

# PREA Facility Audit Report: Final

**Name of Facility:** Bledsoe County Correctional Complex

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 04/23/2025

**Date Final Report Submitted:** 04/25/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Debra D. Dawson	<b>Date of Signature:</b> 04/25/2025

AUDITOR INFORMATION	
<b>Auditor name:</b>	Dawson, Debra
<b>Email:</b>	dddawsonprofessionalaudits@gmail.com
<b>Start Date of On-Site Audit:</b>	02/24/2025
<b>End Date of On-Site Audit:</b>	02/26/2025

FACILITY INFORMATION	
<b>Facility name:</b>	Bledsoe County Correctional Complex
<b>Facility physical address:</b>	1045 Horsehead Road, Pikeville, Tennessee - 37367
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Danielle Copeland
<b>Email Address:</b>	danielle.m.copeland@tn.gov
<b>Telephone Number:</b>	423-881-6274

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Brett Cobble
<b>Email Address:</b>	brett.l.cobble@tn.gov
<b>Telephone Number:</b>	423-881-6107

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Danielle Copeland
<b>Email Address:</b>	Danielle.M.Copeland@tn.gov
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Cathy Taylor
<b>Email Address:</b>	Ctaylor4@TeamCenturion.com
<b>Telephone Number:</b>	423-881-6365

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	2545
<b>Current population of facility:</b>	2334
<b>Average daily population for the past 12 months:</b>	2168
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Both women/girls and men/boys

<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	18-50+
<b>Facility security levels/inmate custody levels:</b>	Unclassified, Close, Medium, Minimum restrict, minimum direct, and minimum trustee.
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	592
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	188
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	251

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Tennessee Department of Correction
<b>Governing authority or parent agency (if applicable):</b>	Not Applicable
<b>Physical Address:</b>	320 Sixth Avenue North, Nashville, Tennessee - 37243
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>
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<b>Name:</b>	Frank Strada
<b>Email Address:</b>	Frank.Strada@TN.GOV
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Elizabeth Stout	<b>Email Address:</b>	liz.e.stout@tn.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>	
<b>Number of standards exceeded:</b>	
0	
<b>Number of standards met:</b>	
45	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-02-24
2. End date of the onsite portion of the audit:	2025-02-26

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The Avalon Center

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2545
15. Average daily population for the past 12 months:	2168
16. Number of inmate/resident/detainee housing units:	40
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**

<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	2309
<b>19. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	182
<b>20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	54
<b>21. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	3
<b>22. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	31
<b>23. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	7
<b>24. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	6

<b>25. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	6
<b>26. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	6
<b>27. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	15
<b>28. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>30. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	680
<b>31. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	251

<b>32. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	188
<b>33. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	21
<b>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input checked="" type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
<b>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	The Complex houses a male and female population. Inmates were selected from each of the housing units throughout the complex. The auditing team requested the race and age/birthdate of inmates in addition to inmates that was hispanic, black and white as those were the only races within the complex.



<b>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>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):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	23
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>41. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<b>42. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>43. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>44. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>45. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	2
<b>46. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	4
<b>47. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b>	4
<b>48. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b>	4

<b>49. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b>	0
<b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	The review of the 15 sexual abuse investigative reports indicated no inmates were placed in segregated housing for being at risk of sexual victimization. Per interviews with staff, alternate housing is provided rather than placement in segregation.
<b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>51. Enter the total number of RANDOM STAFF who were interviewed:</b>	20

<b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input type="checkbox"/> Length of tenure in the facility <input type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>If "Other," describe:</b>	Spanish speaking staff, male staff and female staff
<b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
<b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	22
<b>56. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No

<b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>58. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>59. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No  <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	Facility Victim Advocate; Crisis Center Advocate, Crisis Center Executive Director,
<b>61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. Enter the total number of VOLUNTEERS who were interviewed:</b>	2
<b>61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>62. Enter the total number of CONTRACTORS who were interviewed:</b>	4
<b>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

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



<b>68. Informal conversations with staff during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>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).</b>	No text provided.
<b>Documentation Sampling</b>	
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.	
<b>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?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	11	0	11	0
<b>Staff-on-inmate sexual abuse</b>	4	0	4	0
<b>Total</b>	15	0	15	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	3	0	3	0
<b>Staff-on-inmate sexual harassment</b>	1	0	1	0
<b>Total</b>	4	0	4	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	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	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	0	7	4	0
Staff-on-inmate sexual abuse	0	3	0	1
Total	0	10	4	1

### Sexual Harassment Investigation Outcomes

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

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

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

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

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

**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:**

19

<b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	11
<b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	4
<b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	4
<b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes  <input checked="" type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

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

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

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.**

There were no sexual and/or sexual harassment investigative findings identified criminal charges

**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

**95. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:**

1

## 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

## 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



Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>
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
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>Bledsoe County Correctional Complex (BCCX) Completed Pre-Audit Questionnaire (PAQ)</li> <li>TDOC Index 502.06 Prison Rape Elimination Act (PREA) Implementation, Education, and Compliance (Effective 08/01/2020)</li> <li>TDOC Index 502.06 Prisons Rape Elimination Act (PREA), (Effective 10/21/2024)</li> <li>TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Teams (SART) (Effective 08/01/2020)</li> <li>BCCX Index 502.06. 2-1 PREA Allegations, Investigations, and SART (Effective 12/15/2020)</li> <li>BCCX Index 502.06.2-1 (Effective 10/25/2024)</li> </ol>

7. SART Inspection Reports

8. BCCX Organizational Chart

9. TDOC Organizational Chart

10. Appointment Notice of TDOC Statewide PREA Coordinator

11. Interviews with:

a. TDOC Statewide PREA Coordinator

b. BCCX PREA Compliance Manager

115.11(a) The agency has comprehensive written policies that mandates zero tolerance toward all types of sexual abuse and sexual harassment in the TDOC facilities. Index TDOC.502.06 states it is the policy of the TDOC to provide a safe, human, 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 and sexual harassment. The Directive clearly outlines the agency's zero tolerance policy and identifies the agency's approach to the prevention, detection, and response to sexual assault that includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment that are consistent with the PREA standards. The agency policies also include disciplinary sanctions for those that have participated in such prohibited behaviors to include staff, contractors, volunteers, and the inmate population.

