

These actions are in full alignment with ADOC AR #454, Section G, 1, a-g, which outlines the first responder protocol.

Provision (b)

In three cases where the initial responder was a non-security staff member, documentation and interviews confirmed that each staff member:

Requested the alleged victim refrain from taking any actions that could destroy evidence

Immediately notified security personnel

Training materials reviewed by the Auditor confirmed that all staff, including contractors and volunteers, are trained as potential first responders. This training emphasizes:

1. Scene isolation
2. Victim and abuser separation
3. Removal of uninvolved individuals
4. Communication of initial observations to investigators or shift command

#### CONCLUSION

Based on review of the Pre-Audit Questionnaire, ADOC policies, first responder guides, training materials, interviews, and incident documentation, the Auditor concludes the facility meets all elements of the standard related to staff first responder duties. Staff across all roles demonstrated a clear understanding of their responsibilities and followed agency policy and PREA guidelines in response to incidents.

	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"><li>1. Pre-Audit Questionnaire (PAQ)</li><li>2. ADOC Administrative Regulation #454</li><li>3. PREA First Responder Card</li><li>4. PREA Pocket Guide for First Responders</li><li>5. Coordinated Response Standard Operating Procedure (SOP)</li></ol> <p>INTERVIEWS</p> <p>Facility Head</p> <p>During the interview, the Facility Head confirmed that the facility has developed and implemented a Coordinated Response Plan that clearly outlines the roles and responsibilities of all personnel involved in responding to incidents of sexual abuse. This includes staff first responders, medical and mental health personnel, investigators, and facility leadership.</p> <p>The Facility Head also noted that training on the Coordinated Response Plan is conducted regularly through annual in-service sessions, monthly staff meetings, and on-the-job training. Staff are equipped with reference materials such as the PREA First Responder Card and the PREA Pocket Guide to ensure they understand and are prepared to carry out their responsibilities.</p> <p>PROVISIONS</p> <p>Provision (a)</p> <p>As reported in the PAQ and confirmed through interviews and documentation review, the facility has established a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to sexual abuse incidents.</p> <p>The Auditor reviewed a spiral-bound reference manual titled “Prison Rape Elimination Act (PREA) – A Trauma-Informed Guide for First Responders,” which is distributed to all staff. This guide provides comprehensive, easy-to-understand information across several sections, including:</p> <ol style="list-style-type: none"><li>1. Introduction to PREA</li><li>2. Definitions</li><li>3. PREA Components</li><li>4. Prevention</li></ol>

	<ol style="list-style-type: none"> <li>5. Detection</li> <li>6. Response</li> <li>7. Summary and Resources</li> </ol> <p>Each section clearly delineates staff responsibilities and expectations, equipping personnel with the knowledge and tools necessary to respond effectively and appropriately to PREA-related incidents.</p> <p>Policies and Procedures Supporting This Provision:</p> <p>ADOC Administrative Regulation (AR) #454, dated January 4, 2016</p> <ol style="list-style-type: none"> <li>1. Section G, 1 (p.17) – Responsibilities of the First Responder</li> <li>2. Section G, 2 (p.18) – Responsibilities of the Shift Commander</li> <li>3. Section G, 3 (p.18) – Responsibilities of Medical and Mental Health Staff</li> <li>4. Section H, 1 (p.19) – Responsibilities of Employees and Staff When Reporting Allegations</li> <li>5. Section H, 2 (p.21) – Inmate Reporting Procedures</li> <li>6. Section I, 1 (p.22) – Roles of the IPCM and Investigators in Inmate-on-Inmate and Staff-on-Inmate Abuse</li> <li>7. Section I, 2 (p.22) – Responsibilities in Investigating Inmate-on-Inmate Sexual Harassment</li> </ol> <p>These policies collectively establish a comprehensive, facility-wide response framework that ensures coordination among all relevant staff and departments.</p> <p>CONCLUSION</p> <p>Based on a thorough review of all supporting documentation and the Facility Head interview, the Auditor has determined that the agency/facility meets all provisions of PREA Standard §115.65 – Coordinated Response. This ensures staff are adequately prepared to respond to incidents of sexual abuse in a coordinated and trauma-informed manner.</p>
--	--

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION REVIEWED:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> </ol>



2. ADOC Administrative Regulation #454
3. ADOC Memorandum: Collective Bargaining and PREA Standard 115.66, dated March 19, 2019

**INTERVIEW:**

Agency Head or Designee

During the interview, the Personnel Director confirmed that correctional officers and other staff employed by the Alabama Department of Corrections (ADOC) are not represented by a labor union. Furthermore, the ADOC does not engage in collective bargaining with correctional or facility staff. As a result, there are no union agreements in place that would impede the agency's ability to take immediate and appropriate action to protect inmates from contact with staff alleged to have committed sexual abuse.

**PROVISIONS:**

Provision (a):

The PAQ indicated that the State of Alabama does not participate in collective bargaining. This information was confirmed during the interview with the Agency Head's designee.

Relevant policy is documented in the ADOC Memorandum: Collective Bargaining and PREA Standard 115.66, dated March 19, 2019. This memorandum, issued by the Personnel Director, affirms that ADOC correctional staff are not represented by a labor union and that the agency does not engage in collective bargaining with its employees.

As per ADOC policy and practice, facility leadership retains full authority to take immediate action when necessary to separate any employee alleged to have engaged in sexual abuse. This may include reassignment, modification of duties, or restriction of facility access while an investigation is ongoing.

The facility also reported that during the audit period, there were no PREA-related incidents that required the removal of staff from inmate contact pending the outcome of an investigation.

Provision (b):

This provision is not applicable. The Auditor is not required to assess this provision.

**CONCLUSION:**

Based on a comprehensive review of documentation and interview responses, the Auditor concludes that the agency/facility meets the requirements of Standard §115.66. The Alabama Department of Corrections retains full authority to protect

	inmates from contact with alleged abusers without restriction from collective bargaining agreements.
--	--

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation (AR) #454</li> <li>3. ADOC Form 454-D – Sexual Abuse/Harassment Retaliation Monitoring</li> </ol> <p>INTERVIEWS</p> <p>Agency Head or Designee</p> <p>The Personnel Director confirmed that retaliation monitoring begins on the date an allegation is received and continues for a minimum of 90 days, unless the allegation is determined to be unfounded. Monitoring may be discontinued in such cases. Protection is extended to any individual—staff or inmate—who expresses fear of retaliation related to a PREA allegation or investigation.</p> <p>Facility Head or Designee</p> <p>The Facility Head reported the implementation of multiple protective measures to guard against retaliation. These include monitoring changes in housing assignments, work details, and disciplinary reports for inmates, as well as tracking performance evaluations and reassignments for staff. Staff responsible for retaliation monitoring confirmed that these measures are actively practiced.</p> <p>Retaliation Monitor</p> <p>The Retaliation Monitor emphasized that retaliation is treated with the utmost seriousness and addressed proactively for both staff and inmates. Staff and inmates are routinely informed of their right to report PREA-related concerns without fear of retaliation. Although monitoring primarily focuses on victims, anyone who voices concern about potential retaliation is also monitored. Monitoring is conducted through monthly status checks for at least 90 days and documented using ADOC Form 454-D. The facility reported zero instances of retaliation in the past 12 months.</p> <p>OBSERVATIONS</p>

## Inmates in Segregated Housing for Risk of Sexual Abuse

At the time of the on-site audit, there were no inmates in segregated housing as a result of reporting sexual abuse or due to assessed risk of sexual victimization.

## Inmates Who Reported Sexual Abuse

Interviews with inmates who had reported sexual abuse revealed that:

1. Staff responded promptly to reports
2. Forensic medical exams were offered immediately
3. Victim advocates were made available and were present during exams
4. No medical expenses were charged to inmates
5. Inmates were not asked to submit to polygraph testing
6. Inmates received written notification of investigative outcomes

## PROVISIONS

### Provision (a)

The PAQ confirmed that the agency maintains a formal policy to protect all individuals (staff and inmates) who report or assist in the investigation of sexual abuse or harassment from retaliation. This policy mandates a minimum 90-day monitoring period, extendable as needed. The Institutional PREA Compliance Manager (IPCM) is the designated monitor for retaliation concerns.

