

## ADMINISTRATIVE POLICIES AND PROCEDURES

State of Tennessee Department of Correction

Approved by: Derrick D. Schofield

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Effective Date: May 15, 2015

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PCN 14-7 (4/1/14) PCN 13-35 (8/15/13)

Subject: PRISON RAPE ELIMINATION ACT (PREA) SCREENING, CLASSIFICATION, EDUCATION, AND MONITORING

I. <u>AUTHORITY:</u> TCA 4-3-603, TCA 4-3-606, TCA 39-13-501, TCA 39-13-503, TCA 39-16-408, TCA 40-39-202, the Prison Rape Elimination Act of 2003, 42 U.S.C. 15601 through 15609 (PREA), and Title 28 CFR Part 115.

- II. <u>PURPOSE:</u> To prevent sexual abuse of inmates and residents under the jurisdiction of Tennessee Department of Correction (TDOC).
- III. <u>APPLICATION:</u> All TDOC staff, inmates, residents, other employees as defined within this policy, and privately managed institutions.

#### IV. DEFINITIONS:

- A. <u>Employee:</u> For the purpose of this policy, any full-time or part-time staff member, TRICOR employees, volunteer, vendor, intern, contractor, or employee of a contractor.
- B. <u>Intersex</u>: A condition usually present at birth that involves reproductive, genetic, or sexual anatomy that does not seem to fit the typical definitions of female or male.
- C. <u>Need to know:</u> A criterion for limiting access of certain sensitive information to individuals who require the information to make decisions or take action with regard to an inmate's safety or treatment or to the investigative process.
- D. <u>PREA Screening System Application</u>: Computer application located on the TDOC intranet that is used to screen inmates upon intake and transfer for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This application replaces Sexual Aggressor/Victim Classification Screening (CR-3737 for females and CR-3638 for males).
- E. <u>Resident:</u> Any person confined within a community confinement facility, (e.g. halfway houses and residential confinement supervised transitional centers, etc.)
- F. <u>Sexual Aggressor/Victim Classification Screening (CR-3737 for females and CR-3638 for males):</u> Forms to be used <u>ONLY</u> for the screening of residents within a TDOC contracted placement, such as halfway houses and residential confinement supervised by the TDOC Division of Community Supervision. (NOTE: these programs will never have intranet access).
- G. <u>Transgender</u>: A term describing persons whose gender identity and/or expression do not conform to the gender roles assigned to them at birth. Gender identity is determined by medical staff only.

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- V. <u>POLICY:</u> It is the policy of the TDOC to provide a safe, humane, and appropriately secure environment, free from threat of sexual abuse and sexual harassment for all inmates, by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged and substantiated sexual assaults. TDOC has zero tolerance for incidences of sexual abuse and sexual harassment within its facilities.
- VI. <u>PROCEDURES:</u> Training for TDOC staff shall be as outlined below. Privately managed facility staff shall be trained following their organizations policies, procedures and the PREA Act of 2003.

#### A. Employee Training:

- 1. All newly-hired employees who undergo basic training at TCA shall receive PREA-related training while there.
- 2. All new hires who do not attend basic training at TCA shall receive such PREA-related training as part of their institutional orientation.
- 3. All institutional employees shall receive updated PREA-related training every two years as part of their in-service training curriculum.
- 4. Central Office staff shall receive PREA-related training every two years that has been approved by the TDOC PREA Coordinator.
- 5. The Tennessee Correction Academy (TCA) will be responsible for the development and distribution of the PREA course lesson plans annually. All lesson plans or materials utilized for pre-service and in-service training on inmate sexual abuse and sexual harassment shall be approved by TDOC PREA Coordinator and TDOC General Counsel. At a minimum the training shall include:
  - a. TDOC policy on zero tolerance for sexual abuse and/or sexual harassment
  - b. How to fulfill their responsibilities under TDOC sexual abuse and sexual harassment, prevention, detection, reporting, and response policies and procedures.
  - c. Inmates' rights to be free from sexual abuse and sexual harassment
  - d. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
  - e. The dynamics of sexual abuse and sexual harassment in confinement
  - f. The common reactions of sexual abuse and sexual harassment victims
  - g. How to detect and respond to signs of threatened and actual sexual abuse
  - h. How to avoid inappropriate relationships with inmates
  - i. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates

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- j. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities
- 6. Security staff shall be trained on how to conduct cross-gender frisk searches and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. No inmate shall be searched solely for the purpose of determining gender status or condition, such as intersex, transgender.
- 7. Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses female inmates, or vice versa.
- 8. The Academy and facilities shall document through signature that employees understand the training they have received using Employee PREA Training Acknowledgement Form, CR-Pending.