In addition to TDOC Index 502.06, the agency also developed TDOC Index 502.06.2. TDOC Index 502.06.2 outlines the duties and responsibilities of staff designated to serve on an organized and structured team responsible for developing and maintaining a program of prevention, detection, response, investigation, and tracking of sexual assaults and the persons involved. The policy includes definitions pertaining to PREA, and procedures after receiving an allegation of PREA; multiple methods for inmate reporting, responsibilities of First Responders; SART Response; SART Investigations; Sexual Abuse Incident Review; monitoring for retaliation; administrative investigations; criminal investigations; reporting the status of allegations to inmates; disciplinary sanctions for inmates; sanctions for contractor and volunteers; and allegations occurring in other correction settings.

The BCCX Index 502.06.2-1 was established as the policy of BCCX to provide a safe, humane, and appropriately secure environment, free from threat of sexual assault/harassment for all inmates, by maintaining a program of prevention, detection, response, investigation, and tracking of all alleged and substantiated sexual assault and sexual harassment. The policy outlines the procedures required upon an inmate's report of sexual abuse and sexual harassment that states BCCX has a zero tolerance for incidents of sexual assault and sexual harassment.

TDOC Index 502.06 indicates each PREA Site Coordinator and/or PREA Compliance Manager shall ensure unannounced PREA-free walk (inspection) is conducted monthly

in accordance with the PREA Inspection Team Worksheet, CR-3821. This inspection shall be conducted to identify and deter sexual abuse and sexual harassment. By the 15th of each month, the Warden/Superintendent/Designee shall submit the facility's previous month's PREA Inspection to the Assistant Commissioner of Prisons. The Assistant Commissioner of Prison/Designee shall compile all the facility reports and forward to each Assistant Commissioner, Deputy Commissioner, Inspector General, Statewide PREA Coordinator, and Director of Decision Support: Research and Planning for review.

Documentation of SART Inspections was presented for each month during the 12-month review period. The monthly inspections documented areas visited throughout Site 1, Site 2 and Unit 28. The SART members documented their review of the visited areas/departments while identifying any areas of concerns to include identifying blind spots and submission of work orders for the installation of mirrors, quizzing of staff on their knowledge and understanding of received PREA education, posting of the PREA Hotline, quizzing the inmate population of their knowledge on how to report PREA allegations, the posting of sufficient PREA information throughout the facility accessible to the inmate population, staff, volunteers and visitors, confirmation of opposite gender announcement postings on housing unit entry, recommendations for window placement in office areas, review of camera location and viewing capability, in addition to making recommendations for the placement of additional cameras. Upon identifying areas of concern, corrective measures are implemented during the SART inspections through immediate actions and/or the submission of work orders. The SART meeting minutes also include the team's review of PREA investigations and findings, newly arriving inmates, and those inmates who require monitoring.

115.11(b) The agency has designated the Director of External Compliance to oversee all external accreditation procedures and efforts to include PREA for all facilities across the state of Tennessee. Additionally, the Director of External Compliance serves as the Statewide PREA Coordinator and is assigned to the TDOC Office of the Inspector General and reports directly to the Deputy Inspector General as noted in the TDOC Organizational Chart. An interview with the Director of External Compliance/TDOC Statewide PREA Coordinator confirmed she has sufficient time to manage the responsibilities of the position. She also receives an enormous amount of support from both the Deputy Inspector General and the Inspector General. Monthly meetings are scheduled with the TDOC facilities PREA Compliance Managers who are assigned at each of the 11 TDOC facilities to discuss updates received and to provide guidance. Additionally, regular interaction is conducted through telephone calls and emails. If any issues are identified that may jeopardize a facility's PREA compliance status, she immediately communicates with the facility's PREA Compliance Manager to determine the cause of the issue while ensuring corrective procedures are initiated and monitored in order for the facility to maintain compliance.

115.11(c) The Associate Warden of Treatment (T) at each TDOC facility also serves as the PREA Coordinator and reports directly to the Warden. The BCCX organizational chart and operational structure plan identifies the BCCX PREA Compliance Manager is assigned as the Assistant to the Warden. However, all duties and responsibilities as

	<p>the PREA Compliance Manager are reported to the Facility PREA Coordinator, Associate Warden (T). The BCCX PREA Compliance Manager is a member of the SART. As the PREA Compliance Manager, schedules the monthly meetings to discuss reported PREA allegations, participate in the unannounced walkthroughs with other members while identifying any concerns in meeting with the PREA standards, that include but not limited to identifying blind spots, and ensure PREA education is posted throughout the facility accessible to all inmates, and staff to include contract workers, volunteers and visitors. Upon identifying areas of concern, a work order is submitted as needed for the installation of a mirror, possible installation of a camera, and other areas. SART members quiz others to include staff on their understanding of duties as a first responder and their knowledge and understanding of PREA education they have received.</p> <p>Based on the review of agency policies, organization charts, appointment notification of the TDOC Statewide PREA Coordinator, monthly PREA walk-throughs and meeting minutes completed by SART members, BCCX does meet the mandate of all standard provisions.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 PREA Implementation, Education and Compliance</li> <li>3. Contracts for Confinement of Inmates with Core Civic</li> <li>4. TDOC Agency Website</li> <li>5. PREA Reports for TDOC/Core Civic Contract Facilities</li> </ol> <p>4. Interview with the following:</p> <ol style="list-style-type: none"> <li>a. Agency Contract Administrator</li> </ol> <p>115.12 (a) (b) TDOC Index 502.06 states employees of privately managed facilities shall receive PREA training as part of the pre-service and in-service training requirements established by the contractor and approved by TDOC. The Director of Contracts Administration shall ensure that all new TDOC contracts or contract renewals include language requiring compliance with the PREA standards.</p> <p>The TDOC has entered into four (4) contracts for the confinement of inmates with a private agency (Core Civic). Copies of each contract between the Tennessee</p>