#### Policy Reference:

ADOC AR #454, p. 23, Section K.1 – Prohibits retaliation in any form. Section K.2 – Assigns responsibility to the Warden and IPCM for ensuring protection

### Provision (b)

The facility employs a range of protective strategies, including housing changes, work reassignments, separation of the alleged abuser, and emotional support services. These measures were confirmed during the Facility Head interview.

#### Policy Reference:

ADOC AR #454, pp. 23–24, Section K.2 – Details protection measures and assigns oversight responsibility

A review of ADOC Form 454-D revealed no documented cases of retaliation among the 206 reported allegations of sexual abuse in the past 12 months.

### Provision (c)

The agency monitors both inmates and staff for behavioral changes or treatment shifts that may indicate retaliation. Monitoring is required for at least 90 days, with the option to extend. Although the PAQ reported zero of retaliation in the past year,

	<p>the Retaliation Monitor reported zero, indicating a potential discrepancy to be further clarified.</p> <p>Policy Reference:</p> <p>ADOC AR #454, p. 23, Section K.2.a – Mandates ongoing monitoring and 30-day extensions as needed</p> <p>Provision (d)</p> <p>Retaliation monitoring involves documented, periodic status checks, as demonstrated with ADOC Form 454-D. This form includes:</p> <ol style="list-style-type: none"> <li>1. Dates of monitoring checks</li> <li>2. Actions taken</li> <li>3. Staff comments</li> <li>4. Final findings and resolutions</li> <li>5. IPCM signature</li> </ol> <p>Provision (e)</p> <p>Both the PAQ and interviews confirmed that any individual (victim, witness, or staff) who expresses fear of retaliation is eligible for monitoring and protection.</p> <p>Policy Reference:</p> <p>ADOC AR #454, p. 23, Section K.2.d – Instructs staff to take appropriate measures to protect anyone expressing fear of retaliation</p> <p>Provision (f)</p> <p>This provision is not subject to audit.</p> <p>CONCLUSION</p> <p>Based on documentation review, interviews with staff and inmates, and on-site observations, the auditor concludes that the agency/facility meets all requirements of Standard §115.67 – Agency Protection Against Retaliation. The facility has robust policies, procedures, and practices in place to ensure individuals are protected from retaliation in compliance with PREA standards.</p>
--	--

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	DOCUMENTATION::

1. Pre-Audit Questionnaire (PAQ)
2. Alabama Department of Corrections (ADOC) Administrative Regulation #454
3. ADOC Form 454-H: Prison Rape Elimination Act (PREA) Post-Allegation Protective Custody, dated January 4, 2016

#### OBSERVATIONS:

During the facility tour, there were no instances of inmate victims of sexual abuse being placed in restrictive housing for the purpose of involuntary protection or segregation. Housing assignments appeared consistent with the facility's standard classification procedures. No inmates were observed or identified as being housed in segregation because of a sexual abuse allegation.

#### INTERVIEWS:

##### Facility Head or Designee:

The Facility Head confirmed that the facility adheres strictly to ADOC policy, which prohibits the involuntary segregation of sexual abuse victims unless no alternative housing options are available. In such rare cases, inmates are formally reviewed every 30 days to determine the ongoing need for protective separation. Victims placed in segregated housing for protective purposes retain access to programming, education, and work opportunities, consistent with safety and security considerations. The Facility Head also stated that, when appropriate, inmates may be transferred to another facility for their protection.

##### Staff Supervising Inmates in Segregated Housing:

Staff affirmed that segregation is not used as a default housing option for sexual abuse victims. Alternative housing placements are evaluated first, and segregation is employed only when no other options are viable. When used, placement in segregation is temporary and subject to 30-day reviews to assess continued necessity.

##### Inmates in Segregated Housing for Risk of Sexual Abuse:

At the time of the on-site audit, the facility reported no inmates housed in segregation due to risk of sexual victimization or as a post-allegation protective measure. This was corroborated through staff interviews and supported by facility documentation.

#### PROVISIONS:

##### Provision (a):

The PAQ and associated documentation confirm that the facility complies with the policy prohibiting the involuntary placement of sexual abuse victims in segregated housing unless all alternative housing options have been assessed and deemed unsuitable. In those cases, justification must be documented using ADOC Form 454-H.

	<p>In the past twelve months:</p> <ol style="list-style-type: none"> <li>1. Zero inmates were held involuntarily in segregated housing for 1-24 hours pending assessment.</li> <li>2. Zero inmates were held involuntarily in segregated housing for more than 30 days.</li> <li>3. When used, involuntary segregation is subject to review every 30 days. Inmates retain access to programs, education, and privileges to the extent feasible, in alignment with safety and security considerations.</li> </ol> <p>Applicable Policies:</p> <p>ADOC AR #454, Section J.1: Inmates at high risk of sexual victimization or those reporting sexual abuse shall not be placed in involuntary segregation unless all other housing alternatives have been exhausted and properly documented.</p> <p>ADOC AR #454, Section J.2: When segregation is deemed necessary, it must be limited in duration (not to exceed 30 days), and the inmate's access to programs and activities must be preserved whenever possible. Documentation is required via Form 454-H.</p> <p>CONCLUSION:</p> <p>Based on the review of relevant policies, facility documentation, direct observations, and staff and inmate interviews, the Auditor concludes that the facility meets the requirements of PREA Standard §115.68 – Post-Allegation Protective Custody.</p>
--	---

115.71	Criminal and administrative agency investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <p>Pre-Audit Questionnaire (PAQ)  ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment  ADOC Administrative Regulation #300 – Institutional Management  ADOC Standard Operating Procedure Investigations &amp; Intelligence #454 – PREA Sexual Assault Investigations  Alabama Department of Corrections Form #454-C – Investigative Summary Report  Investigative Outcomes and Dispositions  Investigative Review Team Meeting Minutes  Notification to Inmate Forms</p> <p>INTERVIEWS</p>

## Investigative Staff

Interviews with investigative staff confirmed the following:

**Initiation of Investigations:** Investigations begin immediately upon notification of an allegation, regardless of how it is reported (e.g., in-person, telephone, third-party, anonymous).

**Training:** All investigative staff have completed specialized training in sexual abuse investigations. The Auditor verified this through review of training records and certificates.

**Process:** A standardized process is followed—victims are interviewed first, then witnesses, followed by the alleged perpetrator.

**Evidence Collection:** In cases of sexual abuse, evidence is collected by trained investigators or the SAFE/SANE team. Evidence is properly preserved, and investigators have NIC-certified training in evidence collection.

**Prosecutorial Consultation:** Compelled interviews are only conducted following consultation with the prosecutorial authority, particularly in cases that may result in criminal prosecution.

**Credibility Assessments:** The credibility of all parties—victims, witnesses, and alleged abusers—is assessed individually. Polygraphs are not utilized.

**Scope of Investigations:** All investigations assess whether staff actions or inactions contributed to the incident. Findings are fully documented in comprehensive investigative reports.

**Continuation Post-Departure:** Investigations continue regardless of whether the alleged victim or abuser leaves the agency's custody or employment.

## PREA Director

1. Confirmed that investigative records are retained for the duration of the individual's incarceration or employment, plus five years.
2. Noted that inmate-related data is also maintained indefinitely in the SCRIBE system.

## Institutional PREA Compliance Manager (IPCM)

Verified that investigations are not terminated due to the departure of involved individuals.

## Facility Head or Designee

Reported zero substantiated allegations referred for prosecution in the past twelve months.

## Inmates Who Reported Sexual Abuse

Inmate interviews consistently indicated:

1. Timely staff response to allegations
2. Immediate referrals for forensic examinations
3. Access to and support from victim advocates
4. No financial responsibility for medical treatment
5. No polygraph testing
6. Receipt of written notification regarding investigation outcomes

## PROVISIONS

### Provision (a)

The facility indicated in the PAQ that the agency maintains a policy requiring prompt, thorough investigations of all allegations, which was confirmed by staff interviews. Investigative procedures follow ADOC AR #454 and SOP I&I #454. However, the Auditor identified delays in initiating certain investigations—ranging from 30 to 60 days after allegations—indicating noncompliance with PREA timeliness expectations.