#### B. Inmate Orientation and Education:

- 1. The orientation information provided to inmates shall address the following and shall be documented in the inmate file on Orientation Acknowledgement, CR-2110 (See Policy #404.05 for form sample):
  - a. Prevention
  - b. Self-protection
  - c. Reporting sexual assaults/harassment and protection from retaliation
  - d. Treatment and counseling
  - e. TDOC zero tolerance for sexual assault and sexual harassment
  - f. Videos provided by TDOC PREA Coordinator
  - g. Use of PREA TIPLINE and information about the telephone number

Information regarding these topics will be approved by the TDOC PREA Coordinator and will be included in the *TDOC Inmate Rules and Regulations Handbook*. Site-specific information is to be provided in the Institutional Handbook.

- 2. Within 30 days of intake, the facility shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.
- 3. Inmates who have not received verbal and written PREA orientation and education shall receive information immediately. Documentation of this orientation and education shall be included in the inmate file on Orientation Acknowledgement, CR-2110.

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4. Inmate education shall be in a format accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills. Documentation of inmate participation in these education sessions shall be maintained.

5. All TDOC and privately managed institutions shall provide PREA-related refresher information and education as directed by the TDOC PREA Coordinator.

#### C. Screening/Assessing Inmates at Reception Centers:

- 1. Classification teams or unit management teams from diagnostic classification units will interview and evaluate all inmates for sexually aggressive/victim tendencies utilizing the PREA Screening System Application located on the TDOC intranet within 72 hours of arrival. User security access to this system shall be requested by the Associate Warden of Treatment (Associate Warden at privately managed facilities) to the TDOC PREA Coordinator. Additional information shall be gathered utilizing the Level of Service/Case Management Inventory with a focus on Sections 1.8 Antisocial, Sections 2 (Perpetrator) and Section 4 (Victim). Any conflicting information with the TDOC Sexual Aggressor or Sexual Victim screening should be reported to and resolved by the classification coordinator. The inmate's LS/CMI scores shall be reviewed within 30 days and is considered the required rescreening by the PREA standard.
- 2. The medical staff shall review for a history of aggressive sexual behavior or sexual abuse/victimization, utilizing information from the county officials and the medical/mental health screening on the day of arrival.
- 3. Inmates arriving at diagnostic centers who will be excluded from an LS/CMI assessment in accordance with Policy #513.04.1, shall receive a PREA screening as any other inmate entering the TDOC system. Within 30 days, the inmate will be rescreened with the PREA screening instrument. Once an inmate has been transferred to the receiving institution, his/her LS/CMI and PREA screening shall be reviewed.
- 4. Inmates refusing to answer particular questions or not disclosing complete information shall not be disciplined. These questions include:
  - a. Whether or not the inmate has a mental, physical, or developmental disability
  - b. Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming
  - c. Whether or not the inmate has previously experienced sexual victimization
  - d. The inmate's own perception of vulnerability
- 5. Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and are identified as Sexual Aggressors or Sexual Victims are the responsibility of the unit management team. This information is strictly need-to-know and housing, cell assignments, work, education and program assignments shall be made with a goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. If mental health intervention is indicated, a referral shall be made in accordance with Policy #113.82.

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a. No male inmate will be double celled (See Policy #506.14.1) until the required screening has been completed. Those inmates who are deemed sexual aggressors or sexual victims will be appropriately housed until assessed by mental health professionals or classification.

- b. Since the Tennessee Prison for Women serves as the female diagnostic classification center and the diagnostic unit is designed with single cells, the screening shall be completed within 14 days.
- c. Inmates who enter TDOC and are identified as Sexual Aggressors or Sexual Victims on the PREA Screening System Application to the TDOC intranet shall be considered for protective custody placement (See Policy #404.09) or placement in an institutional setting considered more controlled than general population. Clinical services shall be offered to those inmates. Clinical decisions regarding these inmates shall be the responsibility of the medical and mental health staff at the reception center.

