

PREA Facility Audit Report: Final

Name of Facility: Elmore Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/24/2025

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: 04/24/2025

AUDITOR INFORMATION

Auditor name: OConnor, Darla

Email: doconnor@strategicjusticesolutions.com

Start Date of On-Site Audit: 02/16/2025

End Date of On-Site Audit: 02/18/2025

FACILITY INFORMATION

Facility name: Elmore Correctional Facility

Facility physical address: 3520 Marion Spillway Road, Elmore, Alabama - 36025

Facility mailing address:

Primary Contact

Name:	Anthony Clark
Email Address:	anthony.clark@doc.alabama.gov
Telephone Number:	334-239-5033

Warden/Jail Administrator/Sheriff/Director

Name:	John Crow
Email Address:	john.crow@doc.alabama.gov
Telephone Number:	334-567-1460

Facility PREA Compliance Manager

Name:	Anthony Clark
Email Address:	anthony.clark@doc.alabama.gov
Telephone Number:	334-239-5033

Facility Health Service Administrator On-site

Name:	Sherie Williams
Email Address:	sherie.williams@yescarecorp.com
Telephone Number:	334-390-7018

Facility Characteristics

Designed facility capacity:	1176
Current population of facility:	1154
Average daily population for the past 12 months:	1154
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

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 https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18-78
Facility security levels/inmate custody levels:	medium 4
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	118
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	41
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	45

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

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

Agency-Wide PREA Coordinator Information			
Name:	Christy Slauson-Vincent	Email Address:	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:

2025-02-16

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

2025-02-18

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>a. Identify the community-based organization(s) or victim advocates with whom you communicated:</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>AUDITED FACILITY INFORMATION</p>	
<p>14. Designated facility capacity:</p>	<p>1176</p>
<p>15. Average daily population for the past 12 months:</p>	<p>1154</p>
<p>16. Number of inmate/resident/detainee housing units:</p>	<p>6</p>

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1154
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:	30
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:	1
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:	3
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:	0

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:	5
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:	1
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:	3
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:	23
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:	76
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:	0

<p>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):</p>	<p>The institutional inmate count on the first day of the on-site audit was 1,154. For a facility with a population of 1,154, 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"> 2 - transgender inmates 3 - Physically disabled inmates. 1 - Cognitively disabled inmates. 1 - hearing impaired inmates. 2 - visually impaired 2 - Inmates who disclosed abuse in screening. 3 - LEP inmates 5 - Reported abuse 1 - gay or bisexual inmates 0 - Inmates in segregation housing for PREA 0 - youthful offenders
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>118</p>
<p>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:</p>	<p>45</p>

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:	41
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:	The facility reports 45 volunteers and 41 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.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<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 1,154. In accordance with the PREA Auditor Handbook, a facility with a population of 1,154 requires the auditor to conduct a minimum of 20 random and 20 targeted inmate interviews.

A total of 20 random inmate interviews were conducted. These inmates were selected independently from those identified for targeted interviews. Using the facility's alphabetical housing unit rosters, the Auditor randomly selected inmates from various housing units, ensuring diversity across age, race, and ethnicity.

Throughout the on-site tour, the Auditor also engaged in informal conversations with inmates regarding sexual safety, including topics such as education, reporting mechanisms, communication, and facility responses. These informal interactions served to supplement the Auditor's broader information-gathering efforts.

The Auditor did not receive any letters from inmates in response to the audit notice posting.

At the start of each interview, the Auditor clearly explained the purpose of her visit, her role in the PREA audit process, and the voluntary nature of the interview. Inmates were informed that their participation was appreciated but not required. Each inmate was asked if they were willing to participate and, upon agreement, the Auditor proceeded with the protocol questions. All interview responses were documented on the standard interview form.

All 20 random inmates willingly participated in the interview process. No PREA-related concerns were disclosed during these interviews, and no additional protocol questions were needed. Every inmate interviewed affirmed their awareness of the facility's zero-tolerance policy toward sexual abuse and harassment, their knowledge of how to report incidents, their ability to report anonymously, and their 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 1,154. In accordance with the PREA Auditor Handbook, a facility with a population of 1,154 requires the auditor to conduct a minimum of 20 random and 20 targeted inmate interviews.

A total of 20 random inmate interviews were conducted. These inmates were selected independently from those identified for targeted interviews. Using the facility's alphabetical housing unit rosters, the Auditor randomly selected inmates from various housing units, ensuring diversity across age, race, and ethnicity.

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All 20 random inmates willingly participated in the interview process. No PREA-related concerns were disclosed during these interviews, and no additional protocol questions were needed. Every inmate interviewed affirmed their awareness of the facility's zero-tolerance policy toward sexual abuse and harassment, their knowledge of how to report incidents, their ability to report anonymously, and their right to be free from retaliation.

Targeted Inmate/Resident/Detainee Interviews

39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	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>	
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:	3
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:	1
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:	2
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:	1

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:	3
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:	1
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:	2
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:	5
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:	2
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:	0

49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
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).	The facility said no inmates fell into this category. Therefore, no one from this category was interviewed.
50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	<p>The institutional count on the first day of the on-site audit was 1,154. In accordance with the Auditor Handbook, a facility with this population size requires the auditor to interview a minimum of 20 targeted inmates. Accordingly, 20 targeted inmates were interviewed.</p> <p>The Auditor requested and received a roster of inmates who met the criteria for targeted interviews. From this list, the Auditor randomly selected inmates from each applicable category, ensuring diversity in both age and race. Once selected, each inmate was placed on the facility's "call-out" list and assigned a specific time to report to the private space designated for interviews.</p>
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
51. Enter the total number of RANDOM STAFF who were interviewed:	20

52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
53. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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):	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.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	21
56. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

58. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
59. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

63. Provide any additional comments regarding selecting or interviewing specialized staff.	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.
SITE REVIEW AND DOCUMENTATION SAMPLING	
Site Review	
<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>	
64. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<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).

Elmore Correctional Facility (ECF), established in 1981, is located in Elmore, Alabama, just north of Montgomery. Classified as a medium-custody institution, ECF offers a range of services and programs for inmates, including drug treatment classes, educational opportunities, mental health services, and self-help initiatives. Inmates also participate in work assignments within the facility's composting and recycling operations, which benefit the local community, and on Highway Squads operated by the Alabama Department of Transportation.

The facility comprises three open-bay dormitories, each divided into two sections, totaling six housing units. Each dormitory is equipped with a dedicated bathroom. ECF is in the process of installing privacy partitions in the communal showers to enhance inmate privacy; however, progress has been delayed due to national shipping and supply chain disruptions impacting material availability.

ECF does not contain individual cells. In addition to the housing units, the facility includes administrative offices, an inmate canteen, a leisure library, a law library, food service areas, a visitation area, a chapel, and a multipurpose building. Outdoor recreation opportunities include horseshoes, basketball, volleyball, weightlifting, and cornhole.

Laundry services are located outside the facility's secure perimeter and serve both ECF and other correctional institutions. A separate recycling building is also situated outside the secure perimeter.

Available inmate programs include, but are not limited to, academic education, substance abuse treatment, mental health services, self-help programs, and various work assignments such as composting, recycling, and highway maintenance.

During the facility tour, the auditor observed multiple PREA (Prison Rape Elimination Act) boxes strategically placed throughout the institution. These boxes were clearly labeled with bold "PREA" signage and secured with padlocks. The Institutional PREA Compliance

Manager (IPCM) reported that he checks the boxes daily as part of his routine facility rounds. PREA-related signage was prominently displayed in several areas, including the facility entrance, food service area, dormitories, and near inmate telephones. These boxes are intended to provide both inmates and staff with a confidential means to report PREA-related complaints or concerns

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.).

Inmate Records Review

A total of 50 inmate records were reviewed to assess compliance with PREA education requirements. Inmates were randomly selected from the facility's master roster, with efforts made to include individuals with varied arrival dates to ensure a comprehensive sample.

PREA Education at Intake: All 50 records included signed PREA General Information Forms, confirming that inmates received PREA education on the day of arrival.

Comprehensive PREA Education within 30 Days: Each of the 50 inmates received comprehensive PREA education within 30 days of arrival, as evidenced by signed Inmate Awareness Acknowledgment Forms. Additionally, 52 inmate records were reviewed for compliance with screening requirements related to risk of sexual victimization and abusiveness:

Initial Risk Screening: All 52 inmates received an initial screening on the day of arrival, as documented on completed screening forms.

30-Day Risk Reassessment: Each inmate also received a reassessment within 30 days of arrival, consistent with PREA Standard §115.41.

Allegations of Sexual Abuse and Sexual Harassment

According to the PAQ, the facility reported 71 allegations in the past 12 months—54 allegations of sexual abuse and 17 of sexual harassment.

A total of 16 investigative case files were reviewed using the PREA Audit Investigative Records Review Tool. This sample included 10 files from the first 20 cases reported, and 10% of the remaining cases. Each file was assessed for compliance with investigative protocols and contained information on:

- Case ID
- Date of Allegation
- Date of Investigation
- Type of Allegation (sexual abuse or

sexual harassment)

- Nature of Involvement (staff-on-inmate or inmate-on-inmate)
- Final Disposition and Justification
- Investigating Officer(s)
- Victim Notification of Outcome

Sexual Abuse Cases

All 54 allegations involved inmate-on-inmate sexual abuse.

Each case was investigated criminally by designated investigative staff.

Outcomes: 5 unfounded, 33 unsubstantiated, and 14 still under investigation at the time of the audit.

Prosecution was declined in all closed cases.

Medical and mental health services were offered to each alleged victim.

Retaliation monitoring was conducted for 90 days or until it was no longer deemed necessary (e.g., due to case closure, transfer, or release).

In all closed cases, written notification of the investigation outcome was provided to the alleged victim.

All substantiated and unsubstantiated (but not unfounded) cases underwent a Sexual Abuse Incident Review.

Sexual Harassment Cases

Of the 17 allegations, 15 involved inmate-on-inmate sexual harassment and were investigated administratively.

Outcomes: 14 unsubstantiated, 1 unfounded, and 1 under investigation.

Two staff-on-inmate allegations were also investigated administratively:

One was deemed unfounded, and one remained open at the time of the onsite audit.

In each resolved case, written notification of the investigative outcome was provided to the involved inmate.

Institutional Culture and Cooperation

Throughout the on-site audit, facility staff demonstrated a high degree of professionalism, cooperation, and engagement. Their responsiveness and

familiarity with PREA standards reflected a strong institutional culture committed to maintaining a safe, secure environment free from sexual abuse and sexual harassment

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
Inmate-on-inmate sexual abuse	52	52	0	0
Staff-on-inmate sexual abuse	2	2	0	0
Total	54	54	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
Inmate-on-inmate sexual harassment	15	0	15	0
Staff-on-inmate sexual harassment	2	0	2	0
Total	17	0	17	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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	14	0	0	0	0
Staff-on-inmate sexual abuse	1	0	0	0	0
Total	15	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	14	5	33	0
Staff-on-inmate sexual abuse	1	1	0	0
Total	15	6	33	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
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	14	0
Staff-on-inmate sexual harassment	1	1	0	0
Total	1	2	14	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:

13

79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	12
81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

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

1

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.

A total of 16 investigative case files were reviewed using the PREA Audit Investigative Records Review Tool. This sample included 10 files from the first 20 cases, and 10% of the remaining cases.

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 LLC

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

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

Institutional PREA Compliance Manager (IPCM):

The IPCM reported having sufficient time and authority to effectively perform all required PREA-related duties, including coordinating facility compliance efforts and implementing corrective actions when needed.

Agency PREA Director (PD):

The PD confirmed that she possesses the authority and resources necessary to oversee the agency's PREA compliance across all facilities. She also stated that the IPCMs' sole responsibility is to ensure institutional compliance with PREA standards and confirmed they have the authority to make changes necessary for compliance.

PROVISIONS

Provision (a):

The facility, as stated in the PAQ, has a comprehensive written policy enforcing zero tolerance toward all forms of sexual abuse and harassment, applicable to all facilities operated by or contracted with the agency.

ADOC Administrative Regulation (AR) #454 clearly outlines:

1. Prohibited behaviors related to sexual abuse and sexual harassment (Section III)
2. Definitions of substantiated, unsubstantiated, and unfounded allegations
3. Sanctions for policy violations
4. Staff responsibilities and procedures for prevention, detection, response, and investigation

These elements are also reinforced in the ADOC Male Inmate Handbook (2017). Policy language aligns with PREA standards and provides a structured approach to promoting sexual safety.

Provision (b):

According to the PAQ and supported by the organizational chart, the ADOC has appointed a statewide PREA Director (PD), who reports directly to the General Counsel.

AR #454 (Section E, pp. 7) establishes the PD's responsibilities, including:

1. Oversight and monitoring of PREA compliance
2. Coordination with facility leadership, Associate Commissioners, and Legal Division
3. Regular communication and site visits with all facilities

The PD is supported by 26 Institutional PREA Compliance Managers (IPCMs) and 26

	<p>back-up IPCMs, allowing effective statewide coverage and ensuring the PD has adequate time and resources to perform her duties.</p> <p>Provision (c):</p> <p>As reported in the PAQ, the facility has a designated PREA Compliance Manager (PCM), who reports to the PREA Director for PREA matters and to the Warden/ Superintendent for institutional oversight.</p> <p>AR #454 clearly defines:</p> <ol style="list-style-type: none"> 1. The PCM's roles and responsibilities 2. Coordination duties related to PREA compliance 3. Collaboration with institutional leadership <p>The policy aligns with PREA standards and confirms the PCM has the time, authority, and support to fulfill all responsibilities.</p> <p>CONCLUSION</p> <p>Based on the comprehensive review of documentation, interviews with key staff, and alignment with PREA standards, the auditor concludes that the agency/facility meets all requirements of PREA Standard §115.11 – Zero Tolerance of Sexual Abuse and Sexual Harassment; PREA Coordinator.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTS</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire • ADOC Administrative Regulation (AR) #454, titled Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Contract with the Alabama Therapeutic Education Facility (ATEF). <p>INTERVIEW</p> <p>Agency Contract Administrator</p> <p>During the interview, the Agency Contract Administrator clarified that PREA compliance is a prerequisite for contract execution. The administrator confirmed that all contracts for inmate confinement contain specific language obligating the contractor to comply with PREA standards. Entities that are not PREA-compliant are</p>

not considered for contractual agreements. Additionally, it was noted that both private and county entities contracting with ADOC are subject to this requirement.

PROVISIONS

Provision (a):

The Pre-Audit Questionnaire (PAQ) confirmed that there is one contract currently in place for the confinement of Alabama Department of Corrections (ADOC) inmates. The contract is between ADOC and the Alabama Therapeutic Education Facility (ATEF).

The Alabama Department of Corrections mandates that all contracts for the confinement of inmates include specific language requiring full compliance with the Prison Rape Elimination Act (PREA) standards. This requirement is articulated in ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016. Specifically, Section D on page 7 of AR #454 assigns the ADOC General Counsel the responsibility to ensure that all contracts for inmate confinement include a provision notifying the contracting entity of its obligation to comply with PREA standards and ADOC's role in monitoring such compliance.

The ADOC Inmate Housing Agreement with ATEF incorporates clear language that mandates compliance with PREA. The agreement states, "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."

The ADOC Contract with ATEF further reinforces this obligation, stating:

"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). The ADOC has a Zero Tolerance Policy toward all forms of custodial sexual misconduct, sexual abuse, and sexual harassment. See Administrative Regulation 454, Inmate Sexual Assault and Harassment Awareness (PREA). Any type of conduct – including suspected conduct – that falls within the context of custodial sexual misconduct/sexual abuse... shall be reported immediately... to the ADOC's PREA Director or designated PREA Contract Monitor. 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."

During the interview with the Agency Contract Administrator, it was confirmed that all contracts with private or county entities include explicit language outlining the contractor's obligation to comply with PREA prior to execution. Contracts are not finalized unless this PREA compliance language is included.

Provision (b):

	<p>According to the PAQ and corroborated through interviews and documentation, the ADOC actively monitors contractors for compliance with PREA standards. The facility reported that all contracts for the confinement of inmates include a requirement for ADOC to monitor contractor adherence to PREA, and there are no contracts under this standard that lack such oversight requirements.</p> <p>The Agency Contract Administrator further clarified that the agency conducts a thorough review of contractor policies and procedures to ensure alignment with national PREA standards. Contractors are required to promptly report any PREA-related allegations, including the outcomes of any investigations, to the ADOC PREA Director. This reporting requirement ensures that the ADOC maintains continuous oversight and can respond appropriately to any incidents involving contracted facilities.</p> <p>CONCLUSION</p> <p>Based on a comprehensive review of the Pre-Audit Questionnaire, contractual documents, ADOC policy (AR #454), and interviews with the Agency Contract Administrator, the Auditor concludes that the agency meets all requirements of Standard §115.12. The ADOC ensures that all contracts for inmate confinement include PREA-specific language and maintains a robust monitoring system to ensure contractor compliance with PREA standards.</p>
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115.13	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 3. ADOC Form 454-J – Annual PREA Staffing Plan Review 4. ADOC Form 454-G – Log of Unannounced Rounds 5. Copies of Deviation Logs 6. Facility Blueprint/Layout 7. Facility Vulnerability Assessment Form 8. Facility Staffing Plan Checklist 9. Facility Staffing Plan (Approved December 11, 2024) <p>OBSERVATIONS</p> <p>During the on-site audit, the Auditor conducted a random review of unit logbooks. This review confirmed that intermediate- and higher-level staff consistently document</p>

their unannounced rounds in accordance with policy. Logbook entries reflected regular supervisory presence across all shifts.

INTERVIEWS

Facility Head or Designee

The Facility Head discussed several operational elements critical to maintaining facility safety, including:

1. The impact of staffing levels on inmate programming and rehabilitation opportunities;
2. The importance of video monitoring systems in supporting safety and surveillance;
3. The role of the physical plant layout in movement control and operational flow;
4. Oversight responsibilities of internal and external bodies;
5. Inmate composition considerations (custody levels, behavioral history, special needs);
6. Strategic supervisory staff deployment;
7. The importance of supporting line staff through morale, communication, and training;
8. The regular review and adjustment of the staffing plan to ensure continued effectiveness.