#### PAQ Data Summary:

1. 77 total allegations in past 12 months
2. 69 sexual abuse cases: 2 unfounded, 20 unsubstantiated, 47 open
3. 8 sexual harassment cases: 0 unfounded, 3 unsubstantiated, 5 open
4. All victims received appropriate medical/mental health services, retaliation monitoring, and written notifications

### Provision (b)

The facility reported and demonstrated that all investigators have completed PREA-specific training in sexual abuse investigations, as required under SOP I&I #454 and PREA Standard §115.34. Auditor verified training via personnel records.

### Provision (c)

Investigators gather and preserve both direct and circumstantial evidence, including physical evidence, DNA, and electronic monitoring data. They interview victims, alleged perpetrators, and witnesses, and review any prior complaints involving the accused. These practices were consistently described in staff interviews.

### Provision (d)

Compelled interviews are conducted only after consultation with the prosecutorial authority to ensure they do not compromise potential prosecutions. This was confirmed during investigative staff interviews.

### Provision (e)

Credibility of all individuals is assessed on a case-by-case basis, without regard to their role as staff or inmates. No polygraph or truth-telling devices are used. These



practices were verified during interviews and confirmed through documentation.

Provision (f)

Administrative investigations assess whether staff actions or inactions contributed to the incident. Findings are detailed in written reports, which include physical and testimonial evidence, credibility assessments, and conclusions.

Provision (g)

Criminal investigations are thoroughly documented in written reports, including detailed summaries of physical, testimonial, and documentary evidence.

Documentary evidence is attached to reports when feasible.

Provision (h)

All investigative records are retained for the duration of the accused individual's incarceration or employment, plus five years. This retention policy was verified through policy review and confirmed by the PREA Director.

Provision (i)

Although the agency does not assign investigations to outside entities, it affirms that it would fully cooperate with any external investigative body and seek updates as appropriate. Currently, all PREA-related investigations are handled internally.

Provision (j)

Investigations continue regardless of whether the alleged abuser or victim has left the agency's custody or employment. This was confirmed by both the IPCM and PREA Director, and supported by SOP I&I #454.

Provision (k)

(Not Applicable) – Auditor is not required to audit this provision.

Provision (l)

While outside agency involvement in PREA investigations is rare, the facility reports a commitment to fully cooperate and remain informed if such cases arise. All current investigations are conducted internally by the ADOC's Law Enforcement Services Division (LESD).

CONCLUSION

Based on the comprehensive review and analysis of all available documentation, interviews, and observed practices, the Auditor has determined that the agency/facility meets all provisions of PREA Standard §115.71 – Criminal and Administrative Investigations.

115.72	Evidentiary standard for administrative investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454 – Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Administrative Regulation #300 – Investigations and Intelligence Division, dated April 18, 2016</li> </ol> <p>INTERVIEWS</p> <p>Investigative Staff</p> <p>During interviews, investigative staff confirmed that in the course of an investigation, all available evidence is collected. This includes physical evidence, statements from the victim and alleged perpetrator, and evidence from the scene. Staff also affirmed that interviews are conducted with all relevant parties. Upon completion, the evidence and investigative findings are compiled and submitted to facility administration and the appropriate District Attorney’s Office for review and possible prosecutorial action.</p> <p>Investigative staff reported that the evidentiary standard applied to determine whether an allegation of sexual abuse or sexual harassment is substantiated is the preponderance of the evidence, or a lower standard of proof when applicable.</p> <p>PROVISIONS</p> <p>Provision (a):</p> <p>ADOC Administrative Regulation #454 (page 22, Section I) explicitly states that the standard of proof in all investigations of sexual abuse and sexual harassment is a preponderance of the evidence. This is consistent with PREA requirements, which mandate that administrative investigations be judged based on whether the available evidence indicates that the incident was more likely than not to have occurred.</p> <p>Furthermore, ADOC Administrative Regulation #300 (page 5) outlines the distribution protocol for investigative reports completed by the Law Enforcement Services Division (LESD, formerly Investigations and Intelligence). These reports are disseminated to the following parties:</p> <ol style="list-style-type: none"> <li>1. The Commissioner or designee</li> <li>2. The Inspector General</li> <li>3. Deputy/Associate Commissioners, Institutional Coordinators, Institutional Wardens, as appropriate</li> </ol>

	<ol style="list-style-type: none"> <li>4. The District Attorney of the jurisdiction if criminal conduct is identified</li> <li>5. The ADOC official who requested the investigation</li> <li>6. If central office personnel are involved, distribution is limited to the Commissioner of Corrections</li> </ol> <p>CONCLUSION</p> <p>Based on the review of documentation and interviews with investigative staff, the auditor concludes that the agency/facility meets the requirements of PREA Standard §115.72. The agency consistently applies the appropriate evidentiary standard—a preponderance of the evidence—to all administrative investigations of alleged sexual abuse and sexual harassment.</p>
--	---

115.73	Reporting to inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation (AR) #454 – Operations &amp; Legal: Inmate Sexual Abuse and Harassment (Effective January 4, 2016)</li> <li>3. Investigative Outcome/Disposition Reports</li> <li>4. Signed Notification to Inmate Forms</li> <li>5. Investigative Review Team Meeting Documentation</li> </ol> <p>INTERVIEWS</p> <p>Investigative Staff</p> <p>Interviews with investigative staff confirmed that the final step in the investigative process is the issuance of written notification to both the alleged victim and perpetrator. Upon conclusion of any PREA-related investigation, the Law Enforcement Services Division (LESD) provides a close-out letter detailing the investigation’s outcome and findings to the involved parties.</p> <p>PROVISIONS</p> <p>Provision (a)</p> <p>According to the PAQ and supporting documentation, during the past 12 months:</p>

- 69 sexual abuse allegations were reported—all involving inmate-on-inmate incidents.
- All 69 were criminally investigated by LESD.

2 cases were determined to be unfounded.

20 were unsubstantiated.

47 remained open at the time of the audit, waiting on dna results

- Prosecution was declined in all closed cases.
- All alleged victims were offered medical and mental health services.
- Retaliation monitoring was conducted and continued until one of the following occurred:

The case was deemed unfounded

The inmate transferred or was released

The 90-day monitoring period expired

- Written notifications of outcomes were provided to inmates in all closed sexual abuse cases.
- All closed cases (excluding unfounded ones) underwent a Sexual Abuse Incident Review.

Additionally:

- 8 sexual harassment allegations were reported:

7 involved inmate-on-inmate allegations and were investigated administratively:

3 were unsubstantiated

4 remained open

1 involved a staff-on-inmate allegation and was under active criminal investigation at the time of the audit

- In all resolved harassment cases, involved inmates received written notification of the outcomes.

Per ADOC AR #454, p. 22, Section H.2.f, LESD is required to notify inmates following an investigation whether the allegation was substantiated, unsubstantiated, or unfounded.

Provision (b)

Not Applicable.