	<p>Department of Corrections and Core Civic were provided for review. The contracts outline PREA Reporting information, definitions, prohibited acts, and other PREA-related requirements. The contracts state the contractor must comply with the Prison Rape Elimination Act (PREA) of 2003 (Federal Law 42 USC 1506 et. seq.) with all applicable Federal PREA standards and all State policies as may be revised and standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within facilities/programs/offices owned, operated, or contracted. In addition, the contract states that the State has the right and authority under the contracts to monitor performance. Such monitoring shall include but not be limited to observing and reporting on the day-to-day operational performance of the contractor regarding compliance with all terms and conditions of the contract.</p> <p>A TDOC Contract Monitor is assigned to each of four (4) contracted facilities whose responsibilities include monitoring and addressing all concerns regarding maintaining compliance with the PREA standard. The Agency Contract Administrator stated the contract is monitored in multiple ways to include reviewing logs for the completion of unannounced rounds, opposite gender announcements, monitoring of mental health encounter logs, timely completion of inmate's risk screenings and applicable submission of mental health referrals, timely completion of PREA investigations, retaliation monitoring and incident reviews in addition all remaining PREA standards. An annual assessment of the PREA practices is monitored to ensure the contracting agency are implementing the PREA standards properly. All contract facilities must submit their DOJ PREA audit reports to the agency for review and confirmation that it maintains PREA compliance. Additionally, each of the contract facilities are scheduled for PREA audit completion within the TDOC agency's three-year audit cycle.</p> <p>The auditing team conducted a review of the TDOC website visit at <a href="https://www.tn.gov/correction">https://www.tn.gov/correction</a>. The TDOC contract facilities most recent PREA audits were posted on the TDOC's website as the following: Hardeman County Correctional Facility on August 9, 2023; Whiteville Correctional Facility on June 5, 2023; Trousdale Turner Correctional Center most recent posted PREA audit is noted as November 16, 2023. The final PREA report for contract facility, South Central Correctional Center remained pending.</p> <p>Based on the review of the agency's website, contracts between TDOC and Core Civic, agency's website, contracting facilities' PREA reports, and interview with agency contract administrator, the facility is compliant with all standard provisions.</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Evidence Reviewed (documents, interviews, site review):

1. BCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06 Prisons Rape Elimination Act (PREA) Implementation, Education and Compliance (Effective 08-01—2020)
3. TDOC Index 502.06 Prisons Rape Elimination Act (PREA) (Effective 10-21-2024)
4. TDOC Index 506.22 Security Staff Assignments (Effective 03-15-2023)
5. BCCX 506.22-1 Security Staff Assignments (Effective 03-1-2024)
6. BCCX Annual Staffing Review
7. Security Staff Daily Assignment Rosters
8. Post Assignment Rosters
9. Logbooks Documenting Unannounced Rounds.
10. Site Observation
11. Interviews with:
  - a. Warden
  - c. BCCX PREA Compliance Manager
  - d. Intermediate or Higher-Level Staff
  - e. TDOC Statewide PREA Coordinator

115.13 (a) TDOC Index 502.06 outlines the requirements of a facility staffing plan that provides for adequate levels of staffing and monitoring to protect inmates against sexual abuse. This review shall be completed on the PREA Annual Staffing Review form CR-3964. The BCCX Staffing Plan addresses the eleven components as indicated in this provision that includes the physical layout of the facility including blind-spots or areas where staff or residents may be isolated, composition of the resident population, the prevalence of substantiated or unsubstantiated incidents of sexual abuse, deployment of video monitoring system and other monitoring technologies, resources the facility has available to commit to ensure adherence to the staffing plan, and institution program occurring on a particular shift. The staffing plan was developed for 2545 inmates. Per the PAQ, the average daily number of inmates at BCCX during the review period was 2168. The facility's inmate count on the first day of the site visit was 2309.

Per the BCCX Warden, the facility does conduct an annual review and comply with the developed BCCX facility staffing plan that considers each element of the standard provision and as outlined in TDOC Index 506.22, and TDOC Index 502.06. The facility and is operating at a 2% vacancy with 10-12 security staff vacancies. Video monitoring is a major part of the staffing plan, and the facility is scheduled for an upgrade for the installation of additional 360-degree cameras. The SART does

monthly walkthroughs in different areas to identify any area that may benefit from an additional camera and/or the relocation of existing cameras. The BCCX Staffing Plan is documented and is reviewed annually. However, the elements within the Staffing Plan are discussed by himself and other administrative staff regularly. He identified all elements of the standard provisions as part of the BCCX Staffing Plan. Compliance with the Staffing Plan is monitored by conducting unscheduled walk-throughs throughout the facility while observing the staffing levels in all areas, daily review of rosters, constant communication with the Administrative Lieutenant of any difficulty in filling critical post to include the necessity that eliminate the filling of non-critical post. All changes to rosters that have been previously submitted are forwarded to him for review. Additionally, he has full ability to review the security staff rosters for confirmation of compliance.

Throughout the site visit, the auditing team observed the staffing level was adequate and prevalent throughout all areas where inmates are authorized and supervised by security and non-security staff. The auditing team observed the staff's supervision of the inmate population at Site 1, Site 2 and Unit 28, including housing units, program areas, libraries, food service, work assignments, medical, education, recreation, warehouse, during intake/diagnostic during the various shifts. Formal and informal interviews with staff and the inmate population did not express concerns of insufficient staff coverage to include in housing, program and/or work assignment areas that hampered personal safety to include sexual abuse and/or sexual harassment occurrences.

115.13(b) TDOC Index 506.22 notes the Warden/Superintendent will charge one employee with the rank of lieutenant with overall responsibility for the development and maintenance of shift rosters for all shifts, including monitoring and oversight of annual leave scheduling. The assignment officer shall have final authority, subject to the approval of the Warden/Superintendent for planning assignments

When it becomes necessary for a shift commander to make temporary variations, they should be posted on the roster in such a fashion as to show the actual assignment of personnel. In these instances, a notation will be made in the appropriate area on page two of the shift roster. Assignment for more than seven days within a 30-day period to a post assignment which has not received prior approval by the Assistant Commissioner of Prisons must be approved in writing, by the Assistant Commissioner of Prison.