Institutional PREA Compliance Manager (IPCM)

The IPCM emphasized ongoing evaluation of staffing levels and their direct impact on programming and inmate assignments. Regular assessments of the video monitoring system are conducted, with deficiencies promptly addressed. The IPCM stressed the importance of sustaining a safe environment through adequate staffing and monitoring technologies.

Intermediate- or Higher-Level Staff

Supervisory staff confirmed during interviews that unannounced rounds are conducted and documented routinely across all shifts. These statements were supported by documentation and verified through logbook reviews. Line staff also affirmed that unannounced rounds are standard practice and occur without forewarning.

Random Staff

Randomly selected staff reported frequent supervisory rounds during each shift. Supervisors were described as accessible, engaged, and diligent in reviewing and signing unit logbooks. Staff demonstrated knowledge of the policy prohibiting alerts about supervisory rounds, ensuring compliance with unannounced practices.

Random Inmates

Inmates reported regular interactions with supervisory staff and the IPCM. They confirmed visibility of supervisory personnel within housing and common areas, noting that these individuals were approachable and responsive to concerns.

PROVISIONS

Provision (a):

The facility has submitted a comprehensive staffing plan that addresses all 13 required elements under this provision. The average daily population of 1,154 inmates over the past 12 months was confirmed by the Facility Head.

The staffing plan includes:

1. Generally accepted correctional practices;
2. Staff responsibility designations (facility, ADOC, outside agencies);
3. Findings from internal/external oversight;
4. Facility design and camera coverage;
5. Inmate population characteristics;
6. Supervisory staff placement;
7. Institutional programming and inmate supervision;
8. Relief factors;
9. Legal/regulatory requirements;
10. Sexual abuse and harassment incident data.

Relevant Policy:

ADOC AR #454 (Jan 4, 2016), p.14, D.1-2: Mandates Warden participation in plan development and annual reviews with the PREA Director. These are documented via ADOC Form 454-J.

Provision (b):

Deviations from the staffing plan are documented and addressed through overtime or staff reassignment. The facility maintains procedures to ensure all mandatory posts are staffed. The most common reasons for deviations include:

1. Staff shortages
2. Call-ins
3. Hospital posts
4. Transport needs

The PAQ and deviation logs reflect these occurrences. Despite deviations, inmate programming has not been disrupted due to staffing issues.

Provision (c): Annual Staffing Plan Review

The staffing plan undergoes an annual review involving the Facility Head, PREA Director, IPCM, and Captain. This review assesses the need for:

	<ol style="list-style-type: none"> 1. Staffing plan updates; 2. Monitoring technology improvements; 3. Resource reallocations. <p>The most recent review and supporting documentation (e.g., ADOC Form 454-J, 2020) were provided and verified by the Auditor. An internal audit ensures comprehensive assessment of facility coverage, including recommendations for added staff or camera equipment.</p> <p>Provision (d):</p> <p>Intermediate- and higher-level supervisors conduct and document unannounced rounds on all shifts. These are recorded in both shift reports and the ADOC Form 454-G, which includes the required PREA Hotline checks. Thirty days of log entries were reviewed and confirmed by the Auditor.</p> <p>Staff are explicitly prohibited from alerting others about these rounds, as reinforced by ADOC AR #454 (p.14, C). Interviews and log reviews confirmed policy adherence.</p> <p>CONCLUSION</p> <p>Based on the comprehensive review of policies, documentation, interviews, and facility observations, the Auditor finds that the facility meets all provisions of Standard §115.13 – Supervision and Monitoring.</p>
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115.14 Youthful inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTS:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016. <p>OBSERVATIONS:</p> <p>During the on-site facility tour, the Auditor observed no youthful inmates housed at the facility. Housing units, program areas, and other common spaces reflected adult occupancy only.</p> <p>INTERVIEWS:</p> <p>Facility Head:</p>

Through formal interviews and informal conversations, the Facility Head confirmed that youthful inmates may be housed at the facility under exceptional circumstances and on a case-by-case basis. However, no youthful inmates were housed at the time of the audit.

Institutional PREA Compliance Manager (IPCM):

The IPCM reaffirmed that while the facility has the capacity and procedures in place to house youthful inmates, there were no such individuals assigned to the facility during the audit period.

Youthful Inmates:

As no youthful inmates were housed at the facility during the on-site audit, no interviews were conducted in this category.

PROVISIONS:

Provision (a):

According to the PAQ and verified through inmate rosters, the facility did not house any youthful inmates at the time of the audit. The Auditor reviewed the age data and confirmed that no inmates had birthdates later than 2006, validating that no individuals under the age of 18 were in custody during the audit.

Provision (b):

Per the PAQ and corroborated through staff interviews, the facility maintains procedures to ensure that youthful inmates, when present, are housed in a manner that provides for sight, sound, and physical separation from adult inmates in areas outside of housing units. Direct staff supervision is provided at all times in situations where youthful and adult inmates may otherwise have visual, auditory, or physical contact.

Provision (c):

The facility has protocols for documenting exigent circumstances if a youthful inmate is restricted from large-muscle exercise, legally mandated education, or other required services due to separation needs. Within the 12-month period preceding the audit, there was one documented instance where a youthful inmate was temporarily housed in isolation to ensure separation from adult inmates. Documentation reflected that this measure was taken only to maintain compliance with the standard and was not used as a form of punishment.

CONCLUSIONS:

Based on the Auditor's review of the PAQ, facility policies, staff interviews, documentation, and direct observations, the facility demonstrates full compliance with Standard §115.14 governing the treatment and housing of youthful inmates. Appropriate safeguards are in place to ensure separation from adult inmates and to protect youthful offenders from harm, consistent with PREA requirements.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • ADOC Administrative Regulation (AR) #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • ADOC Administrative Regulation (AR) #336, Searches, dated February 8, 2016 • ADOC Form 302-A, Incident Report • Training records related to cross-gender and transgender/intersex search procedures • Transgender Inmate Search Preferences Form <p>OBSERVATIONS</p> <p>During the on-site tour, the Auditor observed that opposite-sex staff consistently announced their presence upon entering inmate housing units, in accordance with policy. The facility houses both cisgender male and transgender female inmates, confirming the relevance of this standard to its operations.</p> <p>INTERVIEWS</p> <p>Non-Medical Staff:</p> <p>Interviews confirmed that non-medical staff do not conduct cross-gender strip or visual body cavity searches. In rare exigent circumstances, such searches would only be conducted by medical personnel, with prior authorization from the Facility Head and proper documentation.</p> <p>Random Staff</p> <p>Twenty randomly selected staff were formally interviewed, supplemented by additional informal discussions. Key findings include:</p> <ol style="list-style-type: none"> 1. All staff received training on cross-gender and transgender/intersex search procedures during In-Service Training. 2. No staff reported ever conducting or witnessing a cross-gender strip or visual body cavity search. 3. Adequate numbers of male staff are available to conduct searches on male inmates, removing the need for cross-gender scenarios. 4. Female staff do not perform strip or visual body cavity searches. 5. Staff consistently acknowledged that transgender or intersex inmates are not searched for the purpose of determining genital status. 6. Staff indicated that transgender and intersex inmates are afforded privacy when showering, including alternative shower schedules when individual stalls

are not available.

Random Inmate

All interviewed inmates (100%) stated:

1. They had not been subjected to cross-gender strip or visual body cavity searches.
2. They are able to shower and change clothing without being viewed by staff of the opposite gender.
3. Opposite-gender staff always announce their presence before entering housing or restroom areas.

Transgender Inmate

All interviewed transgender inmates (100%) stated:

1. They were satisfied with the showering accommodations
2. They were satisfied with the facility's search practices
3. They had never been searched for the sole purpose of determining their genital status.

PROVISIONS

Provision (a):

The facility does not conduct cross-gender strip or visual body cavity searches. This was verified through the PAQ, review of incident reports, and staff interviews. Documentation, including training records and search preference forms, confirms staff awareness and proper adherence to policy. Relevant policies include:

AR #454 (p. 14, Section E.1) – Prohibits such searches except in exigent circumstances or when conducted by medical staff.

AR #336 (pp. 4-5, Sections F.3 & F.4) – Requires documentation and limits such searches to exigent situations.

Provision (b):

The facility houses only male inmates. No female inmates are present at this location.

Provision (c):

In exigent circumstances, cross-gender strip or visual body cavity searches are permitted only with prior authorization from the Facility Head and must be performed by medical staff. These incidents are documented using ADOC Form 302-A. Relevant policies include:

AR #336 (p. 5, No. 4; p. 6, No. 11) – Outlines procedural and documentation requirements.

	<p>Provision (d):</p> <p>Facility practices ensure inmates can perform bodily functions, shower, and change clothes without being viewed by opposite-gender staff, except in exigent situations or during routine checks when incidental viewing may occur. Auditor observations and inmate interviews confirmed consistent announcements by opposite-gender staff. Relevant policy:</p> <p>AR #454 (p. 14, Section E.3) – Mandates privacy measures and staff announcements.</p> <p>Provision (e):</p> <p>Staff are prohibited from conducting searches of transgender or intersex inmates solely to determine genital status. This policy was clearly understood and articulated by staff during interviews. Relevant policies include:</p> <p>AR #336 (p. 5, No. 6) AR #454 (p. 15, Section E.4)</p> <p>Provision (f):</p> <p>Training records confirm that staff have received instruction on conducting respectful and appropriate searches of transgender and intersex individuals, as well as procedures for cross-gender searches. Acknowledgment forms signed by staff and verified against the facility roster confirmed compliance. Training content emphasized professionalism, dignity, and adherence to PREA standards.</p> <p>CONCLUSION</p> <p>Following a thorough review of facility documentation, direct observations, and comprehensive staff and inmate interviews, the Auditor finds the facility fully compliant with PREA Standard §115.15. Policies, training, and practices are effectively implemented to ensure cross-gender searches are minimized, properly documented when necessary, and conducted in a manner that respects the privacy and dignity of all inmates.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <p>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</p>

2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal: Inmate Sexual Abuse and Harassment, dated January 4, 2016
3. Memorandum of Understanding (MOU) between ADOC and the Alabama Institute for the Deaf and Blind
4. Inmate PREA Acknowledgment Forms, specifically tailored for inmates who are disabled, have low vision, or are deaf
5. Materials and resources designed for low-functioning individuals
6. Memorandum outlining the availability and use of Google Translate for language translation needs

OBSERVATIONS

During the on-site tour, the Auditor observed PREA-related postings prominently displayed in both English and Spanish throughout the facility, including in housing units, work areas, hallways, visitation rooms, and other communal locations. The Auditor also reviewed printed PREA materials, educational brochures, and training resources, all available in both English and Spanish. Additionally, the Institutional PREA Compliance Manager (IPCM) has established PREA bulletin boards across the facility, promoting sexual safety awareness and outlining reporting procedures.

INTERVIEWS

Facility Head

The Facility Head confirmed that established procedures are in place to ensure inmates with disabilities and those who are Limited English Proficient (LEP) have meaningful access to all aspects of the PREA program. This includes the use of professional interpreters, alternative accessible formats, and written communications designed to facilitate understanding and participation.

Random Staff

Interviews with randomly selected staff confirmed a clear understanding of the policy prohibiting the use of inmate interpreters, readers, or assistants when LEP or disabled inmates report sexual abuse or harassment. Staff uniformly reported they had never witnessed or participated in any violations of this policy.

Inmates with Disabilities and LEP Inmates

Interviews with these populations consistently reflected a clear understanding of their PREA rights and how to report incidents of sexual abuse or harassment. All inmates interviewed reported feeling safe and supported by the facility in consideration of their disabilities or language needs. When asked:

“Do you understand your rights related to sexual abuse and how to report sexual abuse or harassment?” – 100% responded affirmatively.

“Do you feel the facility does everything it can to assist you in feeling less vulnerable

and safer in light of your disability?” – 100% responded affirmatively.
“Can you think of anything the facility could do to assist you better in light of your disability?” – All respondents expressed satisfaction with the current supports and resources in place.

PROVISIONS

Provision (a):

The facility reported in the PAQ, and the audit confirmed through documentation and interviews, that procedures are in place to ensure inmates with disabilities and LEP inmates have equal access to PREA protections. Notable practices include:

1. Access to professional interpretation services via an MOU with the Alabama Institute for the Deaf and Blind
2. 24/7 availability of Google Translate, facilitated by the watch commander, for real-time language support
3. Written PREA materials and educational handouts provided in both English and Spanish

ADOC AR #454 (p. 13, B.1.c) requires that PREA education be accessible in formats accommodating language barriers, cognitive disabilities, and sensory impairments

Provision (b):

The facility has implemented a comprehensive range of resources and accommodations to ensure effective communication for LEP and disabled inmates:

PREA materials and videos available in English and Spanish, with closed-captioning included

Visual and auditory formats for individuals with hearing or visual impairments

Simplified content, read-aloud options, and video explanations for inmates with cognitive disabilities or limited literacy

Oversight by an ADA Coordinator to ensure materials are appropriately adapted and staff are trained to support special needs populations

Relevant policy references:

ADOC AR #454 (p. 13, B.1 a-d) mandates accessible information for all inmates

ADOC AR #454 (p. 13, B.2 a-d) outlines required education on prevention, protection, reporting, and treatment

Provision (c):

The facility reported—and the audit confirmed—that no inmate interpreters, readers, or assistants were used in any PREA-related communication over the past 12 months. This practice is consistent 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>CONCLUSION</p> <p>Based on the review of the PAQ, supporting documentation, facility observations, and interviews with staff and inmates, the Auditor finds the facility to be in full compliance with Standard §115.16. The facility demonstrates a strong commitment to ensuring that all inmates, regardless of disability or language proficiency, have equal access to PREA-related information, education, and reporting mechanisms</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation (AR) #454 - Inmate Sexual Abuse and Harassment (Dated January 4, 2016) 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) <p>INTERVIEWS</p> <p>Human Resources Administrative Staff</p> <p>The Auditor interviewed the Human Resources Director, who provided comprehensive details regarding hiring and promotional practices, background investigations, and PREA compliance efforts. Key takeaways from the interview included:</p> <ol style="list-style-type: none"> 1. Background Checks: Anew hires, promotions, and current employees undergo criminal background checks, with rechecks conducted at a minimum every five years. A centralized database maintained by the Divisional HR Office ensures timely compliance. 2. Personnel Documentation: HR verifies that all new hires complete required disclosures regarding past sexual misconduct. Structured procedures are in place to ensure all hiring and promotion decisions comply with PREA standards. 3. Employee Reporting Requirements: Employees are required to report any arrest activity. Additionally, the ADOC shares information about substantiated allegations of sexual abuse or harassment with institutional employers, when legally permissible.

PROVISIONS

Provision (a):

The facility employs 118 staff members, including 23 new hires in the past 12 months. Additionally, 41 contractors and 45 volunteers have contact with inmates. The Auditor reviewed a random sample of personnel records, all of which contained the required documentation, including completed criminal background checks and PREA-related disclosures.

In accordance with ADOC AR #454, Section V, A, 4(a), the Department prohibits the hiring or promotion of any individual who has:

1. Engaged in sexual abuse in a custodial setting;
2. Been convicted of engaging or attempting to engage in sexual activity through force, threats, or coercion; or
3. Been subject to a civil or administrative finding of such conduct.

Provision (b):

Hiring, promotion, and contractor decisions consider substantiated incidents of sexual abuse or harassment. This was confirmed through documentation in the PAQ and staff interviews. AR #216, Section V, B, outlines the requirement to evaluate these factors prior to employment or contracting.

Provision (c):

Prior to hiring, the facility conducts criminal background checks and makes efforts to contact previous institutional employers to inquire about substantiated allegations or resignations during an investigation into sexual abuse. The Auditor verified that all 23 hires made in the previous year underwent these checks. Compliance was confirmed through interview responses and document review.

Provision (d):

All contractors who may have contact with inmates undergo a criminal background check before engaging in services and at least every five years thereafter. Documentation and interviews confirmed the facility complies with this requirement. One active service contract was subject to these checks.

Provision (e):

Current employees and contractors undergo criminal background checks at least every five years. This practice was verified through documentation and interviews. ADOC AR #454, Section V, A, 4(f) governs this requirement.

Provision (f):

During the hiring and promotion process, and annually thereafter, applicants and employees are required to answer PREA-related questions in writing. The Auditor

	<p>reviewed completed disclosure forms, including Form ADOC 216-B, which contains specific questions regarding previous sexual misconduct. These disclosures are signed by employees and maintained by HR.</p> <p>Provision (g):</p> <p>The facility mandates termination or disqualification of employment for any individual who knowingly provides false information or omits material facts related to sexual misconduct. This policy is supported by ADOC AR #454, Section V, A, 4(b)(2) and was confirmed during interviews.</p> <p>Provision (h):</p> <p>Unless prohibited by law, ADOC provides information upon request to institutional employers about substantiated allegations involving former employees. This practice was confirmed through interviews and supported by written policy.</p> <p>CONCLUSION</p> <p>Based on a comprehensive review of documentation, personnel records, and interviews with Human Resources staff, the Auditor concludes that the facility is in full compliance with PREA Standard §115.17 – Hiring and Promotion Decisions.</p>
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115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454 – Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. Facility Schematic – A detailed blueprint and layout of the facility, used to assess camera coverage and identify potential blind spots <p>OBSERVATIONS:</p> <p>The Auditor conducted a comprehensive on-site tour of the facility. Based on direct observations, there have been no substantial additions or structural changes to the facility since the last PREA audit.</p> <p>During the tour, the Facility Head emphasized the strategic use of security cameras and mirrors to enhance safety for both inmates and staff. Cameras are positioned to provide broad surveillance coverage, especially in areas identified as high-risk for</p>

	<p>sexual abuse or harassment. Security mirrors are also employed to minimize blind spots and increase visibility in vulnerable areas.</p> <p>INTERVIEWS:</p> <p>Agency Head or Designee:</p> <p>The Agency Head's Designee outlined the agency's strategic approach to surveillance enhancements. Key priorities include minimizing blind spots and ensuring that camera placements respect inmate privacy by avoiding cross-gender viewing, in full compliance with PREA standards.</p> <p>Facility Head or Designee:</p> <p>The Facility Head described ongoing efforts to improve facility safety through technology. Notable points included:</p> <ul style="list-style-type: none"> • A long-term objective to achieve comprehensive camera coverage throughout the facility. • Plans to expand surveillance in areas deemed vulnerable or insufficiently monitored. • The monitoring system is actively maintained, with continuous access to both live and recorded footage, supporting both real-time oversight and post-incident review. <p>PROVISIONS:</p> <p>Provision (a):</p> <p>The PAQ confirms that there have been no newly acquired facilities or significant physical modifications to the existing facility since the previous audit.</p> <p>Provision (b):</p> <p>The PAQ indicates that enhancements have been made to the facility's video monitoring and surveillance systems. Executive leadership affirmed that these upgrades are a central component of the facility's comprehensive efforts to prevent sexual abuse and promote safety.</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, the facility is found to be in full compliance with PREA Standard §115.18</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard

Auditor Discussion

DOCUMENTATION

1. Pre-Audit Questionnaire (PAQ)
2. Alabama Department of Corrections (ADOC) Administrative Regulation (AR) #454, Operations & Legal, 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 Training Certificates for Investigators
7. Regional List of SANE Centers and Rape Crisis Centers

INTERVIEWS

PREA Director (PD):

The PREA Director confirmed the agency adheres to a uniform evidence protocol aimed at maximizing the collection of usable physical evidence for both administrative and criminal investigations. This protocol is developmentally appropriate for youth and aligns with national forensic standards. The Director affirmed that the facility conducts both administrative and criminal investigations regarding allegations of sexual abuse.