	<p>Provision (c)</p> <p>ADOC AR #454, p. 7, Section C.6, mandates that in cases of alleged sexual abuse by a staff member, the agency must notify the inmate if:</p> <ol style="list-style-type: none"> <li>1. The staff member is no longer employed by ADOC</li> <li>2. The staff member is no longer assigned to the facility</li> <li>3. The staff member has been indicted or convicted on charges related to the alleged abuse</li> <li>4. All such notifications must be documented.</li> </ol> <p>Provision (d)</p> <p>As noted in Provision (a), there have been no inmate-on-inmate sexual abuse allegations within the past 12 months that resulted in indictment or conviction.</p> <p>Provision (e)</p> <p>The PAQ confirms a total of 69 sexual abuse and assault allegations within the last 12 months. All relevant details, outcomes, and notifications are documented under Provision (a).</p> <p>Provision (f)</p> <p>Not Applicable – Auditor is not required to audit this provision.</p> <p>CONCLUSION</p> <p>Based on the thorough review of documentation, staff interviews, investigative findings, and written notification records, the Auditor concludes that the agency/facility meets all requirements of PREA Standard §115.73 – Reporting to Inmates. The facility has established consistent and timely communication practices to ensure that inmates are informed of the outcomes of investigations in accordance with agency policy and PREA standards.</p>
--	---

115.76	Disciplinary sanctions for staff
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation (AR) #454 – Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Administrative Regulation (AR) #208 – Personnel, Employee Standards</li> </ol>

of Conduct and Discipline, dated August 17, 2005

4. ADOC memorandum – PREA Compliance Standard 115.76, Disciplinary Sanctions for Staff

INTERVIEW

Facility Head or Designee:

The Facility Head's designee confirmed that all staff are subject to disciplinary sanctions, up to and including termination, for violations of the agency's sexual abuse, sexual harassment, or sexual misconduct policies. The designee further reported:

- No staff have violated these policies in the past twelve months.
- No staff have been terminated or resigned in lieu of termination due to such violations during that period.
- Termination is the presumptive disciplinary sanction for any staff member found to have engaged in sexual abuse.

PROVISIONS

Provision (a):

According to the PAQ and agency policy, ADOC staff are subject to disciplinary sanctions, up to and including termination, for violations of sexual abuse or sexual harassment policies.

Relevant policies include:

AR #454, p. 13, Section V.4.a, which states that any staff member who:

1. Engages in sexual abuse in any correctional or confinement setting,
2. Is convicted of forced or coerced sexual activity in the community, or
3. Is civilly or administratively adjudicated for such acts, may be subject to disciplinary sanctions.

AR #454, p. 13, Section V.4.d, explicitly states that staff are subject to disciplinary sanctions, up to and including termination, for violations of the agency's sexual abuse or sexual harassment policies.

Provision (b):

Based on the PAQ and interview findings:

- No staff violated the agency's sexual abuse or sexual harassment policies in the past 12 months.

	<ul style="list-style-type: none"><li>• No terminations or resignations in lieu of termination occurred in connection with such violations.</li><li>• Termination remains the presumptive disciplinary sanction for any staff member found to have engaged in sexual abuse.</li></ul> <p>This provision is supported by AR #208, which outlines standards of conduct, employee responsibilities, disciplinary procedures, and includes a disciplinary matrix ranging from verbal counseling to dismissal. The regulation also includes procedural forms, such as those used for Pre-Dismissal Conferences and Resignations.</p> <p>Provision (c):</p> <p>The PAQ and interview with the Facility Head confirm that no staff have been disciplined short of termination for violations of agency sexual abuse or sexual harassment policies in the past 12 months. If such cases were to arise, the facility would ensure that sanctions are:</p> <ul style="list-style-type: none"><li>• Commensurate with the nature and circumstances of the offense,</li><li>• Reflective of the staff member’s disciplinary history, and</li><li>• Consistent with sanctions imposed on others for comparable conduct.</li></ul> <p>These standards are addressed in AR #208, which mandates proportionate and consistent disciplinary action based on offense severity and staff history.</p> <p>Provision (d):</p> <p>The PAQ indicates that the facility ensures all staff terminations or resignations in lieu of termination for violations of sexual abuse or harassment policies are:</p> <ul style="list-style-type: none"><li>• Reported to law enforcement, unless the activity is clearly not criminal, and</li><li>• Reported to relevant licensing bodies, as applicable.</li></ul> <p>No such reports were necessary during the past 12 months. This was corroborated during the interview with the Facility Head.</p> <p>AR #208 supports this requirement, mandating such reporting in accordance with Alabama law and ADOC protocol.</p> <p>CONCLUSION</p> <p>Following a thorough review of agency policies, the Pre-Audit Questionnaire, supporting documentation, and staff interviews, the auditor concludes that the agency/facility meets all provisions of PREA Standard §115.76 – Disciplinary Sanctions for Staff.</p>
--	--

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

DOCUMENTATION

1. Pre-Audit Questionnaire (PAQ)
2. ADOC Administrative Regulation #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016
3. ADOC Administrative Regulation #216, Personnel, dated December 7, 2015

INTERVIEWS

Facility Head or Designee

During the interview, the Facility Head confirmed that in the previous twelve months, there were no instances in which a contractor or volunteer was reported to law enforcement and/or relevant licensing bodies for engaging in sexual abuse of inmates. Furthermore, no contractors or volunteers were subject to corrective action related to violations of sexual abuse or sexual harassment policies.

PROVISIONS

Provision (a):

The Pre-Audit Questionnaire indicates that agency policy mandates any contractor or volunteer who engages in sexual abuse be prohibited from inmate contact and reported to law enforcement—unless the conduct is clearly not criminal—as well as to any relevant licensing bodies. This was confirmed during the interview with the Facility Head.

In the past twelve months, there were zero reported incidents of sexual abuse involving contractors or volunteers.

This requirement is codified in ADOC Administrative Regulation #454, page 13, Section V.4.b.4. The policy specifies that the ADOC Personnel Division or designee shall inform prospective employees and contractors that false information or omissions related to certain misconduct are grounds for termination. This includes:

- Engagement in sexual abuse in a correctional or similar institutional setting
- Convictions or adjudications (criminal, civil, or administrative) for forced or coerced sexual activity, or sexual activity without consent

Contractors are also required to disclose any such misconduct on an ongoing basis.

Provision (b):

Per the PAQ, the facility takes appropriate remedial action and considers restricting further inmate contact when a contractor or volunteer violates agency sexual abuse



	<p>or harassment policies, even when the conduct does not meet the threshold for criminal sexual abuse. This was verified during the interview with the Facility Head.</p> <p>There were no such policy violations or resulting remedial actions reported during the previous year.</p> <p>This provision is supported by ADOC Administrative Regulation #216, Personnel, which includes pre-employment screening forms on pages 6-11. These forms include mandatory questions to identify relevant past misconduct, ensuring alignment with PREA standards.</p> <p>CONCLUSION</p> <p>Based on the review of agency policies, documentation, and interview findings, the Auditor concludes that the agency/facility meets all provisions of PREA Standard §115.77 – Corrective Action for Contractors and Volunteers</p>
--	--

115.78	Disciplinary sanctions for inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <ul style="list-style-type: none"> <li>• Pre-Audit Questionnaire (PAQ)</li> <li>• ADOC Administrative Regulation (AR) #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>• ADOC Administrative Regulation (AR) #403, Disciplinary Procedures for Inmates</li> </ul> <p>INTERVIEWS</p> <p>Facility Head or Designee:</p> <p>During the interview, the Facility Head confirmed that the Georgia Department of Corrections (GDC) strictly prohibits all sexual activity between inmates. Additionally, the Facility Head verified the following:</p> <ul style="list-style-type: none"> <li>• In the past twelve months, there have been zero administrative findings of inmate-on-inmate sexual abuse.</li> <li>• In the past twelve months, there have been zero criminal findings of guilt for inmate-on-inmate sexual abuse.</li> <li>• Inmates are only subject to disciplinary action for sexual contact with staff when it is determined that the staff member did not consent.</li> </ul>

- The agency prohibits disciplinary action against inmates who report sexual abuse in good faith, even when the investigation does not result in a substantiated finding.

\Medical and Mental Health Staff:

Medical and mental health personnel confirmed that the facility provides therapy, counseling, and other rehabilitative interventions to address the underlying causes or motivations for abusive behavior. Participation in these interventions may be required as a condition for accessing certain programs or privileges.

#### PROVISIONS

Provision (a):

According to the PAQ, inmates are subject to disciplinary sanctions only:

- Following a formal disciplinary process and an administrative finding that they engaged in inmate-on-inmate sexual abuse, or
- Following a criminal conviction for such conduct.

The PAQ indicates that there were zero administrative or criminal findings of inmate-on-inmate sexual abuse in the past twelve months, which was confirmed by the Facility Head.