The policy identifies Critical and Non-Critical posts. A critical post is a security position designated by the Warden/Superintendent that must be staffed regardless of institution circumstances and if left unstaffed, would jeopardize the security of safety of the facility, staff, offenders, or the community. A non-critical post is a security position designated by the Warden/Superintendent that when left unstaffed does not jeopardize the security of the facility, staff, inmates, or the community. A non-critical post will be left unstaffed in lieu of authorizing overtime to staff a critical post.

BCCX Index 506.22-1 notes BCCX shall maintain an equitable system for assignment/reassignment of all security staff as well as an adequate leave scheduling system to

always ensure the maximum utilization of staff available. Completion of daily shift rosters will be the responsibility of each Shift Commander who will note clearly each post and by which officer it was manned on a respective date or shift. Variation from the planned shift schedule due to vacations, sick leave, special duties, and/or requirements, etc., shall be clearly noted on the back of the daily roster.

Interviews with the Warden and BCCX Major indicated the Administrative Lieutenant is responsible for the development of the daily security shift rosters and ensures all critical posts are manned. Some post are only required to be manned when inmates are assigned to the area, such as Unit 28 segregation unit, infirmary, etc. The Shift Commanders are responsible for necessary adjustments due to staff request for sick leave, unscheduled medical trips, unscheduled annual leave, and inclement weather. All roster adjustments are included on the daily rosters. In such circumstances, overtime is always available to ensure critical posts are filled. BCCX has one of the lowest vacancies in the TDOC for security staff, therefore there are never any circumstances in which critical posts are vacated.

115.13(c) TDOC Index 502.06 notes the mandate of the standard provision that by July 1st of each calendar year, each facility shall assess, determine, and document whether adjustments are needed to the facility staffing plan. The staffing plan review is documented on an agency-wide standardized form. A review of the most recent BCCX Staffing Plan confirmed it was acknowledged as reviewed by the Associate Warden of Treatment/ Facility PREA Coordinator and Associate Warden of Security, and the Warden on June 28, 2024, and TDOC Statewide PREA Coordinator and Chief of Security signed on July 1, 2024.

Per the BCCX PREA Compliance Manager, although she does not sign the review of the annual staffing plan, she is included in the staffing plan review. Specifically, as the PREA Compliance Manager, she gathers the necessary information and makes a request for additional positions and a request for additional cameras, and/or mirrors. She also attends monthly meetings in which the staffing plan is discussed.

Per Statewide PREA Coordinator, she is consulted regarding any assessments of or adjustments to the staffing plan prior to implementation while the Staffing Plan is reviewed annually, however, the facility's Staffing Plan review was conducted prior to her assignment as the Statewide PREA Coordinator.

115.13(d) TDOC Index 502.06 indicates each PREA site coordinator and/or PCM shall ensure that an unannounced PREA-free walk (inspection) is conducted monthly in accordance with the PREA Inspection Team Worksheet, CR-3821. This inspection shall be conducted to identify and deter sexual abuse and sexual harassment.

Staff, Security Shift Corporal and above, Unit Managers, and /or the Administration Duty Officer, conduct and document unannounced rounds to identify and deter sexual abuse and sexual harassment. Unannounced PREA rounds are to be documented each shift daily. Each unit/program area logbook is annotated with "Unannounced PREA Inspection/Security Check."

The auditing review requested random samples of housing unit logbook entries from



	<p>various housing units, shifts and weekdays from Site 1, Site 2 and Unit 28 throughout the review period for confirmation of documented the Unannounced PREA Inspections. The review confirmed the appropriate rounds were documented daily at various times during each shift in accordance with the standard provision.</p> <p>The agency policies also note any staff member alerting other staff members that these unannounced rounds are occurring will be subject to appropriate disciplinary action.</p> <p>Interviews with supervisory staff (Major, Shift Commanders, Unit Managers) indicated unannounced rounds are alternated that prevents staff and the inmate population anticipation of their arrival. The unannounced rounds are conducted at alternate times and not in a pattern where staff and/or the inmates can anticipate their arrival. Staff identified as alerting others of their prior arrival in any area, would receive counseling followed by possible disciplinary actions for continued occurrences.</p> <p>Based on the review of agency policy, documented staffing plan that includes the standard provision, supervisory unannounced PREA rounds, security daily rosters that support compliance with the staffing planning, observation of staffing level during site visit, and interviews with staff and the inmates, BCCX does meet all provisions of the standard.</p>
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115.14	Youthful inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 506.14.2 Housing, Programming of Youth Inmates</li> <li>3. Review of Inmate Rosters</li> <li>4. Site Observation</li> <li>5. Interview with the following: <ol style="list-style-type: none"> <li>a. BCCX Chief Counselor</li> </ol> </li> </ol> <p>115.14 (a) (b) (c) TDOC 506.14.2 Housing and Programming of Juvenile Offenders outlines the TDOC policy for housing and programs for youthful offenders throughout the Agency. The policy defines juvenile offenders as persons between the ages of 16 and 18 who are sentenced and committed to the TDOC by a court having adult criminal jurisdiction.</p> <p>TDOC 506.14.2 identify the following facilities for the housing for juvenile offenders</p>

	<p>subsequent to classification: males are assigned to the TDOC Northwest Correctional Complex – Site #2, and the TDOC Lois DeBerry Special Needs Facility for males with health or mental health concerns. Females are assigned to the TDOC Debra K. Johson Rehabilitation Center.</p> <p>An interview with the BCCX Chief Counselor and the auditing team’s review of the inmate population roster that included their age, confirmed no individuals under the age of 18 were assigned.</p> <p>Therefore, standard provisions a, b, and c are not applicable.</p> <p>Based on agency policy, inmate roster, site observation and interview with staff, the facility does not have house youth under the age of 18. Therefore, BCCX does meet all provisions of standard.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2.TDOC Index 506.06 Searches (Effective 08/01/2021)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/24)</li> <li>4.TDOC Index 506.06 Searches Change Notice (08-19-2024)</li> <li>5. BCCX 506.6-1 Searches (Effective 10-07-2024)</li> <li>6. Basic Correctional Officers Training Program Curriculum (BCOT-1-07) Lesson Plan Personal Searches FY 2024 -2025</li> <li>7. TDOC 113.37 Gender Accommodation (12/15/2022)</li> <li>8. TDOC 113.37 Clinical Services Intervention for Gender Dysphoria (6/27/2024)</li> <li>9. TDOC Index 112.08 Personal Hygiene Resources for Inmates (Effective 06-15-2020)</li> <li>10. BCCX Index 112.08.1 Personal Hygiene (Bathroom/Shower/Haircare) Resources (Effective 03-01-2024)</li> <li>11. TDOC 506.06 Personal Searches Powerpoint Lesson Plan</li> <li>12. TDOC 305.02 Employee/Offender Interaction</li> <li>13. Documentation of Search Training</li> </ol>