Institutional PREA Compliance Manager (IPCM):

The IPCM highlighted the following:

- Advocacy Services: Victim advocacy is available through specially trained facility staff.
- Forensic Examination Agreement: ADOC maintains an MOU with ACAR to provide forensic exams and confidential support services at 28 rape crisis centers statewide.
- Examination Location: Forensic exams are conducted at One Place Family Justice Center, which has a designated SANE examination room.
- Exam Frequency: 34 forensic examinations were conducted in the past year.

SAFE/SANE Staff:

SAFE/SANE personnel detailed the following:

- SART Utilization: One Place Family Justice is the designated provider for forensic examinations.
- Service Agreement: SANE services are coordinated through ACAR, in partnership with ADOC.

- SANE Call List: Personnel are called from a designated list and report to the facility.
- No Cost to Inmates: Inmates are not financially responsible for forensic exams.

Random Staff:

All interviewed staff demonstrated a thorough understanding of procedures in response to reports of sexual abuse. Key points:

- Evidence Preservation: 100% of staff accurately described how to preserve evidence for both the alleged victim and abuser.
- Case Transfer: Staff understood their responsibilities and when to refer cases to investigative or medical personnel.

Inmates Who Reported Sexual Abuse:

Inmates interviewed shared consistent feedback:

- Staff responded appropriately to abuse reports.
- Timely referral for forensic exams was made when appropriate.
- Victim advocates were provided and were present during exams.
- No costs were incurred for medical treatment related to the exam.
- No polygraphs were required.
- Written notification of investigative outcomes was received.

Rape Crisis Center:

Personnel shared the following:

- MOU with ADOC: ACAR partners with ADOC to provide SANE services, emotional support, and a 24-hour hotline.
- Service Provider: Services are offered through One Place Family Justice Center, 530 S. Lawrence Street, Montgomery, AL 36104.

PROVISIONS

Provision (a):

The PAQ confirms that the facility conducts administrative and criminal investigations into all allegations of sexual abuse, including inmate-on-inmate and staff misconduct. Thirty-seven ADOC investigators are assigned for these cases, with IPCMs assisting in inmate-on-inmate harassment cases.

Policy Reference: ADOC AR #300 (April 18, 2016), Section II, mandates impartial, confidential investigations that protect individual rights.

Provision (b):

The PAQ indicated no youthful inmates were housed at the facility. The auditor reviewed the roster and confirmed no inmates born after 2006 were present. Despite this, the facility confirmed the evidence protocol remains developmentally appropriate for youth.

- One Place Family Justice Center offers 24/7 forensic services by SANE nurses. Exams are free and covered by the Alabama Crime Victim
- Compensation Fund. A victim advocate is assigned prior to each forensic exam.
- 34 forensic exams were performed in the last 12 months, verified by the IPCM.

Provision (c):

All victims of sexual abuse have access to forensic medical examinations at no cost. SANE personnel conduct these exams, and in their absence, an ER physician may be utilized.

34 exams conducted in the last year, all by SANE professionals.

One Place Family Justice Center has on-call SANE staff and dedicated exam space. Victim advocates support victims throughout the forensic process.

Policy Reference: ADOC AR #454 (January 4, 2016), Section G.3.c, states that treatment is provided at no cost, regardless of cooperation with investigations.

Provision (d):

Victim advocates are provided during all forensic medical examinations, in accordance with the MOU with ACAR.

PAQ Data: 69 sexual abuse/harassment allegations and 34 forensic exams were recorded in the past year.

Provision (e):

Victim advocacy services are available upon request and may include a qualified facility staff member or a community-based advocate. Services include emotional support, crisis intervention, and referrals. Verified by the IPCM.

Provision (f):

Reiterated from Provision (a): The facility is responsible for conducting both administrative and criminal investigations.

Provision (g):

Not applicable. Auditors are not required to assess this provision.

Provision (h):

As outlined in Provision (d), victim advocacy services are integrated into the forensic exam process via the existing service agreement.

	<p>CONCLUSION</p> <p>Based on the thorough review and analysis of documentation, interviews, and the PAQ, the Auditor concludes that the agency/facility meets all provisions of the standard regarding evidence protocols and forensic medical examinations.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION REVIEWED</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment 3. ADOC Standard Operating Procedure – Investigations & Intelligence #454 4. ADOC Administrative Regulation #300 – Operations 5. ADOC Duty Officer Report (DOR) 6. National Institute of Corrections (NIC) Investigations Course Certificates & Continuing Education Credits <p>INTERVIEWS</p> <p>Agency Head or Designee</p> <p>The Agency Head’s designee affirmed that the Alabama Department of Corrections (ADOC) treats every allegation of sexual abuse and harassment with the utmost seriousness. All allegations, whether administrative or criminal in nature, are investigated promptly and thoroughly by the agency. The ADOC does not rely on external agencies to conduct these investigations. Policies governing the referral and investigation of allegations are publicly available on the ADOC website. All criminal referrals are formally documented and tracked.</p> <p>Investigative Staff</p> <p>Investigative staff confirmed that both administrative and criminal allegations are handled by trained ADOC personnel. The ADOC Law Enforcement Services Division (LESD) is solely responsible for conducting all investigations. Staff emphasized that criminal referrals are made as appropriate when allegations are substantiated.</p> <p>STANDARD PROVISIONS</p> <p>Provision (a):</p> <p>All investigations are referred to and conducted by the ADOC Law Enforcement</p>

Services Division (LESD), which, according to the PAQ, is comprised of 32 trained investigators. Documentation confirms that all LESD personnel have completed specialized investigative training through the National Institute of Corrections (NIC).

Within the past 12 months, the PAQ reflects:

54 allegations of sexual abuse

15 allegations of sexual harassment

34 forensic medical examinations conducted

All forensic examinations were performed by certified SAFE/SANE professionals at One Place Family Justice Center in Montgomery, AL.

ADOC Administrative Regulation #454 (p. 22, Section I, 1, b) designates LESD as responsible for conducting prompt, thorough, and objective investigations, regardless of whether the allegation results in criminal prosecution or involves an employee who is no longer with the agency. Substantiated criminal allegations are referred to the appropriate District Attorney's office, with LESD investigators available to support prosecution efforts as needed.

Provision (b):

Agency policy ensures that all allegations of sexual abuse and harassment are investigated by individuals with the legal authority to do so.

- All 54 allegations of sexual abuse were referred for criminal investigation.
- All 15 allegations of sexual harassment were investigated administratively.

LESD investigators are sworn peace officers with full authority to conduct these investigations. The ADOC Duty Officer Report (DOR) is used to document allegations and initiate investigative procedures.

In accordance with ADOC Administrative Regulation #454 (p. 7, Section C, 5), LESD is also responsible for notifying the alleged victim of the outcome of the investigation—whether the case is substantiated, unsubstantiated, or unfounded.

Provision (c):

As previously described, all investigations are conducted by the ADOC Law Enforcement Services Division (LESD), meeting the requirement of this provision.

Provisions (d) and (e):

These provisions are not applicable to this audit and are therefore not evaluated.

CONCLUSION

Based on the review of agency documentation, staff interviews, and an evaluation of investigative practices, the auditor concludes that the agency meets the requirements of PREA Standard §115.22 – Referral of Allegations for Investigations. The ADOC has demonstrated a consistent, well-documented, and policy-driven process for referring and thoroughly investigating all allegations of sexual abuse and

	harassment, in alignment with federal PREA standards and departmental regulation
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Pre-Audit Questionnaire (PAQ) and Supporting Documentation Reviewed:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. ADOC Administrative Regulation #454 3. PREA Training Curricula 4. What Staff Should Know About Sexual Misconduct with Inmates Pamphlet 5. Annual Staff Training Records 6. PREA Test Materials 7. PREA Information Board Content 8. IPCM Training Documentation 9. Staff Training Meeting Sign-In Sheets and Signature Pages <p>OBSERVATIONS:</p> <p>During the on-site facility tour, the Auditor observed a prominently displayed PREA bulletin board. This board included a variety of information related to PREA standards, such as key terminology, methods for reporting sexual abuse or harassment, the agency's zero tolerance policy, the inmate's right to be free from sexual abuse and sexual harassment, and the inmate reporting number (#6611).</p> <p>INTERVIEWS:</p> <p>Random Staff Interviews:</p> <p>Facility staff consistently reported:</p> <ol style="list-style-type: none"> 1. Receiving comprehensive PREA training during their initial orientation, prior to any inmate contact. 2. Completing annual in-service PREA training as well as additional training during shift briefings. 3. Being trained in the ten core elements required by the PREA standard. <p>PROVISIONS:</p> <p>Provision (a):</p> <p>The PAQ confirms that all employees with potential inmate contact receive training in</p>

the following areas:

1. ADOC's zero tolerance policy for sexual abuse and sexual harassment.
2. Responsibilities for prevention, detection, reporting, and response to such incidents.
3. Inmates' rights to be free from sexual abuse and harassment.
4. Protections from retaliation for both inmates and staff who report sexual abuse or harassment.
5. The dynamics of sexual abuse and harassment within confinement settings.
6. Common reactions of sexual abuse and harassment victims.
7. How to identify and respond to signs of threatened or actual abuse.
8. Avoidance of inappropriate relationships with inmates.
9. Professional communication with inmates, including those who identify as LGBTI or gender nonconforming.
10. Compliance with relevant mandatory reporting laws.

All interviewed staff (100%) confirmed receiving training on these ten required elements.

The Auditor reviewed the agency's PREA training curriculum, which is structured to address each of the ten elements in depth. Training materials are tailored by staff classification, with specialized content based on job roles. Numbered elements within the curriculum support staff retention and understanding.

The Auditor reviewed 118 staff training files, each containing documentation confirming compliance with initial PREA training requirements. Attendance sheets for the most recent annual training were also verified, and all included staff signatures acknowledging training completion.

Policy guidance for this provision is located in ADOC Administrative Regulation #454, Section V, A, 1 (dated January 4, 2016). It mandates initial, annual, and refresher training for employees, with documented verification through signed training records. Refresher training is required at least every two years.

Training materials developed by The Moss Group were reviewed. These include the ten required elements and use a trauma-informed approach. Specialized training modules are provided according to staff responsibilities.

Provision (b):

Training provided by ADOC addresses dynamics specific to both male and female facilities, with content tailored to the needs of the female inmate population at this facility. The training materials were reviewed and found to align with the PREA standard. Staff attendance was confirmed through signed training sheets, as referenced in Provision (a).

Provision (c):

Of the 118 staff records reviewed, all (100%) included documentation of completed PREA training within the past twelve months.

	<p>Additional training resources include:</p> <p>A pamphlet titled "PREA: What Staff Should Know About Sexual Misconduct with Inmates", which outlines key definitions and components of the PREA standard.</p> <p>A laminated, pocket-sized spiral guide titled "Prison Rape Elimination Act (PREA): A Trauma-Informed Guide for First Responders," which includes seven key sections:</p> <ul style="list-style-type: none"> • Introduction to PREA • Definitions • Core Components • Prevention • Detection • Response • Summary & Resources <p>Provision (d):</p> <p>All PREA-related training is documented through employee signatures. In some instances, staff complete a formal Acknowledgment of Receipt of Training. In other cases, training is verified via sign-in sheets. The Auditor reviewed training records from the past twelve months and found consistent evidence of training completion for all staff.</p> <p>CONCLUSION:</p> <p>Based on a thorough review of the PAQ, policies, training materials, staff interviews, and documentation—including 178 staff training records—the Auditor concludes that the agency/facility is in full compliance with PREA Standard §115.31 related to employee training.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 - Inmate Sexual Abuse and Harassment 3. ADOC Administrative Regulation #216 - Volunteer Services 4. Volunteer Training Records 5. Contractor Training Records 6. Training Curricula for Volunteers and Contractors

Policy Review

- ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment
- Page 11, Section K(8): Assigns the Institutional PREA Compliance Manager (IPCM) responsibility for ensuring all volunteers and contractors are trained appropriately.
- Page 11, Section M: Mandates that employees, contractors, and volunteers comply with all policies concerning sexual abuse, harassment, and custodial sexual misconduct.
- ADOC Administrative Regulation #216 – Volunteer Services
Details processes for volunteer onboarding, including mandatory PREA training as a prerequisite for approval.

Training Documentation Reviewed

1. Volunteer and Contractor Training Curricula: Developed with The Moss Group, the curriculum addresses all ten elements required by the standard. Content is tailored to the specific duties and levels of inmate interaction.
2. Volunteer and Contractor Training Records: The Auditor reviewed training records for all 45 volunteers and contractors. Each record included documentation of training completion, with sign-in sheets and signed acknowledgment forms on file.

Training Materials:

A four-page document titled “PREA Training for Volunteers and Contractors” that includes:

- Overview of PREA and ADOC's zero-tolerance policy
- Reporting procedures
- Definitions of sexual abuse, harassment, and custodial misconduct
- Volunteer/contractor acknowledgment form

A tri-fold pamphlet summarizing PREA definitions, reporting expectations, and contact information for reporting incidents.

Specialized training for medical contractors titled “Prison Rape Elimination Act and What Healthcare Providers Need to Know” is also included in the training process.

INTERVIEWS

Volunteer

The Auditor interviewed a facility volunteer who confirmed receiving PREA training before being permitted to work with inmates. The volunteer stated that the training was relevant to their responsibilities and was able to clearly describe PREA principles, including the obligation to report any observed or reported incidents of sexual abuse

or harassment.

Contractor

A contractor interviewed also affirmed receiving PREA training prior to being allowed inmate contact. The contractor demonstrated understanding of PREA's purpose and articulated their responsibilities related to reporting and responding to incidents.

PROVISIONS

Provision (a):

The facility confirmed in the PAQ and through documentation review that all contractors and volunteers with inmate contact receive PREA training. The training materials are comprehensive and tailored based on the individual's role and level of contact with inmates. The Auditor reviewed records for all 45 approved contractors and volunteers, all of which included documentation of completed PREA training.

The facility's PAQ states that all volunteers and contractors with inmate contact receive training on their responsibilities regarding the prevention, detection, reporting, and response to sexual abuse and sexual harassment. A total of 45 volunteers and contractors were identified as authorized for facility access, though the number with actual entry is significantly lower, a fact supported by interview data and facility logs.

Provision (b):

Training depth is adjusted according to the duties of the volunteer or contractor. The facility ensures all are made aware of ADOC's zero-tolerance policy and how to report incidents. This was validated during interviews, as both volunteer and contractor respondents accurately articulated their responsibilities. Supporting materials include both general and role-specific information, including visual handouts and acknowledgment forms.

Provision (c):

The facility maintains thorough documentation demonstrating understanding of the training content. Signed acknowledgment forms and sign-in sheets serve as evidence that volunteers and contractors not only receive but understand PREA training. All reviewed documents were dated within the previous 12 months, indicating timely and consistent training practices.

CONCLUSION

Based on the review of the Pre-Audit Questionnaire, agency policies, training curricula, supporting documentation, and interviews with both a volunteer and a contractor, the Auditor finds that the facility fully meets the requirements of PREA Standard §115.32 – Volunteer and Contractor Training. Volunteers and contractors receive role-specific PREA training and clearly understand their responsibilities for preventing and responding to sexual abuse and harassment in accordance with agency policy and federal standards.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION REVIEWED</p> <ol style="list-style-type: none">1. Pre-Audit Questionnaire (PAQ)2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment3. Inmate PREA Training Curriculum4. ADOC Male Inmate Handbook (dated 09/25/2017)5. Inmate Orientation Materials on Sexual Assault6. Inmate PREA Receipt and Acknowledgment Forms (ADOC Form 454-A)7. "What You Should Know About Sexual Abuse and Assault" Pamphlet8. PREA Informational Posters displayed throughout the facility9. Miscellaneous PREA Training Materials10. Posters and Visual Aids (available in Spanish and low-vision formats)11. Postings from Outside Confidential Support Services Agencies12. Inmate PREA Orientation Sign-in Sheets (January 2024 – April 2024)13. Inmate PREA 30-Day Education Attendance Sheets14. Inmate PREA Education Tracking Spreadsheet (with education dates) <p>OBSERVATIONS</p> <p>During the on-site facility tour, the Auditor observed the following:</p> <ul style="list-style-type: none">• PREA informational materials were prominently displayed in inmate housing units, common areas, and near inmate telephones.• Materials included clear and accessible explanations of sexual abuse and harassment, the agency's zero-tolerance policy, and instructions on reporting incidents.• Reporting methods included internal mechanisms (e.g., ADOC PREA Unit – Dial 6611) and access to external confidential resources (e.g., One Place Family Justice Center).• All materials were available in multiple formats, including English, Spanish, Braille, and video content with closed captioning and ASL interpretation.• Visual aids and video presentations, such as “Discussing PREA,” were available in both English and Spanish with appropriate accessibility features.• The strategic placement of these materials throughout the facility reinforces the agency’s commitment to PREA compliance and inmate education. <p>INTERVIEWS</p> <p>Intake Staff:</p>

- Confirmed that inmates receive initial PREA information at intake, including written materials and verbal explanations.
- Reported that comprehensive PREA education is provided within 15 days, via video or in-person instruction.
- Stated that all inmates are informed of their rights, protections from sexual abuse and retaliation, and the multiple ways they can report concerns.
- Verified accommodations are in place for inmates with limited English proficiency (LEP), disabilities, or other special needs.
- Noted that all inmates are issued the Inmate Handbook and required to sign acknowledgment forms.