Additionally, the facility reported receiving 69 allegations of sexual abuse and 8 allegations of sexual harassment during the same period. All sexual abuse allegations were referred for criminal investigation. Of those, prosecution was declined in 22 cases; the remaining 47 cases remain open.

Applicable Policy:

AR #454, Section H, specifies that disciplinary sanctions are imposed only following a formal process resulting in either an administrative or criminal finding of sexual abuse.

Provision (b):

The PAQ states that any imposed sanctions are proportionate to the nature and circumstances of the abuse, the inmate's disciplinary history, and consistent with sanctions imposed on other inmates for similar offenses. The Facility Head affirmed this practice.

Applicable Policy:

AR #454, p. 22, H.2.e, requires each case to be evaluated on its individual merits, with consideration of relevant circumstances and consistency with comparable cases.

Provision (c):

The PAQ affirms that the facility's disciplinary process takes into account whether an inmate's mental illness or developmental disability contributed to the behavior in question. This was also verified by the Facility Head.

Applicable Policy:

AR #454, p. 22, H.2.e, mandates careful assessment of such factors in determining disciplinary outcomes.

Provision (d):

The PAQ and interviews with the IPCM and medical/mental health staff confirm that the facility offers therapy, counseling, and other interventions to address the underlying causes of sexually abusive behavior. These interventions may be a required component for accessing certain programming or benefits.

Provision (e):

The PAQ indicates, and the Facility Head and IPCM confirmed, that the agency only disciplines inmates for sexual contact with staff when it is determined that the staff member did not consent.

Applicable Policy:

AR #454, p. 22, H.2.e, outlines that consent and case-specific circumstances must be evaluated prior to disciplinary action.

Provision (f):

The PAQ states that the agency prohibits disciplinary action against inmates who report sexual abuse in good faith, based on a reasonable belief that the abuse occurred—even if the allegation is unsubstantiated. This was corroborated by both the Facility Head and IPCM.

Applicable Policy:

AR #454, p. 22, H.2.c, ensures that inmates are not subject to discipline solely because their allegation is unproven or later withdrawn.

Provision (g):

The PAQ notes that the agency prohibits all inmate-on-inmate sexual activity and only categorizes such behavior as sexual abuse when coercion is present. The Facility Head confirmed this interpretation.

Applicable Policy:

ADOC Rules Violation Definitions, RV#912, classifies non-forcible sexual activity as a rules violation and clarifies that all inmate sexual contact is prohibited under agency policy.

	<p><b>CONCLUSION</b></p> <p>Based on a thorough review of the Pre-Audit Questionnaire, supporting policies and documentation, and staff interviews, the auditor concludes that the agency/facility meets all provisions of PREA Standard §115.78 – Disciplinary Sanctions for Inmates</p>
--	---

<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</li> <li>2. ADOC Administrative Regulation #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Form 454-C, PREA Risk Factors Checklist</li> <li>4. Risk Assessment Checklist</li> <li>5. Mental Health Referral Documentation</li> <li>6. Medical Referral Documentation</li> <li>7. Classification Spreadsheet</li> </ol> <p>INTERVIEWS:</p> <p>Risk Screening Staff:</p> <p>Staff responsible for intake screenings confirmed that all medical and mental health records are maintained in a separate, secure electronic database. Access to this database is strictly limited to medical and mental health professionals. Information from these records is shared only with classification staff and high-level administrators on a strict need-to-know basis.</p> <p>Medical and Mental Health Staff:</p> <p>Medical and mental health staff affirmed that informed consent is obtained before disclosing any information related to a resident’s history of sexual victimization—except in cases where the victim is under the age of 18. They also reported that all inmates disclosing prior sexual victimization are offered a follow-up appointment with a qualified mental health practitioner within 14 days of intake. If a screening reveals risk factors such as substantial risk of victimization or sexually aggressive behavior, appropriate referrals are promptly made to medical or mental health professionals.</p> <p>Inmates Who Disclosed Prior Victimization:</p>

An on-site interview with an inmate who disclosed prior sexual victimization confirmed that a mental health referral was attempted on the day of intake, with an appointment scheduled for the following week. The inmate acknowledged being offered services but chose to decline the referral.

PROVISIONS:

Provision (a):

The PAQ states that inmates disclosing prior sexual victimization during intake screening are provided with timely access to emergency medical treatment and crisis intervention services. Follow-up meetings with medical or mental health practitioners are routinely offered, and all such interactions are documented.

AR #454, Section F, p. 15, mandates that inmates assessed as high risk for victimization or identified as sexually aggressive be referred for mental health evaluations within 14 days of intake.

Provision (b):

According to the PAQ and AR #454, p. 16, F.6, all inmates are reassessed for risk of sexual victimization or abusiveness within 30 days of arrival. Reassessments also occur following specific triggers such as incidents of sexual abuse, new information, or inmate requests.

A review of 51 randomly selected inmate records revealed that all 51 had received PREA-related information at intake, including a signed acknowledgment sheet, orientation booklet, PREA brochure, and viewing of the PREA video.

A review of 52 inmate records confirmed that all had been reassessed within 30 days. A transgender inmate in the sample had been reassessed twice within the past 12 months, demonstrating compliance with ongoing monitoring requirements.

Provision (c):

The facility's policy and AR #454 require that any inmate who has previously perpetrated sexual abuse be offered a follow-up meeting with a mental health professional within 14 days of intake. Staff interviews and documentation confirmed implementation of this requirement.

Provision (d):

Policy dictates that information from intake screenings and mental health assessments be used to make individualized housing, work, education, and program assignments. AR #454, p. 16, F.9, specifies the use of screening information to inform safe and appropriate classification decisions. This is done in accordance with the ADOC Classification Manual (AR433 and AR435) to ensure separation of potentially abusive inmates from those at risk of victimization.

Provision (e):

	<p>The PAQ and interviews with staff confirm that informed consent is obtained before any disclosure of an inmate's history of sexual victimization, unless the inmate is under 18. This practice was verified by the Institutional PREA Compliance Manager and corroborated during staff interviews.</p> <p>CONCLUSION:</p> <p>Based on the review of documentation, interviews with staff and inmates, and the results of inmate file audits, the Auditor concludes that the facility meets the requirements of PREA Standard §115.81.</p>
--	--

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and supporting documentation provided</li> <li>2. ADOC Administrative Regulation (AR) 454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> <li>3. ADOC Form MH-008, Referral to Mental Health</li> <li>4. ADOC Memorandum of Understanding (MOU) with the Alabama Coalition Against Rape (ACAR)</li> </ol> <p>INTERVIEWS:</p> <p>Medical and Mental Health Staff:</p> <p>During interviews, medical staff explained that when an inmate reports a sexual assault and is brought to medical, the physician performs an initial examination to determine whether the inmate should be referred to the Sexual Assault Response Team (SART) or transported directly to a hospital, depending on the severity of injuries. If the SART is utilized, nursing staff provide treatment recommendations, and the facility physician issues the necessary orders. Inmates are provided with information on sexually transmitted infection (STI) prophylaxis and other pertinent care.</p> <p>Medical and mental health staff confirmed that care is provided immediately and based on professional clinical judgment. Both departments work collaboratively to ensure that inmates receive appropriate treatment. Inmates are offered access to emergency contraception and STI prophylaxis as medically appropriate and in alignment with recognized standards of care.</p> <p>Inmates Who Reported Sexual Abuse:</p>

Inmates who disclosed sexual abuse reported the following during interviews:

- Facility staff were responsive upon notification of the incident
- They were referred for medical and mental health treatment
- They were immediately referred for forensic examinations
- Victim advocates were offered and were present during the examination
- Advocates helped ensure inmates understood the examination process
- No inmate was charged for medical treatment
- All inmates reported they were not asked to take a polygraph test
- They were notified in writing of the investigation's outcome

First Responders (Security and Non-Security):

Security first responders reported their primary duties are to protect the victim, notify medical and mental health staff, and preserve evidence.

Non-security first responders stated their role is to protect the victim, notify security staff, and remain with the victim until security personnel arrive.