#### 6. Referrals and Monitoring:

- a. Any inmate identified as a Sexual Aggressor shall be monitored quarterly by the unit management team and documented on TOMIS screen LIBC for a minimum of one calendar year and is to be re-evaluated at annual reclassification.
- b. Inmates who enter TDOC as sex offenders or inmates identified as Sexual Aggressors will be advised of the sex offender treatment/programming eligibility requirements by the counseling or mental health staff involved in the reception and classification process, and that eligibility criteria must be met to be able to enter this program.
- c. Those inmates identified as Victims shall be re-evaluated within 30 days by the mental health staff if placed in segregated housing involuntarily. If extension is necessary, there shall be documentation of the basis for concern for inmate safety and reason for no alternative means of separation.
- d. Inmates who have been separated from the general population shall be re-evaluated every 30 days (in accordance with Title 28 CFR Part 115) to determine whether there is a continuing need for separation.
- e. Inmates identified as transgender or intersex shall be considered on a case-by-case basis. (See Policy #113.37) These identified inmates shall be reclassified every six months by the assigned counselor to review any threats to safety experienced by the inmate.

#### D. Additional Screening/Assessing:

1. Inmates shall be assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This screening shall ordinarily take place with 72 hours of arrival at the facility.

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2. Within 30 days of the inmate's arrival at a facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional relevant information received by the facility since the intake screening.

- 3. If an inmate has not yet received an assessment utilizing the latest PREA screening application, he/she will receive one at his/her next reclassification.
- 4. Inmates will be rescreened using the PREA Screening System Application located on the TDOC intranet upon triggering events or referrals that occur based upon observation from staff, upon each occurrence of a guilty finding for a disciplinary of a sexual nature, or upon each confirmed finding of victimization.
- 5. An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. If mental health intervention is indicated, a referral shall be made in accordance with Policy #113.82.
- 6. Once an inmate is identified as a Sexual Aggressor or Sexual Victim at any time during his/her incarceration, the inmate shall be evaluated for appropriate housing and programs.

## E. <u>Sexual Contact/Harassment between Inmates and Employees (Residents/Employees) and Inmates and Inmates (Residents/Residents)</u>:

- 1. Acts of sexual abuse against inmates/residents, retaliation against inmates/residents who refuse to submit to sexual activity, or intimidation of a witness is prohibited.
- 2. Retaliation against individuals because of their involvement in the reporting or investigation of sexual assault or sexual contact/harassment is prohibited.
- All incidents of sexual abuse or related intimidation/retaliation will result in corrective and/or disciplinary action, up to and including termination. Failure of employees to report incidents of sexual assault or sexual contact/harassment will result in corrective and/or disciplinary action.
- 4. Notification of all cases (regardless of confirmation) involving sexual abuse will be made immediately to the Office of Investigations and Compliance (OIC). When appropriate, the OIC Section will refer such cases to the District Attorney for criminal prosecution. Investigations shall be conducted in accordance with Policy #502.06.2.

#### F. Use of Screening Information:

- 1. Information from the risk screening shall be utilized to provide housing, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.
- 2. Information from the risk screening shall be restricted to those employees whose duties require such access. Each facility Associate Warden of Treatment/Assistant Warden at privately managed facilities shall designate by position the staff eligible to have access to risk screening information.

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- G. The Director of Community Supervision shall ensure that residents are screened within 72 hours of arrival at a TDOC contracted community residential or confinement center and that a documentation process regarding PREA education and notification to residents is in effect.
- VII. <u>ACA STANDARDS:</u> 4-4084-1, 4-4281 through 4-4281-8, 4-4371, and 4-4406.
- VIII. <u>EXPIRATION DATE:</u>



# TENNESSEE DEPARTMENT OF CORRECTION FEMALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING

|        |               | RESIDENT NAME (Please Print)  | NUME      | BER       |      |
|--------|---------------|---|-----------|-----------|------|
|        |               | STAFF MEMBER(S) (Please Print)  | DAT       | E         |      |
|        |               |   |           |           |      |
|        |               | SEXUAL VICTIM FACTORS   | YES       | NO        |      |
|        | 1.            | Prior history of violent offenses   |           |           |      |
|        | 2.            | Former victim of Institution (Prison or Jail) rape or sexual assault                              |           |           |      |
|        | 3.            | Youth age (25 or younger) or Elderly (60 or older)  |           |           |      |
|        | 4.            | Small in physical stature (Less than 110 lbs.)  |           |           |      |
|        | 5.            | Developmental disability/Mental illness/Medical issues which may contribute to victimization      |           |           |      |
|        | 6.            | First incarceration ever (Prison or Jail)   |           |           |      |
|        | 7.            | Inmate is or is perceived to be lesbian, bisexual, transgender, intersex or gender non-conforming |           |           |      |
|        | 8.            | History of prior sexual victimization   |           |           |      |
|        | 9.            | History of facility consensual sex  |           |           |      |
|        | 10.           | Prior history of protective custody (Adult or Juvenile)   |           |           |      |
|        | 11.           | Conviction for sex offenses against an adult or child   |           |           |      |
| Is the | e offender fo | ound to be a:   |           |           |      |
|        | VICTIM - I    | f question #2 is answered yes, the offender is classified as a <b>victim</b> tions.               | regardle  | ss of the |      |
|        | POTENTIA      | L VICTIM - If 3 or more of questions #2 – 10 are checked, the offer tial victim.                  | nder is c | lassified |      |
|        | •             | or less of questions # 2-10 are checked, the classification design                                | gnations  | are Not   |      |
|        |               | end another victim finding level?   |           |           |      |
| If yes | s, which lev  | el is recommended?   Potential Victim   N/A   Monitorin   | ng 🗆      | YES [     | □ NO |
| Expla  | anation:      |   |           |           |      |
|        |               |   |           |           |      |

## FEMALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING continued

|             |                  | RESIDENT NAME (Please Print)   | NUMB      | ER      |
|-------------|------------------|--|-----------|---------|
|             |                  | STAFF MEMBER(S) (Please Print)   | DAT       | E       |
|             |                  | SEXUAL AGGRESSOR FACTORS   |           |         |
|             |                  |  | YES       | NO      |
|             | 1.               | Any history of institutional (prison or jail) sexual aggressor behavior  |           |         |
|             | 2.               | Current or prior rape conviction   |           |         |
|             | 3.               | Any history of sexual abuse/sexual assault toward others   |           |         |
|             | 4.               | Any history of physical abuse toward others  |           |         |
|             | 5.               | Any history of domestic violence toward others   |           |         |
|             | 6.               | Confirmed gang affiliation   |           |         |
| ls the offe | ender            | found to be a:   |           |         |
| rega<br>Any | rdless<br>reside | AGGRESSOR - If question #1 is yes, the offender is classified as a set of the other questions.  ent classified as SEXUAL AGGRESSOR is to be monitored quarterly fodar year and is to be re-evaluated for monitoring purposes at annual re- | or a mini |         |
|             |                  | AL SEXUAL AGGRESSOR - If 2 or more of questions #2 - 6 are classified as a potential sexual aggressor.   | e check   | ed, the |
|             |                  | or less of questions # 2 6 are checked, the classification design e (N/A).   | ations a  | are No  |
| Do y        | ou re            | commend another aggressor finding level?   |           |         |
| •           |                  | n level is recommended?  | _         |         |
| ☐ Po        | tentia           | I Sexual Aggressor   | YES       |         |

☐ LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and

Explanation:

section 4 (other client issues).

CR-3737 (Rev. 05-15)



# TENNESSEE DEPARTMENT OF CORRECTION MALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING

|             |               | RESIDENT NAME (Please Print)  | NUME      | BER        |
|-------------|---------------|---|-----------|------------|
|             |               |   |           |            |
|             | ;             | STAFF MEMBER(S) (Please Print)  | DAT       | ΓE         |
|             |               | SEXUAL VICTIM FACTORS   |           |            |
|             |               |   | YES       | NO         |
|             | 1.            | Prior history of violent offenses   |           |            |
|             | 2.            | Former victim of Institution (Prison or Jail) rape or sexual assault                          |           |            |
|             | 3.            | Youth age (25 or younger) or Elderly (60 or older)  |           |            |
|             | 4.            | Small in physical stature (Less than 110 lbs.)  |           |            |
|             | 5.            | Developmental disability/Mental illness/Medical issues which may contribute to victimization  |           |            |
|             | 6.            | First incarceration ever (Prison or Jail)   |           |            |
|             | 7.            | Inmate is or is perceived to be gay, bisexual, transgender, intersex or gender non-conforming |           |            |
|             | 8.            | History of prior sexual victimization   |           |            |
|             | 9.            | History of facility consensual sex  |           |            |
|             | 10.           | Prior history of protective custody (Adult or Juvenile)                                       |           |            |
|             | 11.           | Conviction for sex offenses against an adult or child   |           |            |
| Is the offe | ender fo      | ound to be a:   |           |            |
|             | TIM - If      | question #2 is answered yes, the offender is classified as a victim                           | regardle  | ss of the  |
|             | •             | L VICTIM - If 3 or more of questions #2 - 10 are checked, the offer                           | nder is c | lassified  |
|             |               | tial victim.  |           |            |
|             | - If 2 icable | or less of questions # 2-10 are checked, the classification design (N/A).                     | nations   | are Not    |
| Do you re   | ecomme        | end another victim finding level?   |           |            |
| If yes, wh  | ich leve      | el is recommended?  | ng [      | ] YES □ NO |
| Explanation | on:           |   |           |            |
|             |               |   |           |            |