Random Inmates:

- Universally reported receiving PREA education at intake.
- Recalled receiving the Inmate Handbook and viewing the PREA video.
- Demonstrated understanding of reporting options and protections under PREA.

PROVISIONS

Provision (a):

All inmates are provided with information about the agency's zero-tolerance policy for sexual abuse and harassment at intake. This includes definitions of prohibited conduct and available reporting methods. Documentation and staff interviews confirm that all 1,044 inmates admitted in the past 12 months received this information.

Provision (b):

The PAQ and facility documentation confirm that 100% of inmates housed for 30 days or more received comprehensive PREA education within the required timeframe. As outlined in ADOC AR #454 (p.13, B.1.b), this education includes video presentations, discussions, and opportunities for questions.

Provision (c):

A review of 51 inmate files showed that each included a signed ADOC Form 454-A, verifying receipt of the Inmate Handbook, orientation materials, and completion of PREA education.

Provision (d):

PREA education is provided in formats accommodating the needs of all inmates, including those with LEP and those who are visually or hearing impaired. Materials are available in multiple languages and accessible formats, such as Braille, large print, ASL-interpreted videos, and closed-captioning. In accordance with ADOC AR #454, inmates are not used to interpret or assist in providing this education.

	<p>Provision (e):</p> <p>Inmate acknowledgment of PREA education is documented using ADOC Form 454-A and maintained in individual inmate files. The facility also tracks inmate education through a centralized PREA database, enabling staff to verify compliance by inmate and facility.</p> <p>Provision (f):</p> <p>The facility maintains ongoing education efforts through regularly updated posters, handbooks, videos, and recurring orientation sessions. On-site observations confirmed PREA materials are visible and accessible throughout all housing and common areas, supporting a continuous culture of awareness and safety.</p> <p>CONCLUSION</p> <p>Based on the review of the PAQ, supporting documentation, inmate files, and interviews with staff and inmates, along with comprehensive on-site observations, the Auditor concludes that the facility is in full compliance with PREA Standard §115.33 – Inmate Education.</p>
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115.34 Specialized training: Investigations	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <p>Pre-Audit Questionnaire (PAQ) and supporting documentation provided</p> <p>ADOC Administrative Regulation #454</p> <p>Specialized Training Curriculum for Investigators</p> <p>Training Certificates for Investigators</p> <p>Training Materials from The Moss Group, Alabama Department of Corrections, Training Force USA, and National Institute of Justice</p> <p>INTERVIEWS:</p> <p>Investigative Staff</p> <p>During interviews, investigative staff confirmed they had completed specialized training for conducting sexual abuse investigations in confinement settings. Staff demonstrated familiarity with proper procedures including the use of Miranda and Garrity warnings, techniques for interviewing sexual abuse victims, and methods for</p>

collecting evidence in correctional environments.

Provision (a):

The PAQ and supporting documentation confirm that agency policy mandates all investigators receive specialized training in sexual abuse investigations specific to confinement settings. Investigative staff interviews corroborated this policy.

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

Training topics included:

- Trauma-Informed Sexual Assault Investigations
- Human Trafficking Awareness
- Prison Rape and Sexual Assault Investigation
- Specialized PREA Investigation Techniques

Additionally, all 52 Institutional PREA Compliance Managers (IPCMs) across the state have also completed this specialized training.

The Auditor also examined portions of the U.S. Department of Justice, National Institute of Justice online training titled Sexual Abuse and the Initial Responder, which includes modules on:

- PREA Investigations
- Collaborating with Victims
- Interviewing Techniques
- Institutional Culture and Investigations

Provision (b):

The agency reports that investigator training includes the following elements, as confirmed through both documentation and interviews:

- Interviewing techniques for sexual abuse victims
- Proper use of Miranda and Garrity warnings
- Evidence collection in confinement settings
- Criteria for substantiating cases for administrative action or prosecutorial referral

The Auditor reviewed U.S. Department of Justice/NIC training content and verified completion through training records and interviews with investigative staff.

Provision (c):

	<p>According to the PAQ, the agency maintains complete documentation for each investigator's completion of the required training. The Auditor confirmed this through:</p> <ul style="list-style-type: none"> • Review of signed training certificates for forty PREA investigators currently employed statewide by the ADOC Law Enforcement Services Division • Verification of training from both in-person sessions and online modules <p>Training was verified through certificates and maintained in personnel files, as required by ADOC Administrative Regulation #454, which mandates that all training be documented, signed, and retained.</p> <p>The agency has demonstrated a comprehensive and verifiable system for ensuring investigators are trained, prepared, and qualified to conduct effective sexual abuse investigations in confinement settings.</p> <p>Provision (d):</p> <p>This provision is not applicable for audit.</p> <p>CONCLUSION</p> <p>Based on thorough review and analysis of training materials, personnel files, policy documentation, and investigative staff interviews, the Auditor concludes that the agency/facility is in full compliance with all provisions of the PREA standard regarding Specialized Training for Investigators.</p>
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. Specialized Training Curricula 4. Training Records of Medical and Mental Health Practitioners <p>INTERVIEWS :</p> <p>Facility Head:</p> <p>The Facility Head confirmed that all medical and mental health practitioners have received both the general PREA training and the specialized training tailored to their professional responsibilities.</p>

Medical Staff:

Medical personnel interviewed affirmed their completion of the general PREA training in addition to specialized instruction focused on detecting, responding to, and reporting incidents of sexual abuse and harassment.

Mental Health Staff:

Mental health professionals also verified their receipt of both the general and specialized PREA training, which emphasized their role in recognizing and addressing sexual abuse and harassment in confinement settings.

PREA Compliance Manager (PCM):

The PCM verified that all medical and mental health practitioners employed at the facility have successfully completed the general PREA training as required under §115.31, as well as the specialized training mandated by agency policy.

PROVISIONS

Provision (a):

According to the PAQ and agency policy, specialized PREA training is mandatory for all medical and mental health care practitioners within ADOC facilities. There are currently 23 such practitioners assigned to this facility, and all have completed the required training.

The Auditor reviewed:

- Training curricula and lesson plans
- Individual training records

This review confirmed full compliance with the training requirements.

Per ADOC Administrative Regulation #454, p. 12, Section V, 3 (a-g), training content includes:

- Identifying and assessing signs of sexual abuse and harassment
- Preserving physical evidence
- Responding professionally to victims
- Reporting procedures for allegations and suspicions
- Understanding medical and mental health needs of inmates
- Recognizing factors that may increase risk of victimization

All training is documented, verified through employee signatures, and maintained in personnel records.

Provision (b):

This provision is not applicable. ADOC policy prohibits facility medical staff from conducting forensic medical exams for victims of sexual abuse. These examinations are referred to qualified external medical professionals.

	<p>Provision (c):</p> <p>As confirmed in the PAQ and verified by the Auditor, the agency maintains comprehensive and up-to-date documentation demonstrating that all medical and mental health practitioners have completed the required specialized training.</p> <p>Documentation includes:</p> <ul style="list-style-type: none"> • Individual training records • Supporting interview statements • Personnel file verification in accordance with agency policy <p>The training program is robust, well-documented, and consistent with the requirements of PREA Standard §115.35.</p> <p>Provision (d):</p> <p>Medical and mental health staff also receive the general PREA training required for all ADOC employees, contractors, and volunteers.</p> <p>The Auditor reviewed:</p> <ul style="list-style-type: none"> • Sign-in sheets • Training rosters • General PREA training materials <p>These documents confirmed that all contracted medical staff have received both general and specialized PREA training, in compliance with agency policy and federal standards.</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of the PAQ, agency policies, training materials, personnel records, and corroborating staff interviews, the Auditor finds the facility to be in full compliance with PREA Standard §115.35: Specialized Training for Medical and Mental Health Care Practitioners.</p>
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ)
2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment
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:

- An inmate makes a PREA-related allegation,
- The inmate temporarily departs and returns to the facility, or

- New information emerges that may impact the inmate's safety status.

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

- During the interview process the transgender inmates reported:
- Being satisfied with the showering arrangements
- Being able to have input into their housing, programming, education, and who they want to search them.
- Medical is helpful regarding hormone replacement

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 1,027 inmates 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:

- Mental, physical, or developmental disabilities
- Age and physical build
- Prior incarcerations
- Criminal history (including sex offenses)
- Sexual orientation and gender identity
- History of sexual victimization
- Inmate's self-perception of vulnerability
- 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,

	<p>classification, and PREA staff). Per AR #454, p. 16, F.8, strict controls are in place to 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>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Standard Operating Procedure (SOP) 454-5 4. Form 454-C – Classification PREA Risk Factors Checklist 5. ADOC Form 454-K – PREA Risk Assessment 6. Memo from ADOC PREA Director dated February 20, 2020 – Transgender Reassessment and Housing 7. Inmate Records 8. Intake Risk Assessment Checklist 9. Risk Assessment Checklist 10. Housing Designation Spreadsheet <p>INTERVIEWS</p> <p>PREA Director (PD)</p> <p>The PREA Director indicated that per policy, an inmate’s gender identity is initially determined based on legal sex (typically at birth). However, subsequent assessments focus on individual circumstances to ensure the safety of the inmate and the facility population. The PD stated that the safety concerns expressed by transgender and intersex inmates are given significant weight in housing and program decisions. These individuals undergo regular classification reassessments at least every six</p>

months or following any incident of a sexual nature. Interviews are also conducted to identify potential enemies or threats.

Staff Responsible for Risk Screening

Interviewed staff confirmed that each inmate is individually assessed during the risk screening process. In addition to the standardized tools used, classification and housing decisions incorporate information gathered through personal conversations with inmates.

Institutional PREA Compliance Manager (IPCM)

The IPCM reported that neither the facility nor the agency is under any consent decree, legal settlement, or judgment requiring a separate facility, unit, or wing for LGBTI inmates. LGBTI inmates are housed in the general population unless safety or security concerns arise, at which point the issue is reviewed with appropriate staff. The IPCM affirmed that transgender and intersex inmates' expressed concerns are carefully considered and each assessment directly informs housing, programming, and risk mitigation decisions.

Transgender Inmate(s)

Interviewed transgender inmates reported satisfaction with showering accommodations and confirmed they are housed in general population units, not in dedicated transgender units. The Auditor confirmed this by reviewing the facility's inmate roster.

PROVISIONS

Provision (a)

Requirement: Facilities must use screening information to inform housing, work, education, and programming assignments to separate those at high risk of sexual victimization from those at high risk of being sexually abusive.

Findings: The PAQ and interviews confirm this practice is followed. The Auditor reviewed 52 inmate records and verified that assessment results were used in housing and program assignment decisions.

Policy Cited: AR #454, p. 16, F.9.a

Provision (b)

Requirement: Facilities must make individualized determinations to ensure inmate safety.

Findings: The PAQ confirms this, and staff interviews supported that screening results and conversations with inmates inform individualized safety determinations.

Policy Cited: AR #454, p. 16, F.10.a

Provision (c)

Requirement: Housing/program decisions for transgender or intersex inmates must be considered case-by-case, considering safety and security concerns.

Findings: Policy and interviews confirm compliance. Case-by-case assessments are standard practice.

Policy Cited: AR #454, p. 17, F.10.f

Provision (d)

Requirement: Transgender or intersex inmates' placements and programming must be reassessed at least twice annually.

Findings:

Risk screening staff and transgender inmates confirmed biannual reassessments.

Policy Cited: AR #454, p. 17, F.10.d

Provision (e)

Requirement: Inmates' views on their safety must be taken into thoughtful consideration.

Findings: Interviews and policy confirm this practice is followed in making housing and program decisions.

Policy Cited: AR #454, p. 17, F.10.e

Provision (f)

Requirement: Transgender and intersex inmates must be allowed to shower separately from other inmates.

Findings: Showers in each housing unit are private, single-stall, and separated. Staff interviews confirmed accommodations are made for separate shower times when requested. Policy Cited: AR #454, p. 17, F.10.g

Provision (g)

Requirement: LGBTI inmates are not to be housed in dedicated units solely based on identification or status unless mandated by a legal decree or settlement.

Findings: Confirmed through interviews and documentation that the facility does not segregate based on LGBTI status unless required by a legal judgment.

Policy Cited: AR #454, p. 17, F.10.c

CONCLUSION

Based on documentation review, interviews, and facility observations, the Auditor finds that the facility fully meets the requirements of PREA Standard §115.42 – Use of Screening Information. The facility demonstrates consistent use of risk screening tools to make informed, individualized housing and program assignments that prioritize the

	safety and well-being of all inmates, particularly those who are transgender, intersex, or otherwise at elevated risk.
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <p>Pre-Audit Questionnaire (PAQ)</p> <p>ADOC Administrative Regulation 454 – Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016</p> <p>ADOC Administrative Regulation 435 – Referenced but no specific content applicable to this standard was provided</p> <p>Housing Designation Spreadsheet – Reviewed; no findings relevant to this standard</p> <p>Segregation Log / Holding Cell / Crisis Cell Records – Reviewed; no placements related to sexual abuse allegations</p> <p>Post Allegation Protective Custody Form – Reviewed; no reported instances of use</p> <p>INTERVIEWS</p> <p>Facility Head or Designee:</p> <p>Confirmed that all placements in segregated housing are formally documented and reviewed at a minimum of every 30 days. Further affirmed that no inmates were involuntarily placed in segregation due to risk of sexual victimization during the audit review period.</p> <p>Staff Supervising Segregated Housing Units:</p> <p>Reported no knowledge of, or observations involving, victims of sexual abuse or inmates at risk of retaliation being involuntarily placed in segregation.</p> <p>Inmates in Segregated Housing:</p> <p>At the time of the audit, no inmates were in segregation due to sexual abuse allegations. All were housed for administrative or disciplinary reasons; therefore, no inmate interviews were conducted specifically pertaining to this standard.</p> <p>PREA Compliance Manager (IPCM):</p> <p>Confirmed that no inmates had been placed in protective custody or in involuntary administrative or punitive segregation due to risk of sexual victimization or sexual abuse in the past twelve months. The IPCM also provided a memorandum verifying that Elmore Correctional Facility does not operate a Segregation/Protective Housing Unit.</p>

PROVISIONS

Provision (a)

The PAQ affirms that agency policy prohibits the involuntary placement of inmates at elevated risk of sexual victimization in segregated housing unless no viable alternatives exist.

The PAQ and IPCM reported no such placements within the past twelve months.

The Facility Head corroborated this information.

ADOC AR #454 (p. 23, J, 1) explicitly states that high-risk or reporting inmates shall not be involuntarily segregated unless all alternatives have been assessed and found unavailable.

Provision (b)

According to the PAQ, inmates placed in protective segregation would retain access to programs, privileges, education, and work to the greatest extent possible. The Facility Head confirmed this practice.

While no such placements occurred during the audit review period, ADOC AR #454 (p. 23, J, 2) outlines requirements regarding continued access and mandates documentation of the safety concerns justifying such placements.

Provision (c)

The PAQ also reflects zero occurrences over the past twelve months.

Agency policy strictly limits the use of protective custody, requiring that all less-restrictive options be considered first. The Facility Head and IPCM confirmed that no involuntary placements occurred within the review period.

Provision (d):

Both the PAQ and IPCM confirmed that no inmates had been placed in protective custody within the past year.

Provision (e)

Although no placements were made, the PAQ and staff interviews confirmed that agency policy mandates a formal review every 30 days to assess the continued need for protective segregation.

ADOC AR #454 (p. 23, J, 3) requires this periodic review to ensure that segregated housing is not used longer than necessary.

CONCLUSION

Based on the review of facility documentation, interview responses, and information provided in the Pre-Audit Questionnaire, the facility is in full compliance with PREA Standard §115.43 – Protective Custody. The facility's policies, as set forth in ADOC

	Administrative Regulation #454, provide clear prohibitions and safeguards against the inappropriate use of involuntary segregated housing for inmates at risk of sexual victimization. The absence of any such placements over the past twelve months, combined with strong procedural adherence and staff awareness, further supports the facility's compliance
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Male Inmate Handbook, dated September 25, 2017 4. Inmate Legal Mail Envelopes 5. Memorandum of Understanding (MOU) with Securus for Hotline Services 6. "NO MEANS NO" Posters <p>OBSERVATIONS</p> <p>During the on-site portion of the audit, the Auditor observed that "NO MEANS NO" posters were prominently displayed in both English and Spanish throughout the facility. These were visible in all housing units, common areas, main hallways, the intake holding area, the dining hall, and other strategic locations.</p> <p>In addition, the Auditor noted the presence of secure boxes labeled "PREA" in bold lettering, strategically placed throughout the facility for inmate use.</p> <p>During an interview with mailroom staff, the Auditor learned that inmates are able to request self-addressed envelopes pre-addressed to the Director of the Law Enforcement Services Division (LESD). This process allows inmates to confidentially report PREA-related concerns via legal mail, ensuring privacy and security.</p> <p>The Auditor also tested inmate telephones to verify access to the PREA Hotline (*6611). Each time the number was dialed, the hotline was functional and in compliance with PREA standards. Upon lifting the receiver, callers heard a recorded message advising them of the option to place an anonymous, toll-free call to the PREA Hotline. The message also informed them that calls would be recorded, ensuring transparency. Inmates can leave messages up to two minutes in length.</p> <p>INTERVIEWS</p>

Institutional PREA Compliance Manager (IPCM)

The IPCM confirmed that inmates are provided with multiple internal and external methods for reporting abuse or harassment. These include reporting to the State Board of Pardons and Paroles, the Office of Victim Services, or other public or private external entities. The IPCM affirmed that the ADOC maintains an MOU with an external agency, allowing inmates to leave anonymous messages that are forwarded directly to the agency's PREA Director for follow-up.