PROVISIONS:

Provision (a):

The facility reported in the PAQ that inmates who are victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. This was confirmed during staff interviews and through a review of documentation for inmates who reported abuse, all of whom were offered timely referrals for medical and mental health care.

Medical and mental health practitioners determine the nature and scope of services based on their professional judgment and document both the treatment provided and the timeliness of their response. When health staff are unavailable, appropriate actions taken by non-health staff are also documented.

Relevant policy is outlined in ADOC AR 454 (p. 18, Section F.3.a), which requires immediate referral to medical care and timely access to emergency medical and crisis intervention services. Victims must also be referred immediately to mental health professionals using Form MH-008.

The facility maintains an MOU with ACAR to ensure access to confidential emotional support services.

Forensic exams and Sexual Assault Nurse Examiners (SAFE/SANE) are available through One Place Family Justice Center in Montgomery, AL. If no SANE is on-site, one is available on call 24/7.

The Institutional PREA Compliance Manager (IPCM) confirmed there were 51 SANE transports in the past 12 months.

Provision (b):

	<p>According to the PAQ and verified through interviews, if qualified medical or mental health practitioners are not on duty when a report is made, security first responders take immediate steps to protect the victim and notify the appropriate health professionals.</p> <p>This protocol is supported by ADOC AR 454 (p. 19, Section G.3.b).</p> <p>Provision (c):</p> <p>Medical and mental health staff confirmed that treatment is rendered immediately and according to professional clinical judgment. Inmates are offered access to emergency contraception and STI prophylaxis, as appropriate and consistent with professional standards.</p> <p>This is supported by ADOC AR 454 (p. 18, Section G.3), which mandates timely access to emergency contraception, pregnancy testing, STI testing, and prophylaxis where medically indicated.</p> <p>Provision (d):</p> <p>Treatment services are provided at no cost to the victim, regardless of whether they identify the abuser or cooperate with the investigation. This was confirmed by interviews with medical staff and inmate victims.</p> <p>ADOC AR 454 (p. 18, Section G.3.c) explicitly states that victims shall not be charged for treatment services, and services will be provided irrespective of the inmate's participation in the investigation.</p> <p>CONCLUSION:</p> <p>Based on the review and analysis of all available evidence, including documentation and interviews, the Auditor concludes that the facility meets all provisions of the PREA standard regarding access to emergency medical and mental health services.</p>
--	---

<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ) and all supporting documentation were provided.</li> <li>2. ADOC Administrative Regulation #454</li> </ol>



3. ADOC Form MH-008 – Referral to Mental Health
4. Memorandum of Understanding (MOU) between ADOC and the Alabama Coalition Against Rape (ACAR) for the provision of ongoing treatment (requires inmate signature).

#### INTERVIEWS:

##### Medical and Mental Health Staff:

Medical and mental health staff consistently reported that treatment is provided immediately based on clinical judgment. Evaluations and treatment are offered to all inmates who have been victimized by sexual abuse, and services are aligned with the community standard of care.

Staff confirmed that all treatment services are provided free of charge, regardless of whether the victim names the abuser or cooperates with an investigation. Medical and mental health staff collaborate to ensure that appropriate care is delivered. When medically appropriate and in accordance with accepted professional standards, emergency contraception and prophylaxis for sexually transmitted infections (STIs) are offered.

Mental health staff reported that evaluations of known inmate-on-inmate abusers are attempted within 60 days of discovering such a history, and treatment is offered when clinically indicated.

Medical staff also confirmed that inmate victims of sexual abuse are offered STI testing as medically appropriate.

##### Inmates Who Reported Abuse:

Inmates interviewed who had reported sexual abuse confirmed the following:

- Staff responded promptly to their reports.
- They were offered medical and mental health referrals.
- They were referred immediately for forensic examination.
- Those referred for a forensic exam were offered a victim advocate who accompanied them and provided information about the process.
- No financial cost was incurred for any medical treatment.
- 100% of inmates reported they were not asked to submit to a polygraph test.
- They received written notification of the investigation results.

#### PROVISIONS:

##### Provision (a):

Per ADOC Administrative Regulation #454, Section G.3.d (p. 19), all inmates victimized by sexual abuse shall receive medical and mental health evaluations and

treatment.

A Memorandum of Understanding (MOU) between ADOC and ACAR supports the provision of confidential emotional support services for inmates.

Forensic exams are conducted at the One Place Family Justice Center in Montgomery, AL, by certified SAFE/SANE professionals available 24/7.

Facility documentation confirms compliance with the community standard of care, including STI testing, prophylaxis, psychiatric and psychological services, and crisis intervention—all provided at no cost to the inmate.

Provision (b):

Per ADOC Administrative Regulation #454, Section G.3.e (p. 19), evaluations and treatment shall include follow-up services, treatment plans, and referrals for continued care, including after transfer or release.

Provision (c):

Medical documentation and staff interviews confirm follow-up care is diligently provided. Records include detailed notes on evaluations, treatment planning, and continuity of care.

Provision (d):

ADOC Administrative Regulation #454, Section G.3 (p. 19), mandates that inmates be informed of and offered emergency contraception, pregnancy tests, STI testing, and prophylaxis, when medically appropriate.

Provision (e):

The PAQ affirms that if pregnancy results from sexual abuse in custody, the inmate receives timely, comprehensive information and access to all lawful pregnancy-related medical services.

Provision (f):

Per ADOC Administrative Regulation #454, Section G.3 (p. 19), appropriate medical services, including emergency contraception and STI-related care, are provided based on clinical need.

Provision (g):

Per ADOC Administrative Regulation #454, Section G.3.e (p. 19), ongoing medical and mental health services are delivered without financial cost, regardless of victim cooperation or identification of the perpetrator.

Provision (h):

Per ADOC Administrative Regulation #454, Section G.3.g (p. 19), mental health staff must attempt to evaluate known inmate-on-inmate abusers within 60 days of

	<p>identifying their abuse history. Treatment is offered when clinically appropriate. Referrals are made using Form MH-008.</p> <p>CONCLUSION:</p> <p>After reviewing all relevant policies, documentation, interviews, and records, the Auditor has determined that the agency/facility meets all provisions of the standard related to ongoing medical and mental health care for sexual abuse victims</p>
--	--

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment (Effective January 4, 2016)</li> <li>3. ADOC Form 454-E, Sexual Abuse Incident Review</li> <li>4. Sexual Assault Incident Review Reports</li> </ol> <p>INTERVIEWS</p> <p>Facility Head</p> <p>The Facility Head confirmed that the Incident Review Team (IRT) is composed of executive-level and upper-level management officials representing multiple departments. The Facility Head Designee emphasized the facility's commitment to considering and incorporating recommendations from IRT members to improve safety and prevention efforts.</p> <p>PREA Compliance Manager (PCM)</p> <p>The PREA Compliance Manager (PCM) stated that the Sexual Abuse Incident Review (SAIR) reports are submitted to both the PCM and the Facility Head. The PCM affirmed that all reviews are conducted within 30 days of the conclusion of each substantiated or unsubstantiated investigation, as required.</p> <p>Incident Review Team (IRT) Members</p> <p>IRT members interviewed confirmed their team is comprised of upper-level management and includes input from line supervisors, investigators, and medical or mental health professionals. They affirmed that reviews are comprehensive and consider all criteria required by the standard.</p>

## PROVISIONS

### Provision (a):

The facility reported in the PAQ that it conducts sexual abuse incident reviews at the conclusion of every criminal or administrative investigation unless the allegation is determined to be unfounded. This practice was verified during interviews with facility leadership.

According to the PAQ and PREA-related documentation:

- In the past 12 months, there were 68 sexual abuse allegations:
- 67 inmate-on-inmate: 9 unfounded, 37 unsubstantiated, 21 ongoing.
- 1 staff-on-inmate: under criminal investigation, still ongoing.
- In every case, the alleged victim was offered medical and mental health services. Retaliation monitoring occurred until either the allegation was deemed unfounded, the victim was released or transferred, or 90 days had passed.
- All substantiated and unsubstantiated cases underwent an incident review within 30 days.
- All closed cases resulted in prompt written notification to the victim.