14. BCCX Housing Unit Post Orders

15. Opposite Gender Announcement Signs

16. Observation During Site Visit

17. Interviews with:

a. Staff

b. Formal and Informal Inmate Interviews

115.15(a) TDOC Index 506.06 and BCCX Index 506.06 states female correctional officers may frisk search inmates of both genders. Male correctional officers may frisk search only male inmates. Strip searches will only be conducted by staff members of the same gender. Strip/visual body cavity searches based on reasonable suspicion/probable cause require the completion of a CR-2156 by the Warden/Superintendent/designee.

TDOC Index 502.06 policy change notice 24-12 states the requirement for body imaging/body scanners to be used on inmates for the purposes of detecting contraband and weapons with TDOC facilities for the safety and security of staff, inmates, and members of the community. Cross-gender viewing of screened images is not permitted unless approved in advance by the Assistant Commissioner of Prison Operations. In these instances, the Warden/Superintendent must be able to articulate the circumstances that pose imminent harm to others, property, or jeopardizes state or nation security interests. All cross-gender viewing must be reported in writing to the Assistant Commissioner of Prison Operations, no later than the closure of business.

BCOT-1-07 Personal Searches and FY 23-24 Personal Searches Training 506.06 includes procedures for conducting searches of transgender and transexual individuals; frisk search; strip search/visual body cavity search; search proper /clothing; body orifice security scanner chair (BOSS); gender dysphoria and personal searches; cross gender searches. The lesson plans note there shall be no cross-gender strip searches of visual body cavity searches.

The BCCX PAQ reports there were zero cross-gender strip or cross-gender visual body cavity searches of inmates during the 12-month review to include by medical and non-medical staff.

The auditing team reviewed all areas where visual searches are authorized to be conducted and confirmed the identified areas at Site 1, Site 2 and Unit 28 consisting of the diagnostic center, intake areas, inmate visitation, Site 2 sallyport, segregation units at Site 1, Site 2, and Unit 28, provided privacy through the use of solid doors, curtains that covers the width of openings, and/or doors with small covered windows during use, designated areas behind closed doors with individual stalls, and covered windows during the process. Opposite -gender supervisors are not required to supervise or observe strip searches.

The auditing team observed that all suicide prevention and/or mental health seclusion cells, in which direct observation is required are designated as a “male only” post for Site 1 and Site 2 where male inmates are housed. Female staff only are assigned to all suicide prevention and/or mental health seclusion cells where direct observation is required for Unit 28 (female unit). Direct camera viewing of the toilet area in these areas are obstructed to prevent direct viewing of the inmate’s genitals and buttocks to include female breast. A memorandum was observed as drafted by the BCCX Warden to the Shift Commanders identifying the post assignments as designated a male only post and or a designated female post for the applicable units.

115.15(b) TDOC Index 506.06-1 states, “Female correctional officers may frisk search inmates of both genders.” However, female security staff may conduct visual searches of male inmates upon being identified as transgender and/or intersex at the inmate’s request. Male correctional officers may only frisk search and conduct a visual search of male inmates. Interviews with staff and inmate population confirmed the male inmate population is frisk searched by both male and female staff members. Unit 28 houses female inmates.

Interviews with the female population at Unit 28, stated they are only search by female staff and there has never been an occasion where they were prohibited from participating in out of cell activities and/or programs out of the housing unit due to no available female staff to conduct a search.

The PAQ noted the number of pat-down searches of female inmates that were conducted by male staff as zero. Additionally, the PAQ noted the number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s) as zero.

Per interviews with random staff, female staff are assigned on all shifts at each site, 1, 2, and Unit 28, there are never any circumstances where a female staff is not available to conduct searches on the female inmates and or those identified as transgender who request a female. The female inmates and/or applicable transgenders are never denied access to programs or out-of-cell opportunities.

Interviews with three (3) transgenders assigned to Unit 28 (female) stated their strip searches are conducted by female security staff, and they have not requested to be conducted by male security staff. An interview with a transgender/intersex (male) assigned to Site 2, indicated all pat and visual searches are conducted by female staff as requested.

115.15 (c) Per TDOC 502.06 states Female correctional officers may frisk search inmates of both genders. Male correctional officers may only frisk search male inmates. Interviews with staff and the male inmate population confirmed the male inmate population is frisk searched by both male and female staff members; however, all male visual searches are conducted by male staff only.

Interviews with seven (7) female inmates and one (1) transgender male who identified requesting to be search by female staff, indicated there were no circumstances where they were unable to participate in activities outside of their cell

because a female staff was not available to conduct the pat-down search.

Documentation of cross-gender strip searches and cross-gender visual body cavity searches of all inmates and/or documentation of all cross-gender pat-down searches of female inmates was not applicable for submission.

115.15(d) TDOC Index 113.37 Gender Accommodation states Inmate diagnosed with gender dysphoria, or identifying as transgender, transsexual, intersex, and gender non-conforming, conditions but without secondary sex characteristics of the desired gender shall be given an opportunity to shower separately if they communicate a request to Health Services. Health service shall complete CR—2893 to convey special accommodation and complete OMS conversation LHST.