Random Staff

Staff interviews revealed consistent awareness of inmate reporting procedures. Staff confirmed that they would accept any report from an inmate and ensure it is submitted to a supervisor for appropriate action. They described multiple reporting options available to inmates, including:

1. Reporting to a staff member
2. Calling the PREA hotline (*6611)
3. Reporting through a family member
4. Submitting verbal, written, anonymous, or third-party reports

Staff also acknowledged they could privately report incidents involving inmates to a supervisor, the IPCM, or directly to the PREA Director.

Random and Targeted Inmates

Both random and targeted inmates reported awareness of multiple avenues for reporting sexual abuse or harassment. These included:

1. Using the PREA hotline
2. Contacting the PREA Compliance Manager
3. Having a family member contact the facility
4. Reporting directly to staff members

PROVISIONS

Provision (a)

The PAQ confirmed that inmates are provided multiple internal methods to privately report:

1. Sexual abuse or harassment
2. Retaliation for reporting such abuse or harassment
3. Staff neglect or policy violations that may have contributed to such incidents

The PCM verified this information during interviews.

ADOC Administrative Regulation (AR) 454 (dated January 4, 2016), Section H, 2(a), page 21, outlines that inmates may report:

1. Verbally or in writing
2. Through third-party or anonymous reports
3. By filing a grievance
4. Calling the PREA hotline
5. Using the PREA drop box
6. Contacting the IPCM
7. Using a pre-addressed envelope to contact LESD
8. Reporting to any staff member, contractor, or volunteer

The policy ensures all reports are taken seriously and investigated thoroughly.

Provision (b)

According to the PAQ, the agency provides at least one external method for inmates to report sexual abuse or harassment. This was verified during the IPCM interview.

The Auditor reviewed the MOU between ADOC and Securus Technologies, effective May 15, 2019, establishing a comprehensive inmate communication system. The following hotlines are available 24/7:

- *6611 – PREA & Investigations Hotline (recorded/archived)
- 1-866-293-7799, Option 4 – ADOC Crime Tip Hotline
- 1-800-639-4357 – ACAR Hotline (confidential support; not recorded or monitored)

Call recordings are stored for a minimum of five years, with the ability to lock recordings for extended retention. ADOC has online access to these records at no additional cost.

Provision (c)

The PAQ states that staff accept reports of sexual abuse and harassment in all forms: verbally, in writing, anonymously, and from third parties. All verbal reports must be promptly documented.

This was verified through staff interviews, and further supported by the ADOC Inmate Handbook (September 25, 2017), page 23, which assures inmates that:

“All reports are investigated and are confidential – the ADOC and its staff want to keep you safe!”

Relevant policy references:

AR 454, Section H, 1(a), page 19 – Staff are required to report any knowledge, suspicion, or information related to sexual abuse/harassment or custodial sexual misconduct, whether received verbally, in writing, anonymously, or from third parties.
AR 454, Section H, 1(b), page 19 – Mandates immediate reporting of any such

	<p>information through the chain of command.</p> <p>Provision (d)</p> <p>The PAQ indicates, and the PCM confirmed, that the agency provides a method for staff to privately report incidents of sexual abuse or harassment involving inmates.</p> <p>As detailed in Provision (c), this is outlined in AR 454, Section H, under Procedures.</p> <p>CONCLUSION</p> <p>Based on a comprehensive review of documentation, observations, and interviews, the Auditor has determined that the agency/facility meets all provisions of the standard pertaining to inmate reporting of sexual abuse and harassment.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC AR406, Inmate Grievance Policy (Dated August 1, 2023) <p>INTERVIEWS:</p> <p>Random Staff: Staff reported that allegations of sexual abuse and sexual harassment are considered grievable issues.</p> <p>Random Inmates: Inmates confirmed through formal interviews and informal conversations that allegations of sexual abuse and sexual harassment are grievable issues.</p> <p>PROVISIONS</p> <p>Provision (a):</p> <p>The agency and facility report having an administrative procedure in place to address inmate grievances regarding sexual abuse.</p> <p>The PAQ confirms this procedure exists, and indicates that the facility received zero grievances related to sexual abuse in the past 12 months. All grievances reached a final decision within the required 90-day timeframe.</p> <p>The Auditor reviewed ADOC Administrative Regulation #454 and the Inmate Handbook, both of which verify the existence of a formal inmate grievance procedure.</p>

PROVISIONS

Provision (b):

According to the PAQ, agency policy permits inmates to submit a grievance regarding sexual abuse at any time, regardless of when the incident allegedly occurred. The policy does not require the use of an informal grievance process prior to filing.

Supporting Policies:

ADOC AR406, p. 6, Section F: Staff are encouraged to resolve complaints at the lowest possible level, but informal resolution is not required.

ADOC AR406, p. 6, Section G: No time limit is imposed on filing a grievance related to allegations of sexual abuse or harassment.

Provision (c):

The PAQ confirms that inmates may file grievances alleging sexual abuse without submitting them to the staff member who is the subject of the complaint. In addition, such grievances are not referred to the staff member involved.

Supporting Policies:

ADOC AR406, pp. 5-6, Section E: Inmates are not required to discuss grievances with staff members who are the subject of the grievance.

ADOC AR406, p. 8, Section R: Grievances involving sexual abuse/harassment are logged by the IGO and forwarded to the IPCM for investigation under AR 454. All such allegations are taken seriously and investigated.

Provision (d):

According to the PAQ, there were zero grievances filed in the past 12 months alleging sexual abuse.

Supporting Policy:

ADOC AR406, pp. 9-10, Section Z(1)(d): The IGO is required to provide a response to Step 1 of a grievance within ten (10) days of receipt.

Provision (e):

Agency policy permits third-party assistance in filing grievances related to sexual abuse. This includes help from fellow inmates, staff members, family members, attorneys, and outside advocates. If an inmate declines such assistance, the agency documents the decision.

Supporting Policy:

ADOC AR406, p. 5, Section D: Inmates may receive help in preparing grievances from other inmates or outside individuals (e.g., family, attorneys). However, grievances

	<p>must be submitted by the inmate, not on their behalf.</p> <p>Provision (f):</p> <p>The agency has established procedures for emergency grievances alleging a substantial risk of imminent sexual abuse. These require an initial response within 48 hours.</p> <p>According to the PAQ, no emergency grievances of this nature were filed in the past 12 months.</p> <p>Supporting Policies:</p> <p>ADOC AR406, pp. 10–11, Section AA(1): Emergency grievances are expedited and forwarded to the Warden/Designee for immediate review and action. Allegations of sexual abuse/harassment by another inmate are referred to the IPCM; those involving staff are referred to LESD.</p> <p>ADOC AR406, p. 11, Section AA(4): Appeals of emergency grievances are forwarded to the DGC for immediate resolution, and must be addressed within 72 hours.</p> <p>Provision (g):</p> <p>Agency policy limits disciplinary action against inmates for filing grievances related to sexual abuse to situations where it can be proven that the grievance was filed in bad faith. No such disciplinary actions occurred in the past 12 months.</p> <p>Supporting Policy:</p> <p>ADOC AR406, p. 7, Section L: Reprisals or retaliation for participation in the grievance process are strictly prohibited and may result in disciplinary action, corrective measures, or criminal investigation.</p> <p>CONCLUSION:</p> <p>Based on the review and analysis of all available evidence—including policies, the PAQ, and staff and inmate interviews—the Auditor concludes that the agency and facility meet all provisions of the standard concerning the exhaustion of administrative remedies.</p>
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115.53	Inmate access to outside confidential support services
	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 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.

PROVISIONS:

	<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>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <p>Pre-Audit Questionnaire (PAQ):</p> <p>The facility submitted a completed Pre-Audit Questionnaire (PAQ) indicating</p>

compliance with Standard §115.54. Supporting documentation provided includes policy references, website links, reporting forms, and interview summaries.

ADOC Administrative Regulation:

ADOC Administrative Regulation #454 outlines the agency’s commitment to PREA compliance and includes provisions for third-party reporting. This regulation affirms that inmates, staff, family members, and other community members have multiple avenues to report allegations of sexual abuse or harassment, including through third-party reporting mechanisms.

Website Publication and Access Points for Third-Party Reporting:

The Alabama Department of Corrections (ADOC) provides clear, public access to third-party reporting options on its agency website:

Agency Website Access: Individuals wishing to report a PREA-related incident can do so by visiting the ADOC website at <http://www.doc.state.al.us>.

PREA-Specific Webpage: Under the “About ADOC” tab, a dedicated PREA link is available. This link leads to a section where individuals can submit a report on behalf of someone else.

Investigation Request Link: A clearly labeled link titled “Request an Investigation” is located beneath the PREA Director’s name. This link directs users to a third-party reporting submission form.

PREA Email Access: The site also provides the email address DOC.PREA@doc.alabama.gov, which is accessible via a link prompting the individual to email a report. This ensures that third-party reports can be made quickly and confidentially.

Reporting Forms for Law Enforcement and Specialized Divisions (LESD):

The facility provided examples of reporting forms used by LESD, including procedures for documenting third-party reports, referrals, and follow-up actions. These forms demonstrate that the agency tracks and responds to third-party allegations in accordance with PREA guidelines.

INTERVIEWS

Inmates:

Inmates interviewed during the audit confirmed their awareness of third-party reporting options. Many expressed that they understood the process and would utilize it if necessary. Inmates were able to articulate that family members, attorneys, or other outside parties could report incidents on their behalf.

PROVISIONS

Provision (a):

	<p>The ADOC has demonstrated compliance with Provision (a) of this standard by providing public access to third-party reporting mechanisms. The agency has made this process accessible through its website, ensuring transparency and accessibility for external reporters.</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of the Pre-Audit Questionnaire, supporting documentation, agency website, administrative regulations, and inmate interviews, the Auditor concludes that the Alabama Department of Corrections meets the requirements of PREA Standard §115.54. The agency has established accessible, reliable methods for third-party reporting, and inmates are informed and aware of these options</p>
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115.61	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Administrative Regulation #302 <p>INTERVIEWS</p> <p>Random Staff</p> <p>During the interview process, staff consistently demonstrated knowledge of the agency's requirement to immediately report any allegation of sexual abuse, in accordance with policy. All staff articulated that information related to sexual abuse reports is confidential and may only be shared with individuals who have a legitimate need to know, such as supervisors or medical personnel. Disclosure of information beyond this scope is strictly prohibited unless it is necessary for purposes of treatment, investigation, security, or facility management. All staff (100%) confirmed that PREA-related allegations are reported directly to the Institutional PREA Compliance Manager (IPCM), who subsequently notifies investigative personnel.</p> <p>Medical and Mental Health Practitioners</p> <p>Medical and mental health professionals affirmed their understanding of their duty to immediately report any allegation of sexual abuse. They also confirmed that they inform inmates of the limits of confidentiality prior to initiating services, in compliance with mandatory reporting laws and agency policy.</p>

Facility Head or Designee

The Facility Head expressed clear understanding of the requirement to report allegations of sexual abuse to appropriate entities, including external agencies when required by law, as well as the PREA Compliance Manager (PCM) and agency investigators. The Facility Head also confirmed that staff must report any knowledge, suspicion, or information regarding sexual abuse, sexual harassment, retaliation, or staff neglect, regardless of whether it involves personnel from within or outside the agency.

PREA Director (PD)

The PREA Director confirmed that the facility reports all allegations of sexual abuse and sexual harassment—including third-party and anonymous reports—to the facility’s designated investigator.

PROVISIONS

Provision (a):

The facility reported via the PAQ that all staff are required to immediately report any knowledge, suspicion, or information related to sexual abuse, sexual harassment, retaliation, or staff neglect related to such incidents, regardless of agency affiliation. The Facility Head affirmed this during interviews.

Supporting Policies:

ADOC AR #454, p. 19, Section H.1.a: Requires staff to immediately report any verbal, written, third-party, or anonymous allegations related to sexual abuse, sexual harassment, custodial sexual misconduct, retaliation, or staff neglect.

ADOC AR #454, p. 19, Section H.1.b: Reiterates the obligation to report all relevant knowledge or suspicion.

Additionally, first responders are issued a pocket-sized guide titled “Prison Rape Elimination Act (PREA): A Trauma-Informed Guide for First Responders,” which outlines responsibilities including evidence preservation and information dissemination.

Provision (b):

The facility affirmed through the PAQ that, aside from notifying designated supervisors or officials, staff are prohibited from sharing information regarding sexual abuse allegations except as necessary for treatment, investigation, or security/management decisions. This was verified through random staff interviews.

Supporting Policy:

ADOC AR #454, p. 19, Section H.1.c: Restricts the sharing of information to those with a need to know, and limits initial interviews with victims to information required to ensure immediate safety until a qualified investigator arrives.

The Auditor also reviewed the Informed Consent for Medical Services form, which allows medical/mental health providers to disclose relevant information to appropriate personnel.

Provision (c):

Medical and mental health practitioners are required to inform inmates, at the start of services, of the limitations on confidentiality. This was confirmed during practitioner interviews.

Supporting Policy:

ADOC AR #454, p. 20, Section H.1.f: Mandates that practitioners explain the limits of confidentiality before service provision and requires reporting of victimization to the IPCM.

The PREA: A Trauma-Informed Guide for First Responders also outlines these practitioner responsibilities.

Provision (d):

For allegations involving youth under 18 or vulnerable adults (as defined under state law), the agency reports such cases to appropriate state or local services in accordance with mandatory reporting laws. The Facility Head confirmed this process during interviews.

Supporting Policy:

ADOC AR #454, p. 20, Section H.1.g: Requires reporting of such cases to the Alabama Department of Human Resources.

Provision (e):

The facility reported that all allegations—including third-party and anonymous reports—are forwarded to the facility's designated investigator. This was confirmed by the PREA Coordinator.

Supporting Policy:

ADOC AR #454, p. 19, Section H.1.b: Directs immediate reporting of all allegations to the IPCM, PREA Director, and I&I investigator, as outlined in AR #302 – Incident Reporting.

CONCLUSION

Following a thorough review and analysis of all available documentation, interviews, and facility policy, the Auditor concludes that the agency/facility fully meets the requirements of the standard related to staff and agency reporting duties. All five provisions have been addressed effectively and are supported by policy, practice, and verified staff knowledge.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 3. Transfer of Inmate Due to Sexual Safety 4. Housing Placement (Housing Designation Log) 5. Coordinated Response Plan <p>INTERVIEWS</p> <p>Facility Head or Designee:</p> <p>The Facility Head confirmed that immediate protective action is taken upon identifying an inmate at risk of sexual abuse. Depending on the circumstances, this may involve transferring the victim to another housing unit or facility, while known perpetrators are placed in segregated housing without delay.</p> <p>Random Staff:</p> <p>Staff consistently described clear and comprehensive protocols for responding to reports of sexual abuse. They emphasized the importance of promptly separating the victim and alleged perpetrator, ensuring the victim's safety and well-being, preserving evidence, and notifying supervisory personnel. Staff demonstrated a thorough understanding of the facility's coordinated response plan and expressed that the safety of inmates is always the top priority.</p> <p>PROVISION (a)</p> <p>The Pre-Audit Questionnaire confirms that the facility takes immediate action when it becomes aware that an inmate is at substantial risk of imminent sexual abuse. Within the past twelve months, 71 such instances were documented. Each case was met with prompt intervention, typically within an hour, to ensure the safety of the at-risk inmate.</p> <p>The facility's Coordinated Response Plan outlines specific actions to be taken upon identifying a risk, including:</p> <ul style="list-style-type: none"> • Immediate separation of the involved parties • Referral for medical and mental health services • Evidence preservation protocols • Required notifications to supervisory and administrative personnel

	<p>Transfer logs and case documentation reflect that at-risk inmates were promptly relocated—either within the facility or to another institution—to enhance their safety. These transfers were guided by risk assessments, the location of alleged perpetrators, and available safe housing alternatives.</p> <p>The Housing Designation Log provides a clear record of housing decisions based on safety concerns. Inmates identified as at risk were reassigned to more secure areas as needed, with oversight and documentation by the Institutional PREA Compliance Manager (IPCM).</p> <p>Policies and procedures substantiate that the IPCM, in coordination with and approval from the Facility Head, is responsible for timely decisions related to inmate transfers and housing assignments based on individual risk assessments.</p> <p>Relevant Policies:</p> <p>ADOC Administrative Regulation #454, Operations & Legal: Inmate Sexual Abuse and Harassment (dated January 4, 2016):</p> <p>Section J.1 (p. 23): Inmates at high risk for sexual victimization—or who report such threats—shall not be placed in involuntary administrative or punitive segregation unless there is a documented finding that no alternative exists.</p> <p>Section K.3 (p. 10): Assigns the IPCM responsibility to recommend placement or transfer for inmates involved in incidents or allegations. Immediate action is required when an inmate is determined to be at substantial risk, with final approval by the Warden or designee.</p> <p>CONCLUSION</p> <p>Based on a comprehensive review of applicable policies, supporting documentation, and staff interviews, the Auditor finds that the facility meets the requirements of PREA Standard §115.62 – Agency Protection Duties.</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire 2. ADOC Administrative Regulation #454 3. ADOC Form 454-F: Reporting to Other Confinement Facilities <p>INTERVIEWS</p>

Agency Head Designee:

The Agency Head Designee confirmed during the interview that any notification received regarding a PREA-related incident—including sexual abuse, sexual harassment, or staff sexual misconduct—regardless of the facility in which it occurred, is investigated according to Georgia Department of Corrections (GDC) guidelines.

Facility Head:

The Facility Head indicated that when an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately assigned for investigation. If an inmate reports that the abuse occurred at another facility, the facility where the incident allegedly occurred is notified as soon as possible, but no later than 72 hours after receiving the allegation.

PROVISIONS

Provision (a):

According to the PAQ, when the facility receives an allegation that an inmate was sexually abused while confined at another facility, the head of the receiving facility is responsible for notifying the head of the facility or appropriate agency office where the abuse allegedly occurred.

In the past 12 months, the facility received three such allegations. In each case, notification was made to the appropriate confinement facility within 72 hours of becoming aware of the allegation.

This procedure is guided by ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment (dated January 4, 2016), p. 20, Section H.1.d, which mandates that the Warden notify the appropriate official at the other facility as soon as possible, but no later than 72 hours after receiving the allegation.

Supporting documentation includes ADOC Form 454-F: Reporting to Other Confinement Facilities.

Provision (b):

The PAQ confirms that agency policy requires facility heads to provide notification within 72 hours of receiving an allegation of abuse at another facility. The Facility Head verified compliance with this requirement.