In addition, there were 7 allegations of sexual harassment:

- 5 inmate-on-inmate: 4 unsubstantiated, 1 ongoing.
- 2 staff-on-inmate: 1 unsubstantiated, 1 ongoing.

Administrative Regulation #454 (p. 20, H, 1, k) supports this provision, stating that a multidisciplinary team including upper-level management, line supervisors, investigators, and healthcare practitioners must conduct incident reviews within 30 days of all substantiated or unsubstantiated allegations.

### Provision (b):

The PAQ indicates that incident reviews are conducted within 30 days of the conclusion of applicable investigations. In the last 12 months, 20 sexual abuse allegations (excluding unfounded cases) were reviewed within the required timeframe. Interviews with the PCM and review of documentation confirmed this practice. Policy guidance is provided by AR #454 (p. 20, H, 1, k).

### Provision (c):

The facility reported—and interviews confirmed—that the IRT is a multidisciplinary team composed of upper-level managers, supervisors, investigators, and medical or mental health practitioners. This composition meets PREA requirements and is

	<p>outlined in AR #454 (p. 20, H, 1, k). See Provision (a) for additional verification and review.</p> <p>Provision (d):</p> <p>The PAQ states, and interviews verified, that the facility prepares written findings from the incident reviews. These reports are submitted to the Facility Head and PCM. Interviews confirmed that the team considers the following during reviews:</p> <ol style="list-style-type: none"> <li>1. Potential changes to policy or practice.</li> <li>2. Motivating factors such as race, gender identity, LGBTI status, or group dynamics.</li> <li>3. Environmental conditions of the incident location.</li> <li>4. Adequacy of staffing levels during the incident.</li> <li>5. Personnel performance and training history.</li> <li>6. The need for additional or enhanced monitoring technology.</li> </ol> <p>Reports are prepared and disseminated to appropriate personnel, including the DOJ, PREA Director, and Facility Monitor when applicable.</p> <p>Provision (e):</p> <p>The facility reported that it implements recommendations from the incident review process or documents a rationale for not doing so. This was verified during interviews with the Facility Head and PCM.</p> <p>CONCLUSION:</p> <p>Based on documentation, interviews, and the review of investigation and incident review data, the facility demonstrates full compliance with PREA Standard §115.86.</p>
--	---

115.87	Data collection
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment</li> <li>3. Most Recent Survey of Sexual Victimization (Form SSV-2)</li> <li>4. Most Recent Annual PREA Data Report</li> </ol>

5. ADOC PREA Website: <http://www.doc.state.al.us/PREA>

INTERVIEWS:

Agency Contract Administrator

During the interview, the Agency Contract Administrator confirmed that all contracts for the housing of Alabama Department of Corrections (ADOC) include language requiring compliance with the PREA standards. In addition, the ADOC collects both incident-based and aggregated sexual abuse data from each contracted facility.

PROVISIONS:

Provision (a):

ADOC Administrative Regulation (AR) #454, dated January 4, 2016 (p. 24, Section L.1), outlines the agency's requirements for data collection related to allegations of sexual abuse and sexual harassment. The regulation includes procedures for:

1. Collecting and maintaining data on every allegation of sexual abuse and harassment.
2. Utilizing sources such as inmate polling, grievances, incident reports, investigation files, and documentation of announced and unannounced rounds.
3. Employing standardized definitions and methodologies for analysis.
4. Implementing quality control mechanisms to ensure data accuracy.

Provision (b):

The ADOC aggregates sexual abuse data and submits the required information annually to the U.S. Department of Justice via the Survey of Sexual Victimization (Form SSV-2). The Auditor reviewed the most recently submitted SSV-2 report and confirmed it met the DOJ requirements.

Provision (c):

AR #454 also stipulates that incident-based data must be collected to answer all questions from the most recent DOJ Survey of Sexual Violence. This includes:

1. Collecting incident-based documentation such as investigative files and incident reviews.
2. Ensuring the data is sufficient to fully respond to the federal survey.
3. Using instruments and methodologies that meet DOJ standards.

The Auditor reviewed the agency's most recent annual report, which comprehensively addressed all required questions. This report is publicly available on the ADOC website.

	<p>Provision (d):</p> <p>In compliance with PREA standards, the ADOC maintains, reviews, and analyzes all available incident-based documents, including reports, investigative files, and incident reviews. The Auditor reviewed the most recent annual report, which included identified areas of concern and documented corrective actions taken by the agency.</p> <p>Provision (e):</p> <p>AR #454 (p. 7, Section D) assigns responsibility to the ADOC General Counsel for ensuring that all inmate housing contracts include PREA compliance provisions.</p> <p>The Alabama Therapeutic Education Facility (ATEF), operated by The GEO Group, Inc., is an example of this compliance. ADOC Contract #CD170051713, Section 3.39, explicitly requires the Vendor to comply with Alabama Code §14-11-31 and 28 C.F.R. Part 115 (PREA standards). The contract mandates:</p> <ol style="list-style-type: none"> <li>1. Zero tolerance for custodial sexual misconduct.</li> <li>2. Mandatory reporting of suspected or confirmed incidents.</li> <li>3. Access to the ADOC's PREA Contract Monitor.</li> <li>4. Full cooperation during audits conducted by DOJ-certified auditors.</li> <li>5. Required training for all facility staff and contractors.</li> </ol> <p>Provision (f):</p> <p>The ADOC submits its aggregated data annually by June 30 for the previous calendar year, as required. The Auditor verified that the most recent SSV-2 was submitted on time and all data fields were completed.</p> <p>CONCLUSION:</p> <p>Based on a thorough review of documentation, interviews, and the agency's policies and practices, the Auditor has determined that the Alabama Department of Corrections meets all provisions of the PREA standard related to data collection and review.</p>
--	--

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <p>Pre-Audit Questionnaire (PAQ)</p>

ADOC Administrative Regulation #454  
2023 Survey of Sexual Victimization (Form SSV-2)  
2024 Annual Data Report  
Agency Website: <http://www.doc.state.al.us/PREA>

## INTERVIEWS

### Agency Head or Designee

The Agency Head Designee confirmed that the agency's annual report includes a comparison of current year data and corrective actions with those from previous years. These reports are publicly available on the ADOC website. The purpose of the report is to enhance the safety of inmates and staff by identifying problem areas and implementing corrective actions on an ongoing basis.

### Facility Head or Designee

The Facility Head stated that the facility's PREA Committee reviews each allegation of sexual abuse and submits relevant information to the PREA Coordinator for inclusion in the agency's annual review.

### PREA Director (PD)

The PREA Director affirmed that the agency reviews data collected pursuant to §115.87 to evaluate the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training. The agency compiles and publishes an annual report, redacting only personally identifiable information.

### PREA Compliance Manager (PCM)

The PREA Compliance Manager confirmed that most PREA-related documentation, including the agency's annual reports, is accessible via the ADOC website.

## PROVISIONS

### Provision (a):

The PAQ indicates that the agency reviews and aggregates data pursuant to §115.87 to assess and enhance the effectiveness of its sexual abuse prevention and response efforts. This process includes:

1. Identifying problem areas;
2. Implementing ongoing corrective actions;
3. Preparing an annual report outlining findings and corrective actions for each facility and the agency as a whole.

This process was confirmed during the interview with the PREA Director.