## MALE SEXUAL AGGRESSOR/SEXUAL VICTIM CLASSIFICATION SCREENING continued

|                                | <del>-</del> |
|--------------------------------|--------------|
|                                |              |
| DECIDENT NAME (Diococ Drint)   | NUMBER       |
| RESIDENT NAME (Please Print)   | NUMBER       |
| STAFF MEMBER(S) (Please Print) | DATE         |

#### **SEXUAL AGGRESSOR FACTORS**

|    |   | YES | NO |
|----|---|-----|----|
| 1. | Any history of institutional (prison or jail) sexual aggressor behavior |     |    |
| 2. | Current or prior rape conviction  |     |    |
| 3. | Any history of sexual abuse/sexual assault toward others                |     |    |
| 4. | Any history of physical abuse toward others                             |     |    |
| 5. | Any history of domestic violence toward others                          |     |    |
| 6. | Confirmed gang affiliation  |     |    |

Is the offender found to be a:

| <ul> <li>POTENTIAL SEXUAL AGGRESSOR - If 2 or more of questions #2 − 6 are checked, the offender is classified as a potential sexual aggressor.</li> <li>N/A - If 1 or less of questions # 2 6 are checked, the classification designations are Not Applicable (N/A).         <ul> <li>Do you recommend another aggressor finding level?</li> <li>YES</li> <li>NO</li> </ul> </li> <li>If yes, which level is recommended?</li> <li>Potential Sexual Aggressor</li> <li>N/A</li> <li>Monitoring</li> <li>YES</li> <li>NO</li> </ul> <li>LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).</li> |      | <b>SEXUAL AGGRESSOR</b> - If question #1 is yes, the offender is classified as a <b>sexual aggressor</b> regardless of the other questions.  Any resident classified as SEXUAL AGGRESSOR is to be monitored quarterly for a minimum of one calendar year and is to be re-evaluated for monitoring purposes at annual re-class. |
|--|------|--|
| Applicable (N/A).  Do you recommend another aggressor finding level? YES NO  If yes, which level is recommended?  Potential Sexual Aggressor N/A Monitoring YES NO  LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).  |      | ·  |
| If yes, which level is recommended?  ☐ Potential Sexual Aggressor ☐ N/A ☐ Monitoring ☐ YES ☐ NO  ☐ LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).   |      | ·  |
| ☐ Potential Sexual Aggressor ☐ N/A ☐ Monitoring ☐ YES ☐ NO ☐ LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).   |      | Do you recommend another aggressor finding level? ☐ YES ☐ NO   |
| LS/CMI Review (if available) especially sections 1.8 and sections 2 (perpetrator and victim) and section 4 (other client issues).  | If   | yes, which level is recommended?   |
| section 4 (other client issues).   |      | ☐ Potential Sexual Aggressor ☐ N/A ☐ Monitoring ☐ YES ☐ NO   |
| Explanation:   |      |  |
| <u> </u>   | Expl | anation:   |
|  |      |  |
|  |      |  |



### TENNESSEE DEPARTMENT OF CORRECTION

### **Employee PREA Training Acknowledgement Form**

| Emplo  | yee Name: Employee Number:  |
|--|---|
| Date:  | Instructor's Name:  |
| The PREA training includes:  |   |
|  | Tennessee Department of Correction ZERO TOLERANCE policy on sexual harassment and sexual assault Definition of Sexual Harassment and Sexual Assault Employee Confidential Reporting Procedures Inmate Confidential Reporting Procedures Tennessee Department of Correction commitment to investigate every allegation of sexual assault How to detect and respond to signs of threatened and actual sexual abuse Ways to preserve potential evidence in sexual assault cases Employee and Inmate right to be free from retaliation from reporting sexual assault Tennessee Department of Correction policy on not using inmate interpreters for PREA investigation How to avoid inappropriate relationships with inmates How to communicate effectively with lesbian, gay, bisexual, intersex or gender nonconforming inmates Tennessee Department of Correction policy on cross gender pat downs The role of a PREA First Responder Treatment and Counseling services available for victims of sexual assault Opposite Gender must announce when entering a Pod Internal Affairs Investigative Unit involvement with investigating PREA Consequences of Reporting in Bad Faith |
| I acknowledge that I have received training on the Prison Rape Elimination Act (PREA) and I understand the training. |   |
| Employee Signature:  |   |

\*Original to be placed in the employee's Training File.