Over the past year, the facility received three such allegations. In all instances, the facility completed ADOC Form 454-F and notified the appropriate facility within the 72-hour time frame.

The Institutional PREA Compliance Manager (IPCM) provided the completed forms for auditor review.

Provision (c):

	<p>As indicated in the PAQ, the facility maintains documentation confirming that notifications are made within 72 hours of receiving allegations. The Facility Head verified this documentation process.</p> <p>The three allegations requiring notification occurred within the past 12 months, were reported within the 72-hour window and the facility's procedures remain in compliance and aligned with AR #454, Section H.1.d. Notifications are documented using Form 454-F.</p> <p>Provision (d):</p> <p>The PAQ states that the facility policy requires all allegations received from other agencies or facilities to be investigated in accordance with PREA standards. During the past 12 months, the facility received 3 allegations of sexual abuse originating from another facility. The Facility Head confirmed this.</p> <p>CONCLUSION</p> <p>Based on a thorough review of the Pre-Audit Questionnaire, supporting documentation, interview responses, and policies, the Auditor concludes that the agency/facility fully meets all provisions of the PREA standard regarding reporting to other confinement facilities.</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. PREA First Responder Duty Card 4. PREA Pocket Guide for First Responders <p>INTERVIEWS</p> <p>Security Staff – First Responders</p> <p>Through the interview process, security staff first responders confirmed they received training on the PREA response protocol through annual in-service training, on-the-job training, and regular staff meetings.</p> <p>Non-Security First Responders</p> <p>Non-security staff interviewed indicated that, in the event of a PREA incident, they</p>

would notify security staff, separate the victim and perpetrator, instruct both parties not to take actions that could destroy evidence, and secure the area until security staff arrived. They also expressed a clear understanding of the importance of maintaining confidentiality in all such cases.

All Staff

Across the board, staff were able to articulate step-by-step how to respond to a PREA incident. Their responses consistently included the separation of the victim and alleged perpetrator, preservation of physical evidence and the incident area, provision of medical assistance as needed, and timely reporting of the incident.

Inmates Who Reported Sexual Abuse

Inmates who reported sexual abuse shared the following during interviews:

- Facility staff responded promptly upon receiving the report.
- They were immediately referred for a forensic examination.
- Those who received forensic examinations were offered a victim advocate.
- The advocate accompanied them during the exam and explained the process.
- They were not required to pay for any medical services.
- 100% reported they were not subjected to polygraph testing.
- All reported receiving written notification of the investigation's outcome.

PROVISIONS

Provision (a)

The facility reported in the PAQ that the agency has a first responder policy for allegations of sexual abuse, which was verified during staff interviews. All security, non-security, and administrative staff interviewed possessed a laminated, pocket-sized First Responder Duty Card. This card outlines the required steps to be taken in the event of a PREA-related incident, directly referencing the agency's PREA policy.

Additionally, the Auditor was provided a copy of the spiral-bound booklet titled "Prison Rape Elimination Act (PREA) – A Trauma-Informed Guide for First Responders."

Distributed to all staff, the guide is organized into the following sections:

- Introduction to PREA
- Definitions
- PREA Components
- Prevention
- Detection
- Response
- Summary and Resources

Each section provides comprehensive information on PREA-related issues,

highlighting responsibilities and the critical role of first responders.

The PAQ and the facility's PREA Chart reported 54 allegations of inmate sexual abuse within the past 12 months. These allegations were subject to criminal investigation. Of the 54:

- 52 were inmate-on-inmate
- 2 were staff-on-inmate
- 54 times the first responder was security staff
- 6 were deemed unfounded
- 33 were unsubstantiated
- 0 were substantiated
- 15 remained under investigation at the time of the audit
- Prosecution was declined in all closed cases

In each case, the alleged victim was offered both medical and mental health services. Retaliation monitoring was conducted until the allegation was unfounded, the victim was released or transferred, or the required 90-day monitoring period concluded. All closed cases resulted in written notification of the outcome being provided to the victim. Except for unfounded cases, all underwent review by the Sexual Abuse Incident Review Team.

In the same period, there were 17 allegations of sexual harassment:

- 15 involved inmate-on-inmate harassment and were investigated administratively. 14 were unsubstantiated and one was unfounded.
- 2 allegations involved staff-on-inmate harassment and were investigated administratively. One was determined to be unfounded, and the other allegation remained under investigation at the time of the audit.
- In every resolved case, victims were promptly notified in writing of the investigative findings.

ADOC Administrative Regulation #454 (dated January 4, 2016, p. 17, Section G, 1, a-g) details the required actions for first responders, which include:

- a. Physically separating victims, aggressors, and witnesses
- b. Preserving the crime scene
- c. Instructing the victim not to bathe, brush teeth, eat, drink, smoke, or use the restroom
- d. Ensuring the alleged aggressor also refrains from those activities
- e. Non-security responders should advise the victim to preserve evidence and notify security staff
- f. Avoiding exposure of evidence or interviews with involved parties
- g. Prompt notification to the Shift Commander and completion of an Incident Report

Provision (b)

According to the PAQ, there were no instances in the past 12 months where the initial

	<p>first responder was not a security staff member. The training curriculum reviewed by the Auditor confirms that all staff, volunteers, and contractors are trained to act as first responders when they are the initial recipient of a report. They are instructed to isolate and contain the situation, secure the scene, separate the alleged victim and perpetrator, remove uninvolved individuals, and report observations to investigators, IPCM, or the shift commander.</p> <p>CONCLUSION</p> <p>Based on a thorough review of the PAQ, documentation, interviews, and investigative records, the Auditor concludes that the agency/facility meets all provisions of the PREA standard regarding staff first responder duties.</p>
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115.65	Coordinated response
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION REVIEWED</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. PREA First Responder Card 4. PREA Pocket Guide for First Responders 5. Coordinated Response Standard Operating Procedure (SOP) <p>INTERVIEWS</p> <p>Facility Head or Designee</p> <p>During the interview, the Facility Head confirmed that the facility has developed and implemented a Coordinated Response Plan that clearly outlines the responsibilities of all staff involved in responding to incidents of sexual abuse. This includes first responders, medical and mental health personnel, investigators, and facility leadership.</p> <p>The Facility Head further explained that training on the coordinated response is provided regularly through annual in-service sessions, monthly staff meetings, and on-the-job training. Staff are equipped with readily accessible resources such as the PREA First Responder Card and the PREA Pocket Guide, which reinforce their responsibilities in responding to PREA-related incidents.</p> <p>PROVISIONS</p> <p>Provision (a)</p>

According to the Pre-Audit Questionnaire (PAQ), the facility has developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in the event of a sexual abuse incident. This was confirmed through interviews with the Facility Head and a review of supporting documentation.

The Auditor reviewed a spiral-bound reference booklet titled “Prison Rape Elimination Act (PREA) – A Trauma-Informed Guide for First Responders,” which is issued to all staff. The guide includes detailed sections covering:

- Introduction to PREA
- Definitions
- PREA Components
- Prevention
- Detection
- Response
- Summary and Resources

Each section clearly defines staff responsibilities and provides the guidance necessary to ensure an informed and effective response to incidents of sexual abuse.

Policies and Procedures Supporting This Provision:

ADOC Administrative Regulation (AR) #454 (Dated January 4, 2016)

- Section G.1 (p.17): Responsibilities of the First Responder
- Section G.2 (p.18): Responsibilities of the Shift Commander
- Section G.3 (p.18): Responsibilities of Medical and Mental Health Staff
- Section H.1 (p.19): Responsibilities of Employees and Staff in Reporting Allegations
- Section H.2 (p.21): Inmate Reporting Procedures
- Section I.1 (p.22): Roles of IPCM and Investigators in Inmate-on-Inmate and Staff-on-Inmate Abuse
- Section I.2 (p.22): Responsibilities in Investigating Inmate-on-Inmate Sexual Harassment

These policies collectively establish a clear, facility-wide response plan, ensuring coordinated action among all relevant personnel in the event of a PREA-related incident.

CONCLUSION

Based on a comprehensive review of facility documentation and interviews, the Auditor has determined that the agency/facility meets all requirements of Standard §115.65 – Coordinated Response. The institution has implemented a robust, well-documented, and effectively communicated response plan, supported by relevant policies, staff training, and accessible resources that prepare staff to respond appropriately and consistently to incidents of sexual abuse.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Memorandum: Collective Bargaining and PREA Standard 115.66, dated March 19, 2019 <p>INTERVIEW</p> <p>Agency Head or Designee</p> <p>During the interview process, the Personnel Director confirmed that correctional officers and other prison 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 officers or facility staff. Consequently, there are no union agreements that would impede the agency's ability to take immediate action to protect inmates from contact with staff alleged to have committed sexual abuse.</p> <p>PROVISIONS</p> <p>Provision (a)</p> <p>The facility reported in the PAQ that the State of Alabama does not participate in collective bargaining. This information was corroborated during the Agency Head Designee interview.</p> <p>This provision is addressed in the ADOC Memorandum: Collective Bargaining and PREA Standard 115.66, dated March 19, 2019. Issued by the agency's Personnel Director, the memorandum explicitly states that ADOC correctional staff are not members of any labor union and that the department does not engage in collective bargaining with facility staff.</p> <p>Consistent with ADOC policy and practice, facility management retains the authority to immediately separate any employee who is the subject of a sexual abuse allegation from contact with inmates. This may include reassignment, a change in duties, or restriction of access to the facility while an investigation is underway.</p> <p>The facility further reported that during the audit period, there were no PREA-related incidents that required the removal of a staff member from inmate contact pending investigation outcomes.</p>

	<p>Provision (b)</p> <p>This provision is not applicable. The Auditor is not required to assess compliance with this provision.</p> <p>CONCLUSION</p> <p>Based on a thorough review of documentation and staff interviews, the Auditor concludes that the agency/facility meets the requirements of Standard §115.66 – Preservation of Ability to Protect Inmates from Contact with Abusers. The agency maintains full authority to take prompt protective action in the interest of inmate safety without limitation from collective bargaining agreements.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation (AR) #454 3. ADOC Form 454-D – Sexual Abuse/Harassment Retaliation Monitoring <p>INTERVIEWS</p> <p>Agency Head or Designee Interview</p> <p>The Personnel Director confirmed that retaliation monitoring begins on the date an allegation is received and continues for a period of 90 days, unless the allegation is unfounded. In such cases, monitoring may be discontinued. Monitoring is extended to anyone—staff or inmate—who fears retaliation related to a PREA-related allegation or investigation.</p> <p>Facility Head or Designee Interview</p> <p>The Facility Head reported that various protective measures are employed to guard against retaliation. These include monitoring for changes in housing assignments, work details, and disciplinary reports for inmates, as well as observing for negative performance evaluations or reassignments for staff. The staff responsible for retaliation monitoring confirmed this practice.</p> <p>Retaliation Monitor Interview</p> <p>The Retaliation Monitor emphasized that retaliation is taken seriously and is proactively addressed with both staff and inmates. The monitor ensures staff and</p>

inmates are aware they can report PREA-related issues without fear of retaliation. Retaliation monitoring typically focuses on victims, but anyone expressing a fear of retaliation is also monitored. Monitoring includes monthly status checks for at least 90 days and is documented using ADOC Form 454-D. The facility reported zero instances of retaliation during the past 12 months.

OBSERVATIONS

Inmates in Segregated Housing for Risk of Sexual Abuse

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

Inmates Who Reported Sexual Abuse

Interviews with inmates who had reported sexual abuse confirmed that:

- Staff responded promptly to their reports
- Forensic exams were offered immediately
- Victim advocates were made available and were present during exams
- No medical expenses were incurred by the inmate
- No inmates were asked to submit to a polygraph
- Inmates received written notification of investigative outcomes

PROVISIONS

Provision (a)

The facility reported through the PAQ that the agency maintains a formal policy to protect all individuals (staff or inmates) who report or cooperate with sexual abuse or harassment investigations from retaliation. This policy mandates a 90-day monitoring period, extendable as needed.

The Institutional PREA Compliance Manager (IPCM) is designated as the person primarily responsible for monitoring retaliation.

Relevant policy excerpts:

ADOC AR #454, p. 23, Section K.1, prohibits retaliation in any form
Section K.2 assigns the Warden and IPCM responsibility for ensuring protection from retaliation

Provision (b)

The facility reported it utilizes a range of protective measures, including housing changes, work reassignments, separation of abusers, and access to emotional support services. The Facility Head confirmed these strategies.

Policy Reference: ADOC AR #454, pp. 23-24, Section K.2 outlines protection

measures and assigns oversight responsibility to the Warden and IPCM.

A review of ADOC Form 454-D showed no documented cases of retaliation among the 54 reported allegations of sexual abuse in the previous 12 months.

Provision (c)

The agency monitors both inmates and staff for changes in treatment or behavior that might indicate retaliation. Monitoring extends for 90 days, with extensions if warranted.

The PAQ indicated no instances of retaliation in the past 12 months. The Retaliation Monitor confirmed this.

Policy Reference: ADOC AR #454, p. 23, Section K.2.a, mandates regular monitoring by the IPCM for at least 90 days, extendable in 30-day increments.

Provision (d)

Retaliation monitoring includes documented periodic status checks. The Retaliation Monitor demonstrated the use of ADOC Form 454-D, a detailed form covering 13 weeks of monitoring. It includes:

1. Dates of checks
2. Actions taken
3. Monitoring staff comments
4. Final findings and resolution notes
5. Signature of IPCM

Provision (e)

The PAQ confirms and the Retaliation Monitor verified that any individual expressing fear of retaliation—whether a victim, witness, or staff—is eligible for monitoring and protection.

Policy Reference: ADOC AR #454, p. 23, Section K.2.d, instructs staff to take all appropriate measures to protect anyone who expresses fear of retaliation.

Provision (f)

This provision is not subject to audit.

CONCLUSION:

Based on documentation review, staff and inmate interviews, and direct observation, the Auditor concludes that the agency/facility meets all provisions of Standard §115.67 – Agency Protection Against Retaliation.

115.68	Post-allegation protective custody
	<p data-bbox="256 185 959 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 342 507 376">DOCUMENTATION</p> <ol data-bbox="320 443 1353 600" style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 3. ADOC Form 454-H, Prison Rape Elimination Act (PREA) Post-Allegation Protective Custody, dated January 4, 2016 <p data-bbox="256 689 475 723">OBSERVATIONS</p> <p data-bbox="256 757 1469 913">During the facility tour, no inmates were identified or observed as being housed in restrictive housing due to an allegation of sexual abuse. All housing assignments appeared consistent with the facility's standard classification procedures. There were no instances of inmate victims being placed in segregation for protective purposes.</p> <p data-bbox="256 958 432 992">INTERVIEWS</p> <p data-bbox="256 1025 628 1059">Facility Head or Designee:</p> <p data-bbox="256 1104 1477 1462">The Facility Head confirmed that the facility adheres strictly to agency policy prohibiting the placement of sexual abuse victims in involuntary segregation unless no other viable housing alternative is available. Any such placement is subject to regular review every 30 days to determine the continued necessity of separation. The Facility Head emphasized that even in those rare instances where protective segregation is used, inmates retain access to programs, education, and work opportunities to the extent that safety and security permit. The Facility Head also noted that, if necessary, inmates may be transferred to another facility for their safety.</p> <p data-bbox="256 1507 871 1541">Staff Supervising Restrictive Housing Units:</p> <p data-bbox="256 1574 1473 1776">Staff confirmed that placement in segregation is not used automatically for victims of sexual abuse. Instead, alternative housing options are thoroughly evaluated, and restrictive housing is only used as a last resort. They also confirmed that such placements are reviewed every 30 days and that the use of Form 454-H is required to document the justification for the placement.</p> <p data-bbox="256 1821 1062 1854">Inmates in Segregated Housing for Risk of Sexual Abuse:</p> <p data-bbox="256 1888 1473 2000">At the time of the audit, there were no inmates in restrictive housing due to the risk of sexual victimization or as a post-allegation protective measure. This was confirmed by staff interviews and documentation.</p> <p data-bbox="256 2045 443 2078">PROVISIONS</p>

	<p>Provision (a):</p> <p>The PAQ and supporting documentation confirm that the facility complies with agency policy prohibiting the use of involuntary segregated housing for victims of sexual abuse unless all alternative options have been assessed and found unsuitable. In such instances, the rationale for placement and the lack of suitable alternatives must be documented using ADOC Form 454-H.</p> <p>Facility data for the past 12 months indicates:</p> <p>0 inmates were involuntarily held in segregated housing for 1-24 hours pending assessment</p> <p>0 inmates were involuntarily held in segregated housing for more than 30 days</p> <p>If restrictive housing is deemed necessary, inmates are reviewed every 30 days and retain access to programs and privileges, as safety allows.</p> <p>Applicable Policies:</p> <p>ADOC AR #454, Section J(1): Inmates identified as high risk or reporting sexual abuse shall not be placed in involuntary segregation unless all other alternatives have been exhausted and documented.</p> <p>ADOC AR #454, Section J(2): When segregation is the only available protective measure, it must be temporary (not to exceed 30 days), and the inmate must retain access to programs and activities as feasible. Justification must be documented on Form 454-H.</p> <p>CONCLUSION</p> <p>Based on the thorough review of relevant policies, documentation, observations, and interviews, the Auditor concludes that the agency/facility is in compliance with PREA Standard §115.68 – Post-Allegation Protective Custody.</p>
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115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 – Inmate Sexual Abuse and Harassment

3. ADOC Administrative Regulation #300 – Institutional Management
4. ADOC SOP Investigations & Intelligence #454 – PREA Sexual Assault Investigations
5. ADOC Form #454-C – Investigative Summary Report
6. Investigative Outcomes and Dispositions
7. Investigative Review Team Meeting Minutes
8. Notification to Inmate Forms

INTERVIEWS

Investigative Staff

Interviews with investigative staff confirmed the following practices:

- Initiation of Investigations: Investigations commence immediately upon receipt of an allegation, regardless of the reporting method (e.g., in-person, telephone, third-party, or anonymous).
- Training: All investigative personnel have completed specialized training in sexual abuse investigations. The Auditor verified this through review of training records and certificates.
- Investigation Process: A standardized sequence is followed—victims are interviewed first, followed by witnesses, and then the alleged perpetrator.
- Evidence Collection: In sexual abuse cases, evidence is collected by trained investigators or the SAFE/SANE team. All evidence is properly preserved. Investigators are NIC-certified in evidence collection techniques.
- Prosecutorial Consultation: Compelled interviews are conducted only after consultation with prosecutorial authorities, particularly in cases with potential for criminal charges.
- Credibility Assessments: Credibility of all individuals—victims, witnesses, and alleged abusers—is assessed individually. Polygraph testing is not utilized.
- Scope of Investigations: Investigations include an evaluation of any staff actions or inactions that may have contributed to the incident. Findings are documented in comprehensive investigative reports.
- Continuation After Departure: Investigations proceed regardless of whether the alleged victim or abuser remains in the agency’s custody or employment.