### Relevant Policy:

ADOC Administrative Regulation #454 (dated January 4, 2016), Section L.1.c, designates the PREA Director as responsible for data review and preparation of



	<p>reports that identify problem areas, recommend corrective actions, and include year-to-year institutional comparisons.</p> <p>Provision (b):</p> <p>According to the PAQ and verified through the Agency Head Designee interview, the annual report includes comparisons of the current year's data and corrective actions with those from prior years.</p> <p>The Auditor reviewed the most recent annual report (2022) and confirmed that it complies with PREA standards, including a year-over-year analysis to evaluate progress.</p> <p>Provision (c):</p> <p>The PAQ states that the agency makes the annual report publicly accessible via its website.</p> <p>The Auditor verified that the ADOC PREA webpage (<a href="http://www.doc.state.al.us/PREA">http://www.doc.state.al.us/PREA</a>) hosts all annual reports dating back to 2013.</p> <p>Provision (d):</p> <p>As indicated in the PAQ and confirmed by the PREA Director, redactions in the annual report are strictly limited to information that could compromise facility safety or security.</p> <p>The PREA Director emphasized that only personally identifiable information is redacted, ensuring the inclusion of all relevant data.</p> <p>CONCLUSION</p> <p>Based on the comprehensive review of the Pre-Audit Questionnaire, supporting documentation, annual reports, and interviews with key staff, the Auditor concludes that the agency/facility meets all provisions of PREA Standard §115.88 – Data Review for Corrective Action</p>
--	--

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> <li>1. Pre-Audit Questionnaire (PAQ)</li> <li>2. ADOC Administrative Regulation (AR) #454, Operations &amp; Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</li> </ol>

3. Alabama Department of Corrections Website: <http://www.doc.state.al.us/PREA>

## INTERVIEWS

### PREA Director (PD)

During the interview, the PREA Director explained that the Alabama Department of Corrections (ADOC) maintains PREA-related data at both the local and agency levels:

- Local Level: Data is stored within a Risk Management System with access restricted to staff on a need-to-know basis.
- Agency Level: Data is maintained to support federal reporting requirements (e.g., SSV-2) and is also made publicly accessible through the ADOC PREA website.

The PREA Director confirmed that the agency conducts regular reviews of data collected pursuant to §115.87 and that redactions from publicly available reports are limited solely to the removal of personally identifying information.

## PROVISIONS

### Provision (a):

As reported in the PAQ, the agency securely retains both incident-based and aggregate data on sexual abuse. ADOC policy requires the annual publication of aggregate data from all facilities under its direct control, as well as from contracted private facilities. This requirement is confirmed by the availability of such data on the ADOC PREA website.

### Provision (b):

According to the PAQ, the agency ensures that aggregate data is made publicly accessible on at least an annual basis. The ADOC PREA webpage hosts multiple reports that are consistent with PREA standards, offering comprehensive facility-level data on incidents of sexual abuse.

### Provision (c):

The PAQ states that:

- All personally identifying information is removed from aggregated data prior to publication.
- Data collected pursuant to §115.87 is retained for a minimum of 10 years, unless a longer retention period is required by federal, state, or local law.

### Provision (d):

ADOC Administrative Regulation #454 (p. 26, Sections L.1.d & L.1.e) specifies the

	<p>following:</p> <ul style="list-style-type: none"> <li>• All PREA-related data must be securely retained for at least 10 years.</li> <li>• Records of criminal and administrative investigations must be retained for the duration of the alleged abuser's incarceration or employment with ADOC, plus an additional five (5) years.</li> </ul> <p>The Auditor verified compliance with this policy through the review of historical data, including records dating back to August 20, 2012.</p> <p>CONCLUSION</p> <p>Based on the review of agency policy, the Pre-Audit Questionnaire, interview responses, and supporting documentation, the Auditor concludes that the agency/ facility fully meets the requirements of PREA Standard §115.89 – Data Storage, Publication, and Destruction.</p>
--	---

115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION:</p> <p>Publicly Accessible Website:</p> <ol style="list-style-type: none"> <li>1. The Alabama Department of Corrections (ADOC) maintains a publicly accessible PREA webpage at: <a href="http://www.doc.state.al.us/PREA">http://www.doc.state.al.us/PREA</a></li> <li>2. This webpage provides access to facility audit reports and aggregated data reports regarding sexual abuse and sexual harassment in accordance with PREA standards.</li> </ol> <p>INTERVIEWS</p> <p>Agency Head or Designee:</p> <p>During the interview, the Agency Head's designee confirmed that each facility within the Alabama Department of Corrections had been audited during the most recent three-year audit cycle. Copies of all PREA audit reports are publicly available on the ADOC website for review and transparency.</p> <p>PREA Director:</p>

The PREA Director confirmed that the current audit is being conducted in the second year of the fourth, three-year PREA audit cycle, in full compliance with audit scheduling requirements under PREA.

#### PROVISIONS

##### Provision (a):

The Agency Head's designee confirmed that each facility under ADOC's jurisdiction has been audited within the previous three-year audit cycle. Audit reports are publicly posted on the ADOC PREA webpage, which also contains sexual abuse data reports submitted in compliance with PREA standards.

Website: <http://www.doc.state.al.us/PREA>

##### Provision (b):

The ADOC PREA webpage includes multiple reports from ADOC facilities concerning incidents of sexual abuse, in accordance with PREA data reporting requirements.

Website: <http://www.doc.state.al.us/PREA>

##### Provision (c) to (g):

Not Applicable (N/A)

##### Provision (h):

During the on-site audit, the Auditor was granted complete, unimpeded access to all areas of the facility. The Institutional PREA Compliance Manager (IPCM) was readily available throughout the on-site audit to accompany the Auditor and facilitate access as requested.

##### Provision (i):

Throughout the audit process, both the ADOC and facility staff fully cooperated and promptly provided all information requested by the Auditor in a complete and timely manner.

##### Provision (j) to (l):

Not Applicable (N/A)

##### Provision (m):

The Auditor was provided with a secure and private space to conduct all necessary interviews during the on-site audit.

##### Provision (n):

During inmate interviews, all inmates affirmed they were provided the opportunity to send confidential correspondence to the Auditor, consistent with procedures for communicating with legal counsel.

	<p>Provision (o):</p> <p>Not Applicable (N/A)</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of all documentation, interviews, and on-site observations, the Auditor concludes that the agency/facility meets all applicable provisions of PREA Standard §115.401 concerning the frequency and scope of audits.</p>
--	--

115.403	Audit contents and findings
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>DOCUMENTATION</p> <p>Alabama Department of Corrections Publicly Accessible Website <a href="http://www.doc.state.al.us/PREA">http://www.doc.state.al.us/PREA</a>.</p> <p>PROVISIONS</p> <p>Provision (a) – (e)</p> <p>Not Applicable. These provisions do not apply to the agency's responsibilities under this standard.</p> <p>Provision (f):</p> <p>The Alabama Department of Corrections (ADOC) maintains a publicly accessible PREA webpage at <a href="http://www.doc.state.al.us/PREA">http://www.doc.state.al.us/PREA</a>. The webpage includes multiple reports detailing sexual abuse data collected from various facilities, in compliance with PREA standards. These reports include annual statistical reviews and prior PREA audit reports for each facility, which are made available for public review. The agency demonstrates transparency and accountability by ensuring this information is easily accessible, consistently updated, and presented in a clear and organized manner.</p> <p>Conclusion:</p> <p>Based on a thorough review and analysis of the agency's publicly accessible website and the information provided therein, the Auditor has determined that the agency/facility meets all applicable requirements of the standard regarding the posting of audit contents and findings</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	yes
---	-----

	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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



<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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	na

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	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	yes

	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?	
	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
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	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.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	



	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
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.31 (a)</b>	<b>Employee training</b>	
	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
<b>115.31 (b)</b>	<b>Employee training</b>	
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	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
<b>115.33 (b)</b>	<b>Inmate education</b>	
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	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	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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	yes

	suspicious 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.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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.)	yes
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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	yes



	information is not exploited to the inmate's detriment by staff or other inmates?	
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	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	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	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	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	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
<b>115.43 (d) Protective Custody</b>		
	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
<b>115.43 (e) Protective Custody</b>		
	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
<b>115.51 (a) Inmate reporting</b>		
	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
<b>115.51 (b) Inmate reporting</b>		
	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	yes

	anonymous upon request?	
	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
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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	yes

	this standard.)	
	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
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	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,	na

	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.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	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	yes



	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	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	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	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	yes

	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?	
	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
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	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
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	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	yes

	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?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	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	yes

	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?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	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
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403</b>	<b>Audit contents and findings</b>	



(f)	
	<div data-bbox="320 185 1273 555"> <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> </div> <div data-bbox="1302 185 1353 219">yes</div>