BCCX 112.08-1, states BCCX shall provide inmates with bathroom/shower facilities that shall limit unnecessary cross gender viewing and enable the inmate to maintain acceptable standards of personal hygiene. Shower stalls are provided with doors or shower curtains that cover below the knee level that provides privacy during showering while maintaining security. Individual cells at Sites 1, 2, Unit 28 (Women's) and the bathroom stalls at the Women's Complex are designed to provide privacy when changing cloth and performing bodily functions. The only exception being institutional count, daily cell inspections, or emergency situations.

The site observation confirmed the facility implemented procedures that allowed inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. The auditing team's observation throughout Site 1, Site 2 and Unit 28, confirmed procedures were developed in the structural operational planning that allow inmates to shower, change clothes, and use the toilet without being viewed by staff of the opposite gender. All housing units were observed to have showers curtains and/or shower doors that allowed privacy to include showers in the restricted housing units during showering. All toilets were behind full doors, 3/4' stall doors, and/or shower curtains. The auditing team review of electronic surveillance at Site 1, Site 2, and Unti 28 confirmed the viewing of showering only provided coverage of the outer entry areas.

During the site observation, the auditing team observed those individuals (male inmates and other gender staff (female) who walk on the upper tier in Site 1 housing units 22 - 25 (designated as male units) to possibly have a viewing of the breast area of applicable transgender/intersex inmates during showers. The facility applied immediate corrective action measures by installing a beam at the top opening of the shower walls that provided full obstruction of viewing from each of the top tiers.

The toilets designated for inmate use are located within a corner of their cell in which staff must put forth effort to view the area. Toilets located behind ¾' stall doors allow the viewing of the feet only. Inmate's restrooms in the various program and operational departments are within a single-use restroom enclosed by a full-size door that is observant and monitored by the assigned staff.

The auditing team observed the electronic surveillance monitoring areas in the control rooms and the infirmary where staff monitor live and recorded video feeds. A

review of the video monitoring equipment and placement of cameras within housing units confirmed staff did not have the observation of inmates during showering, change of clothing and/or performing bodily functions. There were no inconsistencies in this practice identified.

The auditing team observed the following areas at Site 1 possessing electronic surveillance monitoring of hour (4) suicide observation cells in Unit 21 A-pod. Two medical observation cells and two (2) suicide watch observation cells were located in the infirmary. A memorandum drafted by the BCCX Warden identified the security post assignment as "Male Only." The auditing team recommended the installation of a privacy screen to prevent cross-gender viewing and excessive viewing of inmates of those being electronically monitored in the infirmary. A privacy screen was immediately installed during the site observation.

Electronic surveillance monitored observation cells (2) within the segregation unit of Unit 28 (female unit) is identified as a "Female Only" post assignment. During the site observation, the auditing team observed the electronic monitoring screening allowed viewing by those individuals entering through one of the two entry doors due to placement of the monitor and lack of a privacy screen. Corrective measures were immediately applied, and privacy screens were installed that prevented viewing by others than the assigned staff.

A memorandum drafted by the BCCX Warden to "All BCCX Staff." The memorandum noted all transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. The separate time of showering was identified as during count time when all other inmates are locked in their cell. Interviews with four (4) transgenders and one (1) intersex that included male and females indicated were aware of the opportunity to shower separately. However, the inmate identified as intersex had requested to shower separately from others and acknowledged approval. The remaining inmate population to include transgender inmates indicated as the showers are in single stalls that allow privacy. Transgender indicated they have not encountered any safety or privacy concerns during showering and therefore had not requested to shower at a separate time from others.

Interviews with the female and male inmate population did not reveal any concerns and/or circumstances in which they experienced opposite gender staff viewing during the inmate's use of the toilet, showering, or changing clothes.

TDOC 305.03 states, "When staff of the opposite gender enters an inmate housing unit, he/she shall announce his/her presence."

A review of the BCCX Housing Unit Post Orders for all housing at Site 1, Site 2 and Unit 28 include employee shall conduct themselves in a professional manner when interacting with offenders. When staff of the opposite gender enters an inmate housing unit, he/she shall announce his/her presence."

Additionally, all staff are required to document their signature on the TDOC Employee PREA Training Acknowledgement Form that notes the PREA training received includes "Opposite Gender must announce when enter a Pod." Staff acknowledged receipt of

PREA training that includes Opposite Gender must announce when entering a pod and indicate the announcements are made.

The auditing team observed notices posted on the outer entrance of all housing unit doors, stating at Site 1, Site 2 and Unit 28, that states "All Opposite Gender Must Announce Presence Upon Entering."

Interviews with 20 random staff acknowledged the opposite gender staff (both male and female staff) announce themselves when entering inmate housing of the opposite gender. All staff acknowledged by the inmate population are able to dress, shower and use the toilet without being viewed by the staff of the opposite gender.

Interviews with the 44 inmates selected from each of the three sites indicated staff of the opposite gender announce themselves when entering housing units and the announcements are made in manner that can be heard throughout. Zero inmates expressed concerns of being nude or in full view of opposite gender staff (male/female as applicable) during showering, change of clothing, or use of the toilets.

115.15(e) TDOC Index 506.06 Searches outlines the mandate regarding searches of transgender and intersex inmates and states "No inmate will be searched solely for the purpose of determining the inmates' gender. If there is uncertainty as to a person's gender, the responsible officer shall use best judgment as to how the person presents, as male or female, and shall arrange for an officer of the gender to conduct the search. If the subject of the search, then objects on the basis of gender, an officer of the person's apparently preferred gender shall conduct the search."

TDOC 502.06 states, No inmate shall be searched solely for the purpose of determining gender status or condition, such as intersex, transgender.

TDOC 113.37 states Staff shall not physically examine or search a transgender or intersex inmate for the sole purpose of determining the inmate's phenotype status. If unknown, an inmate's genital status may be determined through conversation with the inmate, review of medical records, or as part of a broader examination conducted in private by a physician or APN.

The BCOT -1-07 includes the mandate of strip searches of transgender and intersex individuals are outlined in TDOC 506.06.

Interviews with 20 random staff acknowledged the agency and facility prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining genital status and under no circumstances would they be completed.

Interviews with four (4) transgenders stated they have not been assigned to a housing unit based on their status as such. The one (1) intersex individual stated they had no reason to believe they were placed in a housing unit due to their status as intersex.