PREA Director

Confirmed that investigative records are retained for the duration of an individual’s incarceration or employment, plus five years.

Noted that inmate-related investigative 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 12 months.

Inmates Who Reported Sexual Abuse

Inmate interviews consistently confirmed:

- Timely staff response to allegations
- Immediate referrals for forensic examinations
- Access to and support from victim advocates
- No financial responsibility for medical care
- No polygraph testing
- Receipt of written notification regarding investigative outcomes

PROVISIONS

Provision (a)

The facility reported, via the PAQ, that ADOC policy mandates prompt and thorough investigations of all allegations. This was substantiated through staff interviews and documentation review (AR #454 and SOP I&I #454).

PAQ Data Summary:

- 69 total allegations in the past 12 months
- 54 sexual abuse: 6 unfounded, 33 unsubstantiated, 15 open
- 17 sexual harassment: 2 unfounded, 14 unsubstantiated, 1 open
- All victims received medical and mental health services, retaliation monitoring, and written notifications.

Provision (b)

All investigators have completed PREA-specific training, consistent with SOP I&I #454 and PREA Standard §115.34. Training records verified this requirement was met.

Provision (c)

Investigators collect and preserve direct and circumstantial evidence, including physical, DNA, and electronic monitoring data. Victims, witnesses, and alleged perpetrators are interviewed, and prior complaints involving the accused are reviewed. These practices were confirmed during interviews.

Provision (d)

Compelled interviews are conducted only after consultation with the prosecutorial authority. This practice was confirmed during investigative staff interviews.

Provision (e)

Credibility assessments are conducted case-by-case without regard to status (staff vs. inmate). Polygraphs are not used. Documentation and interviews confirmed this practice.

Provision (f)

Administrative investigations assess whether staff actions or inactions contributed to incidents. Reports include physical and testimonial evidence, credibility assessments, and documented conclusions.

Provision (g)

Criminal investigations are thoroughly documented with detailed summaries of physical, testimonial, and documentary evidence. When feasible, supporting documents are attached to the reports.

Provision (h)

Investigative records are retained for the duration of incarceration or employment, plus five years. This was verified via policy review and confirmed by the PREA Director.

Provision (i)

Although the agency does not delegate PREA investigations to external entities, it affirms full cooperation with external investigations and agrees to seek updates as needed. All PREA investigations are currently handled internally.

Provision (j)

Investigations continue regardless of the custody or employment status of involved parties. Confirmed through interviews with the IPCM and PREA Director and supported by SOP I&I #454.

Provision (k)

Not Applicable – This provision is not subject to audit.

Provision (l)

While outside agency involvement is rare, the facility affirms full cooperation and a commitment to remain informed in such instances. Currently, all investigations are conducted internally by the ADOC's Law Enforcement Services Division (LESD).

CONCLUSION

After a thorough review of all relevant documentation, interviews, and observed practices, the Auditor finds that the facility meets the requirements of PREA Standard §115.71 – Criminal and Administrative Investigations, with the exception of delayed

	investigation initiation in certain cases. This issue should be addressed to ensure full compliance with the standard's timeliness expectations.
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115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation #454 – Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Administrative Regulation #300 – Investigations and Intelligence Division, dated April 18, 2016 <p>INTERVIEWS :</p> <p>Investigative Staff</p> <p>Interviews with investigative staff confirmed that, during the course of an investigation, all available evidence is collected. This includes physical evidence, testimonial evidence from both the alleged victim and perpetrator, and evidence from the scene. Staff reported that all relevant parties are interviewed, and the findings are compiled into a comprehensive report. These findings are submitted to facility administration and the District Attorney’s Office for review and consideration of potential prosecution.</p> <p>Investigative staff further affirmed that the standard used to determine whether allegations are substantiated is a preponderance of the evidence—indicating that it is more likely than not that the incident occurred. They also noted that in some cases, a lower standard of proof may be applied as appropriate.</p> <p>PROVISIONS:</p> <p>Provision (a):</p> <p>ADOC Administrative Regulation #454, page 22, Section I, clearly states that the standard of proof used in all administrative investigations of sexual abuse and sexual harassment is a preponderance of the evidence. This language aligns with PREA Standard §115.72, which requires that substantiation decisions be based on whether the available evidence indicates it is more likely than not that the incident occurred.</p> <p>Additionally, ADOC Administrative Regulation #300, page 5, outlines the required distribution of investigative reports completed by the Law Enforcement Services Division (LESD, formerly known as Investigations and Intelligence or I&I). The</p>

	<p>regulation specifies that completed reports are distributed to:</p> <ul style="list-style-type: none"> • The Commissioner or designee • The Inspector General • Deputy/Associate Commissioners, Institutional Coordinators, Institutional Wardens, as appropriate • The District Attorney of the relevant jurisdiction if criminal conduct is indicated • The ADOC official who requested the investigation • In cases involving central office personnel, distribution is limited to the Commissioner of Corrections <p>CONCLUSION:</p> <p>Based on a comprehensive review of documentation and confirmation through staff interviews, the Auditor concludes that the agency/facility meets the requirements of PREA Standard §115.72.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. Investigative Outcome/Disposition Reports 4. Notification to Inmate Forms (Signed) 5. Investigative Review Team Meeting Documentation <p>INTERVIEWS</p> <p>Investigative Staff</p> <p>Interviews with investigative staff confirmed that upon conclusion of each PREA-related investigation, the Law Enforcement Services Division (LESD) issues a written close-out letter to both the alleged victim and perpetrator. This letter details the outcome and findings of the investigation, fulfilling the requirement for timely notification.</p> <p>PROVISIONS</p> <p>Provision (a):</p>

Based on the PAQ and supporting documentation, the following information pertains to the 12-month audit review period:

A total of 54 inmate-on-inmate sexual abuse allegations were reported and investigated criminally by LESD:

- 6 cases were deemed unfounded
- 33 were unsubstantiated
- 15 cases remained open at the time of the audit
- Prosecution was declined in all closed cases
- All victims were offered medical and mental health services

Retaliation monitoring was conducted and continued until one of the following occurred:

- The case was determined to be unfounded
- The alleged victim was transferred or released
- The 90-day monitoring period concluded

In all closed sexual abuse cases, the facility provided prompt written notification of the outcome to the inmate

Sexual abuse incident reviews were conducted for all substantiated and unsubstantiated closed cases

In addition, there were 17 reported allegations of sexual harassment:

- 15 involved inmate-on-inmate incidents and were investigated administratively:
- 14 were unsubstantiated
- 1 was unfounded
- 2 allegations involved staff-on-inmate incidents:
- 1 was unfounded
- 1 remained ongoing at the time of the audit

For all resolved sexual harassment cases, inmates were provided with written notification of the outcome.

Relevant policy is found in ADOC AR #454, p. 22, Section H.2.f, which states that following the conclusion of an LESD investigation, the inmate shall be notified whether the allegation was substantiated, unsubstantiated, or unfounded.

Provision (b):

Not Applicable.

Provision (c):

Per ADOC AR #454, p. 7, Section C.6, when an inmate alleges sexual abuse by a staff

	<p>member, the agency must inform the inmate if:</p> <ul style="list-style-type: none"> • The staff member is no longer employed by the agency • The staff member is no longer assigned to the facility • The staff member has been indicted or convicted on charges related to the abuse <p>All such notifications are required to be documented.</p> <p>Provision (d):</p> <p>As confirmed through documentation and interviews, the facility had no inmate-on-inmate sexual abuse cases resulting in indictment during the audit review period.</p> <p>Provision (e):</p> <p>According to the PAQ, there were 71 allegations of sexual abuse or sexual assault in the past 12 months. Details and outcomes are outlined under Provision (a).</p> <p>Provision (f):</p> <p>This provision is not subject to audit.</p> <p>CONCLUSION</p> <p>Based on a comprehensive review of documentation, staff interviews, investigative records, and inmate notifications, the Auditor concludes that the facility is in full compliance with PREA Standard §115.73 – Reporting to Inmates.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation (AR) #454 – Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Administrative Regulation (AR) #208 – Personnel, Employee Standards of Conduct and Discipline, dated August 17, 2005 4. ADOC Memorandum – PREA Compliance Standard 115.76: Disciplinary Sanctions for Staff <p>INTERVIEWS:</p>

Facility Head or Designee:

The Facility Head affirmed that all staff are subject to disciplinary sanctions, up to and including termination, for violations of the agency's policies related to sexual abuse, sexual harassment, or sexual misconduct. Key confirmations include:

- No staff have violated the agency's sexual abuse or sexual harassment policies within the past 12 months.
- No staff have been terminated or resigned in lieu of termination for such violations during the same period.
- Termination is the presumptive disciplinary sanction for any staff member found to have engaged in sexual abuse.

PROVISIONS:

Provision (a):

Per information provided in the PAQ and agency policies, ADOC staff are subject to disciplinary sanctions up to and including termination for any violation of sexual abuse or sexual harassment policies. Relevant directives include:

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

1. Engage in sexual abuse in any correctional or confinement setting,
 2. Are convicted of forced or coerced sexual activity in the community, or
 3. Are civilly or administratively adjudicated for such conduct,
- may face disciplinary sanctions.

AR #454, p. 13, Section V.4.d further affirms that staff are subject to disciplinary sanctions up to and including termination for violations of these policies.

Provision (b):

According to the PAQ and corroborated through interviews:

- There have been no staff violations of sexual abuse or harassment policies within the past 12 months.
- No staff have been terminated or resigned in lieu of termination for such violations.
- Termination continues to be the presumptive disciplinary response to findings of sexual abuse.

Supporting policy:

AR #208 – Employee Standards of Conduct and Discipline, outlines the agency's code of conduct and disciplinary procedures, including a matrix of sanctions ranging from

	<p>counseling to dismissal. The regulation also includes guidance on pre-dismissal conferences and documentation of resignations.</p> <p>Provision (c):</p> <p>The PAQ and interview data confirm that no staff were disciplined short of termination for such violations during the audit review period. However, agency policy stipulates that if lesser sanctions are imposed, they must:</p> <ul style="list-style-type: none"> • Be commensurate with the nature and severity of the offense, • Consider the employee's disciplinary history, and • Align with sanctions imposed for similar conduct by other staff. <p>This proportional disciplinary approach is detailed in AR #208.</p> <p>Provision (d):</p> <p>As reported in the PAQ and verified during interviews, the agency ensures that any staff terminations or resignations in lieu of termination for violations of sexual abuse or harassment policies are:</p> <ul style="list-style-type: none"> • Referred to law enforcement, unless the act was clearly non-criminal in nature, and • Reported to relevant licensing bodies when appropriate. <p>There were no such cases requiring referral or reporting in the past 12 months. AR #208 mandates these actions in compliance with Alabama law and ADOC procedures.</p> <p>CONCLUSION:</p> <p>Based on the comprehensive review of agency policies, documentation provided in the Pre-Audit Questionnaire, and interviews with facility leadership, the Auditor concludes that the facility meets all requirements of PREA Standard §115.76 – Disciplinary Sanctions for Staff.</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <p>1. Pre-Audit Questionnaire (PAQ) and supporting documentation</p>

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 process, the Facility Head confirmed that, within the previous twelve months, there were zero 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 due to sexual abuse or harassment violations.

PROVISIONS

Provision (a):

The facility reported on the PAQ that agency policy mandates any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates and be reported to law enforcement agencies—unless the conduct was clearly not criminal—as well as to any relevant licensing bodies. This was confirmed by the Facility Head during the interview.

In the past 12 months, there were zero instances where a contractor or volunteer was reported for engaging in sexual abuse.

This requirement is addressed in ADOC Administrative Regulation #454, page 13, Section V, 4, b, 4. The policy outlines that the ADOC Personnel Division or designee must notify potential employees and contractors that any false information or omission regarding the following misconduct is grounds for termination:

- Engagement in sexual abuse in a correctional or similar institutional setting.
- Conviction or adjudication (criminal, civil, or administrative) for engaging in forced or coerced sexual activity, or sexual activity without consent.

Additionally, all contractors are advised of their ongoing duty to disclose any such conduct.

Provision (b):

According to the PAQ, the facility takes appropriate remedial measures and evaluates whether to prohibit further inmate contact when a contractor or volunteer violates agency sexual abuse or sexual harassment policies, even if the violation does not constitute criminal sexual abuse. This was affirmed by the Facility Head.

In the past year, there have been no such violations or remedial actions taken.

	<p>This provision is supported by ADOC Administrative Regulation #216, Personnel, dated December 7, 2015. Pages 6-11 of this regulation include pre-employment forms which contain required questions ensuring screening for relevant past misconduct, aligned with PREA standards.</p> <p>CONCLUSION:</p> <p>Based on a comprehensive review of documentation and interviews, the Auditor finds the agency/facility meets all provisions of PREA Standard §115.77 concerning corrective action for contractors and volunteers</p>
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115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) and supporting documentation 2. ADOC Administrative Regulation (AR) #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Administrative Regulation (AR) #403, Disciplinary Procedures for Inmates <p>INTERVIEWS</p> <p>Facility Head or Designee:</p> <p>During the interview process, the Facility Head confirmed that the Alabama Department of Corrections (ADOC) prohibits all sexual activity between inmates. The Facility Head also verified:</p> <ul style="list-style-type: none"> • In the past twelve months, there were zero administrative findings of inmate-on-inmate sexual abuse. • In the past twelve months, there were zero criminal findings of guilt for inmate-on-inmate sexual abuse. • Inmates are only disciplined for sexual contact with staff when there is a finding that the staff member did not consent to the contact. • The agency prohibits disciplinary action against inmates who report sexual abuse in good faith, even if an investigation does not establish sufficient

evidence to substantiate the allegation.

Medical and Mental Health Staff:

Medical and mental health staff confirmed that the facility offers therapy, counseling, and other interventions to address and correct underlying reasons or motivations for abuse. Participation in such interventions may be required as a condition of access to programming and other benefits.

PROVISIONS

Provision (a):

The PAQ indicates that inmates are subject to disciplinary sanctions only:

- Following a formal disciplinary process after an administrative finding that they engaged in inmate-on-inmate sexual abuse.
- Following a criminal finding of guilt for such conduct.

The PAQ reports zero administrative and criminal findings for inmate-on-inmate sexual abuse during the past twelve months. The Facility Head confirmed this information.

Additionally, the facility reported that in the past year there were 69 allegations of sexual abuse and 8 of sexual harassment. All sexual abuse allegations were referred for criminal investigation. Of those, prosecution was declined in 22 cases, while the remaining 47 cases are still open.

Applicable Policy:

AR #454, Section H, outlines that inmates shall be subject to disciplinary sanctions only following a formal process after an administrative or criminal finding of sexual abuse.

Provision (b):

The PAQ states that sanctions are commensurate with the nature and circumstances of the abuse, the inmate's disciplinary history, and comparable sanctions for similar offenses committed by other inmates. The Facility Head confirmed this.

Applicable Policy:

AR #454, p. 22, H.2.e, mandates that each case be evaluated on its merits, taking into account the evidence, circumstances, and comparability to other cases.

Provision (c):

The PAQ states the facility's disciplinary process considers whether an inmate's

mental disabilities or mental illness contributed to their behavior. This was verified by the Facility Head.

Applicable Policy:

AR #454, p. 22, H.2.e, instructs careful evaluation of cases including consideration of mental health factors that may have influenced behavior.

Provision (d):

The PAQ confirms the facility offers therapy, counseling, and other interventions to address underlying causes of sexual abuse. These may be required as a condition of access to programming or other benefits. This was verified through interviews with the IPCM and medical/mental health staff.

Provision (e):

The PAQ affirms that the agency disciplines inmates for sexual contact with staff only when there is a finding that the staff member did not consent. This was verified by the Facility Head and IPCM.

Applicable Policy:

AR #454, p. 22, H.2.e, requires that each case be evaluated carefully to determine consent and circumstances.

Provision (f):

The PAQ reports 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 unsubstantiated. This was confirmed by the Facility Head and IPCM.

Applicable Policy:

AR #454, p. 22, H.2.c, states that inmates who report abuse shall not be disciplined solely because their allegations are unfounded or withdrawn.

Provision (g):

The PAQ indicates that the agency prohibits all sexual activity between inmates and only considers such activity as sexual abuse if coercion is determined. This was verified by the Facility Head.

Applicable Policy:

ADOC Rules Violation Definitions, RV#912, defines non-forcible sexual activity and notes that any inmate sexual contact is prohibited under agency rules.

CONCLUSION:

Based on the review of the PAQ, supporting documentation, facility policies, and staff

	interviews, the Auditor has determined that the agency/facility meets all provisions of PREA Standard §115.78 regarding disciplinary sanctions for inmates
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 3. ADOC Form 454-C, PREA Risk Factors Checklist 4. Risk Assessment Checklist 5. Mental Health Referral 6. Medical Referral 7. Classification Spreadsheet <p>INTERVIEWS:</p> <p>Risk Screening Staff:</p> <p>Through the interview process, staff who conduct intake screenings confirmed that all medical and mental health records are stored in a separate and secure database. This database is only accessible to medical or mental health staff, and information is shared with classification and high-level staff strictly on a need-to-know basis.</p> <p>Medical and Mental Health Staff:</p> <p>During the interview process, medical and mental health staff confirmed that they obtain informed consent prior to disclosing information about prior sexual victimization, unless the victim is under the age of 18. Inmates who disclose prior victimization are offered a follow-up meeting with a mental health professional within 14 days of intake. If the screening indicates the inmate is at substantial risk for victimization or shows aggressiveness or a history of victimization, appropriate mental health or medical referrals are made.</p> <p>Inmates Who Disclosed Prior Victimization:</p> <p>One inmate who was interviewed who disclosed prior victimization during intake was interviewed on-site. The inmate confirmed that a mental health referral was attempted on the day of intake for an appointment the following week. However, the inmate declined the referral.</p> <p>PROVISIONS:</p>

Provision (a):

The facility reported on the PAQ that inmates who disclose prior sexual victimization during screening are provided with timely, unimpeded access to emergency medical treatment and crisis intervention services.