115.15(f) TDOC Index 506.06 Searches identifies: Security staff shall be trained on how to conduct cross-gender frisk searches and searches of transgender and intersex

	<p>inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.</p> <p>The Tennessee Correctional Academy Basic Correctional Officer Training Program Curriculum BCOT-10-7 Personal Searches is a two-hour course that outlines step-by-step instructions for the following: Searching Transgender and Transexual Individuals; Frisk Search, Strip Search; Visual Body Cavity Search; Gender Dysphoria and Personal Searches; Cross-gender Searches. The definitions of Gender Dysphoria and Intersex Conditions are included in the lesson plan and outlines skills practice/evaluation. The training topics, including definitions, were found to be consistent with the definitions contained in the standards. Search training is conducted during new hire orientation training and additional search training is conducted during annual security staff training at the facility. The training includes the mandate of strip searches of transgender and intersex individuals are outlined in TDOC 506.06. All class participants are required to participate in a skill practice section while paired with a staff member of the same sex. The lesson plan includes "Inmates may not be searched solely for the purpose of determining gender."</p> <p>The FY 23-24 Search Training PowerPoint includes the types of searches, frisk search, strip search, visual body cavity for each body search, procedures for the Body Orifice Security Scan chair. The instructions are gender specific, that includes inmates identified as gender dysphoria, transgender and identify prohibited cross-gender searches. Slide #20 notes "Inmates may not be searched solely for the purpose of determining gender."</p> <p>The facility noted 100% of staff have received the appropriate training. Staff rosters that included staff signatures acknowledging receipt of training in conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. Random staff interviews indicated they received training regarding cross gender, transgender, and intersex search procedures. Staff indicated all strip searches are conducted in the presence of two staff members of the same sex and or for those identified as transgender by the two staff of the gender requested. Documentation on staff completion of Search Training was provided for the selection of 57 new hires and 89 staff completion of annual refresher training through rosters and/or tracking that is monitored by the agency training staff.</p> <p>Based on the review of agency and agency policies, Search Lesson Plan, BCOT 1-07 Curriculum and TDOC Refresher Training, confirmation of staff search training via rosters, specific duties outlined in security staff post orders, observation during site visit, interviews with staff and inmates, the facility has demonstrated compliance with all the provisions of this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard



	<p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"><li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li><li>2. TDOC Index 502.06 PREA Implementation, Education, and Compliance (Effective 08-01-2020)</li><li>3. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li><li>4. BCCX Plan for Providing Inmates with Limited English Proficiency Access to Program and Activities (As required by the Civil Rights Act Of 1964)</li><li>5. TDOC Index 103.10.1 Title VI – Limited English Proficiency (LEP) (Effective 02-01-2019)</li><li>6. TDOC Program Curriculum HR-5-04 Title VI (FY 23/24)</li><li>7. Translation Services Contract</li><li>8. Tennessee Language Center Institute for Public Service</li><li>9. Documentation of Completed Interpretation Service</li><li>10. Confirmation of Staff Title VI Training</li><li>11. Use of Contracting Agency Translation Service</li><li>12. Site Observation</li><li>13. Interviews with:<ol style="list-style-type: none"><li>a. Agency Head Designee</li><li>b. Random Staff</li><li>c. Targeted Group Inmate Population</li></ol></li></ol> <p>115.16 (a) Per an interview with the Agency Head Designee, the agency has established procedures to provide inmates with disabilities and inmates who are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and responds to sexual abuse and sexual harassment. While, these programs can always be strengthened, TDOC strives to ensure that all offenders regardless of disability or ability to speak English are afforded equal opportunities to all aspects of the agency’s PREA program. Contracts exist for medical, mental health and translation services to provide services to these offenders. Offenders are identified at orientation with a particular need and are given information related to issues they might experience related to PREA. For someone who has identified physical or mental health issues, medical and mental health monitor and meet with those individual regularly to ensure they have equal access to programs especially PREA. Modifications are made to ensure that the offender</p>
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understands (i.e. sign language for deaf inmates). For the LEP offenders, there are state contractual agreements for service in addition to in-house staff translators available to translate in various languages.

The agency has established an Interagency Agreement between the State of Tennessee Department of Corrections and University of Tennessee – Tennessee Language Center effective June 1, 2023, through June 30, 2025, to provide Live and Documented Translation Services. The written contract does not include ASL services available 24-7 for deaf inmates, however the services were documented as part of the contract through email confirmation between the TDOC Contracting Staff and the authorized contracting agency representative.

TDOC Index 502.06 states Each facility shall take appropriate steps to ensure that inmates with disabilities (including inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects for the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

TDOC Index 103.10.1 has established guidelines in accordance with Title IV Civil Right Act of 1964 and Executive Order 13166 by taking reasonable steps to provide meaningful access to programs and activities to Limited English Proficiency (LEP) persons to ensure language does not prevent staff from effectively communicating with LEP person who are under the jurisdiction of the TDOC. Procedures outline all institution and community offices shall ensure that individuals who have a Limited English Proficiency (LEP) have access to program and activity as required in Title IV of the Civil Right Act of 1964.

TDOC Index 103.10.1 policy indicates that an assessment during the intake process will determine if the inmate requires language or literacy assistance. The review of "Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities (As required by the Civil Rights Act of 64)" outlines the specifics for ensuring methods are identified for communicating with inmates who are LEP. The plan identifies the duties of staff within the various facility departments to include but not limited to medical/mental health services, classification assignment and hearing; disciplinary procedures, grievance procedures, education /programs. Housing assignment, court appearances, parole hearings program availability.

TDOC Index 103.10.1 notes two procedures in which interpretation services shall be provided: 1) Interpretation includes telephonic interpretation: Interpreting services provided via telephone. 2) In-Person (Live) Interpretation: Interpreting services provided face-to-face between an interpreter and a non-English speaking individual is a procedure utilized to provide translation services. During the intake process, offender requiring language or literacy assistance will be offered the Language Identification ("I Speak") Guide to determine if the offender has a literacy or language deficiency.