According to the PAQ, all inmates who disclose prior sexual victimization during the screening process are offered follow-up meetings with medical or mental health practitioners. All such encounters are documented.

The policy that addresses this provision is ADOC Administrative Regulation (AR) #454, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 15, F. The regulation specifies that inmates at elevated risk for victimization or exhibiting sexually aggressive behavior are to meet with a mental health professional to review their screening results. If an inmate has a history of prior sexual victimization or sexual aggression, the mental health professionals offer a follow-up meeting within 14 days of intake.

Provision (b):

The PAQ indicates that inmates undergo reassessment for risk of victimization or abusiveness within 30 days of arrival. The ADOC AR #454, p. 16, F, 6, mandates that an inmate's risk level be reassessed within 30 days of arrival, using the risk screening assessment and any additional relevant information. The reassessment must also occur when warranted by a referral, request, sexual abuse incident, or receipt of new information that impacts the inmate's risk.

A review of 50 randomly selected inmate records revealed that all 50 had received PREA-related information at intake, including a signed inmate awareness acknowledgment, signed PREA general information sheet, and a signed confidentiality Consent Form and viewing of the PREA video.

A review of 52 randomly selected inmate records revealed that each inmate was reassessed within 30 days of arrival.

Provision (c):

According to the facility's policy, if a screening indicates that an inmate has previously perpetrated sexual abuse, whether in an institutional setting or in the community, the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of intake.

Provision (d):

ADOC AR #454, p. 16, F, 9, specifies that the intake screening and PREA Mental Health Assessment information must be used to make individualized safety determinations. These determinations assist with the initial classification and institutional assignment of inmates, including their work, education, and program assignments, in line with the

	<p>ADOC Classification Manual (AR433 and AR435). The goal is to keep inmates at high risk of sexual victimization separate from those at high risk of being sexually abusive.</p> <p>Provision (e):</p> <p>According to the PAQ, medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization, provided the victim is not under the age of 18. The IPCM confirmed this process during the interview and verification.</p> <p>CONCLUSION:</p> <p>Based on the review and analysis of all available evidence, the Auditor has determined that the agency/facility meets the standard regarding medical and mental health screenings and the management of inmates' history of sexual abuse.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation (AR) 454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 3. ADOC Form MH-008, Referral to Mental Health 4. ADOC Memorandum of Understanding (MOU) with the Alabama Coalition Against Rape (ACAR) <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</p>

emergency contraception and STI prophylaxis as medically appropriate and in alignment with recognized standards of care.

Inmates Who Reported Sexual Abuse:

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.

	<p>The Institutional PREA Compliance Manager (IPCM) confirmed there were 51 SANE transports in the past 12 months.</p> <p>Provision (b):</p> <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>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	DOCUMENTATION:

1. Pre-Audit Questionnaire (PAQ)
2. ADOC Administrative Regulation #454
3. ADOC Form MH-008, Referral to Mental Health
4. ADOC MOU with ACAR for on-going treatment (Must have inmate signature)

INTERVIEWS:

Medical and Mental Health Staff Interviews

During the interview process, medical and mental health staff indicated that treatment is provided immediately based on their professional judgment. Medical and mental health staff offer evaluation and treatment to all inmates who have been victimized by sexual abuse. Services provided are consistent with the community level of care.

Medical and mental health staff confirmed that treatment services are provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with any investigation arising from the incident. Furthermore, medical and mental health staff work together to ensure the inmate receives appropriate care. In accordance with professionally accepted standards of care and when medically appropriate, emergency contraception and sexually transmitted disease prophylaxis are offered.

Additionally, mental health staff reported that an evaluation of all known inmate-on-inmate abusers is attempted within 60 days of learning of such abuse history. Treatment is offered when deemed appropriate and beneficial.

Medical staff also reported that inmate victims of sexual abuse are offered tests for sexually transmitted infections as medically appropriate.

Inmates Who Reported Abuse

Through the interview process, inmates who reported sexual abuse confirmed the following:

- Facility staff responded promptly to the incident report.
- They were offered referrals for medical and mental health treatment.
- They were referred for forensic examination immediately.
- Those referred for a forensic examination reported being offered a victim advocate, who accompanied them and provided information about the examination process.
- They were not required to pay for any medical treatment.
- 100% of inmates reported that they were not asked to take a polygraph test.
- Inmates were notified in writing about the results of the investigation.

PROVISIONS:

Provision (a)

The policy addressing this provision is ADOC Administrative Regulation #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016, p. 19, G, 3, d, specifying that inmates shall receive medical and mental health evaluations and treatment offered to all inmates who have been victimized by sexual abuse.

A Memorandum of Understanding (MOU) between ADOC and the Alabama Coalition Against Rape (ACAR) facilitates services related to the implementation of the Prison Rape Elimination Act (PREA). ACAR is contracted to provide confidential emotional support services to inmates within ADOC custody.

All forensic medical exams and SAFE/SANE (Sexual Assault Nurse/Examiner) personnel are available at the One Place Family Justice Center, 530 S. Lawrence Street, Montgomery, AL 36104. SAFE/SANE practitioners are on staff, with on-call availability 24/7 to conduct rape kit examinations, provide results to ADOC, and address other issues related to the Sexual Assault Response Team (SART) exam.

Records produced by the facility confirmed compliance with the community standard of care for services such as sexually transmitted infection testing, prophylaxis treatment, psychiatric and psychological services, and crisis intervention. These services are free of charge, irrespective of whether the abuser is named or the inmate cooperates with the investigation.

Provision (b)

The policy addressing this provision is ADOC Administrative Regulation #454, p. 19, G, 3, e, which dictates that the evaluation and treatment of victims shall include follow-up services, treatment plans, and referrals for continued care, if necessary, following the inmate's transfer or release from custody.

Provision (c)

Information from medical staff supports compliance with evaluation, follow-up, treatment plans, and referral services. Documentation reviewed confirms the attentiveness of staff to follow-up care, with detailed and professional notes on evaluations and follow-up appointments.

Provision (d)

The policy addressing this provision is ADOC Administrative Regulation #454, p. 19, G, 3, which mandates that inmates who are victims of sexual abuse or harassment are offered timely information about access to emergency contraception, pregnancy tests, sexually transmitted infection testing, and prophylaxis when medically appropriate.

Provision (e)

The PAQ confirms that if pregnancy results from sexual abuse while incarcerated, victims will receive timely and comprehensive information about and access to all lawful pregnancy-related medical services.

	<p>Provision (f)</p> <p>The policy addressing this provision is ADOC Administrative Regulation #454, p. 19, G, 3, which mandates the provision of information and access to emergency contraception, pregnancy tests, sexually transmitted infection testing, and prophylaxis, as medically appropriate.</p> <p>Provision (g)</p> <p>The policy addressing this provision is ADOC Administrative Regulation #454, p. 19, G, 3, e, which ensures all ongoing treatment services are provided to the victim without financial cost, regardless of whether the victim names the abuser or cooperates with the investigation.</p> <p>Provision (h)</p> <p>The policy addressing this provision is ADOC Administrative Regulation #454, p. 19, G, 3, g, which mandates an attempt to conduct a mental health evaluation of known inmate-on-inmate abusers within 60 days of learning of such abuse history, and to offer treatment where appropriate. All referrals for mental health services are made using ADOC Form MH-008, Referral to Mental Health.</p> <p>CONCLUSION:</p> <p>Based on the review and analysis of all available evidence, the Auditor has determined that the agency/facility meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims.</p>
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115.86 Sexual abuse incident reviews	
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 3. ADOC Form 454-E, Sexual Abuse Incident Review 4. Sexual Assault Incident Review Documentation <p>INTERVIEWS</p> <p>Facility Head Interview</p> <p>The Facility Head confirmed that the Incident Review Team (IRT) is comprised of executive-level and upper-level management officials representing multiple</p>

<p>departments. The Facility Head's designee emphasized the facility's commitment to considering and incorporating recommendations from the team.</p> <p>PREA Compliance Manager (PCM)</p> <p>The PCM indicated that the Sexual Abuse Incident Review (SAIR) report is submitted to both the PCM and the Facility Head. The PCM also confirmed that the SAIR is conducted within thirty (30) days of the conclusion of the investigation.</p> <p>Incident Review Team (IRT)</p> <p>IRT members confirmed that the team includes upper-level management, with input from line supervisors, investigators, and medical or mental health practitioners. Team members stated that all criteria outlined in the PREA standard are considered in the review process. SAIR reports are submitted to the Facility Head and the PCM.</p> <p>PROVISIONS</p> <p>Provision (a)</p> <p>The facility reported in the PAQ that it conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation is determined to be unfounded. This was verified through interviews with the Facility Head.</p> <p>According to ADOC Administrative Regulation #454 (dated January 4, 2016, p. 20, H.1.k), a review team—including upper-level management, line supervisors, investigators, and medical/mental health practitioners—shall conduct a review within 30 days of substantiated or unsubstantiated allegations of sexual abuse or staff-on-inmate sexual harassment.</p> <p>Summary of Sexual Abuse Investigations (Past 12 Months):</p> <ul style="list-style-type: none">• Total Sexual Abuse Allegations: 54• Inmate-on-Inmate: 52 (All criminally investigated)• 5 unfounded• 33 unsubstantiated• 14 ongoing• Staff-on-Inmate: 2 (Criminal investigations)• 1 unfounded• 1 ongoing <p>Medical/Mental Health Services: Offered in all cases</p> <p>Retaliation Monitoring: Conducted per policy</p> <p>Victim Notification: Provided in all closed cases</p> <p>SAIR Completed: For all substantiated/unsubstantiated cases within 30 days</p>
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Sexual Harassment Allegations:

- 17 total
- 15 inmate-on-inmate (administrative investigations)
- 14 unsubstantiated
- 1 unfounded
- 2 staff-on-inmate (administrative investigations)
- 1 unfounded
- 1 ongoing

In all resolved cases, victims were promptly notified of results.

Provision (b)

The PAQ indicated that the facility ordinarily conducts the SAIR within 30 days of concluding the investigation. In the past year, 27 applicable investigations were followed by a timely SAIR. Policy guidance is found in ADOC AR #454 (p. 20, H.1.k), as noted above.

(See Provision (a) for details.)

Provision (c)

The PAQ confirmed, and interviews with the Facility Head validated, that the SAIR team includes upper-level management officials, with input from line supervisors, investigators, and health practitioners. This multidisciplinary approach is consistent with policy requirements outlined in ADOC AR #454 (p. 20, H.1.k).

(See Provision (a) for details.)

Provision (d)

The facility prepares a report of findings from each SAIR that includes determinations and recommendations for improvement. These reports are submitted to the Facility Head and PCM. Interviews with the Facility Head, PCM, and IRT members verified this process.

The IRT reviews and documents the following:

- Need for policy or practice changes
- Motivation factors (e.g., race, gender identity, gang affiliation)
- Incident location and potential enhancements
- Adequacy of staffing during the incident
- Staff background/training review
- Surveillance and monitoring technology considerations

(See Provision (a) for details.)

Provision (e)

	<p>The PAQ and interviews confirmed that the facility implements SAIR recommendations or documents the reasons for non-implementation. The Facility Head affirmed that corrective actions are prioritized and tracked accordingly.</p> <p>CONCLUSION</p> <p>Based on the review of documentation, interviews, and facility practices, the auditor concludes that the facility meets all provisions of PREA Standard §115.86 – Sexual Abuse Incident Reviews.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454: Inmate Sexual Abuse and Harassment 3. Most Recent Survey of Sexual Victimization (Form SSV-2) 4. Most Recent Annual PREA Data Report 5. ADOC PREA Website: http://www.doc.state.al.us/PREA <p>INTERVIEWS:</p> <p>Agency Contract Administrator</p> <p>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.</p> <p>PROVISIONS:</p> <p>Provision (a):</p> <p>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:</p> <ul style="list-style-type: none"> • Collecting and maintaining data on every allegation of sexual abuse and harassment. • Utilizing sources such as inmate polling, grievances, incident reports, investigation files, and documentation of announced and unannounced

rounds.

- Employing standardized definitions and methodologies for analysis.
- 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:

- Collecting incident-based documentation such as investigative files and incident reviews.
- Ensuring the data is sufficient to fully respond to the federal survey.
- 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.

Provision (d):

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.

Provision (e):

AR #454 (p. 7, Section D) assigns responsibility to the ADOC General Counsel for ensuring that all inmate housing contracts include PREA compliance provisions.

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:

- Zero tolerance for custodial sexual misconduct.
- Mandatory reporting of suspected or confirmed incidents.
- Access to the ADOC's PREA Contract Monitor.
- Full cooperation during audits conducted by DOJ-certified auditors.
- Required training for all facility staff and contractors.

	<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>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. ADOC Administrative Regulation #454 3. 2023 Survey of Sexual Victimization (Form SSV-2) 4. 2024 Annual Data Report 5. Agency Website: http://www.doc.state.al.us/PREA <p>INTERVIEWS</p> <p>Agency Head or Designee</p> <p>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.</p> <p>Facility Head or Designee</p> <p>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.</p> <p>PREA Director (PD)</p> <p>The PREA Director affirmed that the agency reviews data collected pursuant to</p>

§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:

- Identifying problem areas;
- Implementing ongoing corrective actions;
- 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 reports that identify problem areas, recommend corrective actions, and include year-to-year institutional comparisons.

Provision (b):

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.

The Auditor reviewed the most recent annual report (2024) and confirmed that it complies with PREA standards, including a year-over-year analysis to evaluate progress.

Provision (c):

The PAQ states that the agency makes the annual report publicly accessible via its website.

The Auditor verified that the ADOC PREA webpage (<http://www.doc.state.al.us/PREA>) hosts all annual reports dating back to 2013.

Provision (d):

	<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>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>DOCUMENTATION</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • ADOC Administrative Regulation (AR) #454, Operations & Legal, Inmate Sexual Abuse and Harassment, dated January 4, 2016 • Alabama Department of Corrections Website: http://www.doc.state.al.us/PREA <p>INTERVIEWS</p> <p>PREA Director (PD)</p> <p>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:</p> <ul style="list-style-type: none"> • 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. <p>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.</p>

	<p>PROVISIONS</p> <p>Provision (a):</p> <p>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.</p> <p>Provision (b):</p> <p>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.</p> <p>Provision (c):</p> <p>The PAQ states that:</p> <ul style="list-style-type: none">• 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. <p>Provision (d):</p> <p>ADOC Administrative Regulation #454 (p. 26, Sections L.1.d & L.1.e) specifies the following:</p> <ul style="list-style-type: none">• All PREA-related data must be securely retained for at least 10 years.• 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. <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>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <ol style="list-style-type: none">1. Publicly Accessible Website2. The Alabama Department of Corrections (ADOC) maintains a publicly accessible PREA webpage at: http://www.doc.state.al.us/PREA3. This site provides access to PREA audit reports for all ADOC facilities and aggregated data reports concerning sexual abuse and sexual harassment, in full compliance with PREA standards. <p>INTERVIEWS</p> <p>Agency Head or Designee:</p> <p>The Agency Head’s designee confirmed that every facility under ADOC’s jurisdiction has undergone a PREA audit within the most recent three-year audit cycle. All audit reports are posted publicly on the ADOC PREA webpage to ensure transparency and accountability.</p> <p>PREA Director:</p> <p>The PREA Director stated that the current audit is occurring in the second year of the fourth PREA audit cycle, in accordance with PREA’s audit timeline requirements.</p> <p>PROVISIONS</p> <p>Provision (a):</p> <p>The Agency Head’s designee confirmed that each ADOC facility was audited during the previous three-year audit cycle. These audit reports are available on the ADOC PREA webpage, which also includes annual data reports on sexual abuse incidents, consistent with PREA requirements. Website: http://www.doc.state.al.us/PREA</p> <p>Provision (b):</p> <p>The ADOC PREA webpage includes facility-specific reports and annual aggregated data reports in compliance with PREA’s sexual abuse data reporting standards. Website: http://www.doc.state.al.us/PREA</p> <p>Provisions (c) – (g):</p> <p>Not Applicable (N/A)</p> <p>Provision (h):</p> <p>During the on-site audit, the Auditor was granted unrestricted access to all areas of</p>

	<p>the facility. The Institutional PREA Compliance Manager (IPCM) was available throughout the visit to facilitate access and accompany the Auditor as needed.</p> <p>Provision (i):</p> <p>Throughout the audit, the ADOC and facility staff fully cooperated and provided all requested documentation and information in a complete and timely manner.</p> <p>Provisions (j) – (l):</p> <p>Not Applicable (N/A)</p> <p>Provision (m):</p> <p>The facility provided the Auditor with a secure and private space to conduct all necessary interviews during the on-site portion of the audit.</p> <p>Provision (n):</p> <p>Inmate interviews confirmed that incarcerated individuals were given the opportunity to send confidential correspondence to the Auditor, in a manner consistent with legal correspondence protocols.</p> <p>Provision (o):</p> <p>Not Applicable (N/A)</p> <p>CONCLUSION</p> <p>Based on a thorough review of documentation, interviews, and on-site observations, the Auditor concludes that the agency/facility is in full compliance with PREA Standard §115.401 concerning the frequency and scope of audits. All applicable provisions of the standard are met</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>DOCUMENTATION</p> <p>1. Alabama Department of Corrections Publicly Accessible Website http://www-.doc.state.al.us/PREA.</p> <p>PROVISIONS</p> <p>Provision (a) – (e)</p>

Not Applicable. These provisions do not apply to the agency's responsibilities under this standard.

Provision (f):

The Alabama Department of Corrections (ADOC) maintains a publicly accessible PREA webpage at <http://www.doc.state.al.us/PREA>. 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.

CONCLUSION:

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

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
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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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
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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
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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
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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
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	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.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	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
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	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
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	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
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	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.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

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

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

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

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

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

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	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
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	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
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	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
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	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
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	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
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

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

(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>