TDOC mandate staff completion of Title IV training. Staff receive the training during new hire orientation and annually during in-service training in a classroom session.

The documentation regarding the staff's completion of Title IV training was confirmed via staff acknowledgment of receiving and understanding the training received on attendance rosters CR-2245.

The Tennessee Language Center Video Relay Interpreting services and the Tennessee Language Center Telephonic Interpretation were identified as available to aid in providing PREA education to the inmate population as applicable to their disability. TTY were observed in each housing units accessible to the inmate population.

The auditing team observed the PREA educational video created by the National PREA Resource available in English, Closed Caption, Spanish and ASL as identified as utilized by staff during the orientation process at each site. There were no inmates identified as limited English Proficient other than Spanish.

Continuous PREA educational material was observed posted on bulletin boards and walls throughout Site 1, Site 2, and Unit 28, that included how to report in both English and Spanish. The wording was presented within a font format that enabled those with low vision to view from a reasonable distance.

The auditing team conducted interviews with the inmates identified by the standard provision. The facility identified 31 inmates as hard of hearing that included one identified as deaf. Hearing aids are provided to the inmates in need. In addition to the PREA video provided verbally, the video is also presented in Closed Caption. Additionally, PREA information is readily available and provided to the inmates in written format within the facility handbook, and posters on bulletin boards throughout the facility. Inmates also attend an orientation session upon arrival in which an oral presentation is presented by staff.

Three (3) inmates were identified as visually impaired that included one (1) as blind. An interview with the inmate identified as blind, indicated he had no difficulty in hearing, and was given PREA education during intake and orientation by staff. He indicated he can communicate in written format through the use of his issued Braille material.

BCCX The facility identified 182 inmates with disabilities that included physical and medical disabilities. Two (2) were interviewed by the auditing team. Both indicated they were provided with PREA education upon their arrival during intake and attending orientation verbally and in written format that they could understand. Each also acknowledged PREA information of posters throughout the facility, and ways to report on the phones and tablets.

The auditing team was provided with the use of the Lionbridge Telehealth Service to conduct an interview with an inmate identified as Deaf. The inmate stated he can read, and the facility provides in-person ASL services for his enrolled educational services, in addition to other translation services via ASL. He acknowledged he has access to complete video visiting and to TTY communicate in addition to his tablet and other writing instruments,

An inmate identified as hard of hearing stated he was issued hearing aids that assist

him in hearing. He acknowledged observing the PREA video and receiving a facility handbook that includes PREA information that he can read and understand. He also acknowledged his awareness of the PREA posters throughout the facility and how to report on the phones and tablets.

An interview with an inmate identified as cognitive disabled, indicated he was provided PREA education via observance of the PREA video during orientation, and received a facility handbook that include PREA information He also acknowledged observing the PREA information on the bulletin boards and is ability to read and understand the PREA information he received.

The auditing team confirmed PREA education is provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, hard hearing, physical disabled, those with limited reading skill, blind or low vision in the manners of written, verbal, and/or observation via the PREA video and PREA posters that they can understand.

115.16 (b) TDOC 502.06 states Facility staff take reasonable step to ensure meaningful access to all aspects of TDOC's effort to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptive and expressively, using any necessary specialized vocabulary.

TDOC Program Curriculum HR—5-04 Title VI requires information and services to be provided in languages other than English when significant, numbers of beneficiaries are of limited English -speaking ability.

The BCCX Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities documents the facility's obligation to provide appropriate services to inmate identified as Limited English Proficiency. The Plan includes a list of BCCX staff who are bilingual and provide translation services in the Spanish language as needed for the inmate population. The BCCX LEP Plan is updated annually and was noted as revised May 2024.

During interviews with the Chief Counselor and a Religious Services Chaplain, an identified Chaplain often provide translation services in the Spanish language as needed during the risk screening proceedings at intake. This information was confirmed by the Chaplain during a random interview.

The auditing team observed the "I Speak" Language Identification Guide posted in the intake area that allowed inmates to identify their language from the list of languages to include Spanish. There were no inmates at the facility whom first language was not that of the English and/or the Spanish languages.

The BCCX Inmate Rules and Regulations Handbooks was observed available to the inmate population in Spanish and English. Continuous PREA educational material was observed posted on bulletin boards and walls throughout Site 1, Site 2 and Unit 28 that included how to report in both English and Spanish.

In addition to designated staff to provide translation services for inmates identified as LEP, the agency has established a contract with the University of Tennessee Language Center, that provide qualified language interpreter services for non-native English-speaking inmates.

The facility provided documentation of translation services provided by the BCCX Chaplain and the Tennessee Language Center during the intake and medical screening process for 12 inmates.

The facility reported seven (7) inmates identified as Limited English Proficient (Spanish). The LEP inmates were provided the facility inmate handbook in the Spanish language. Additionally, PREA information is posted in the Spanish language on the bulletin boards throughout the complex to include all housing units, program, and operational areas, and available on the inmates' personal issued tablets in the Spanish language. The recorded messages on the inmate housing unit phones and personally issued tablets on how to report sexual abuse and sexual harassment is available in the Spanish language.

The auditing team conducted interviews with two (2) inmates identified as Limited English Proficient (Spanish). One (1) was interviewed using interpretation services provided by a staff member. The second was interviewed through services provided by the Tennessee Language Center. Staff were familiar with the use of the equipment and operated without difficulty. Both inmates acknowledged receiving the facility handbook with PREA information in the Spanish language in addition to observing the PREA posters, informational flyers and information on the phones and tablets that they understand. Both inmates acknowledged they were provided with translation services during the risk screening and medical intake process.

115.16 (c) TDOC Index 502.06 states, Staff must not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances, such as when an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-responder duties or the investigation of the inmate's allegation. A contact note, using code LCDG is posted in OMS, identifying the name of the assistor/interpreter and their organization.

Per the PAQ , the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations within the 12 -month review was zero. :

Interviews with 20 random staff indicated all stated they would not utilize an inmate to translate for another inmate while reporting sexual abuse or sexual harassment. Staff were aware of staff who provide Spanish translation interpretation and the available translation services by the Tennessee Language Center that would be arranged by authorized staff as needed.

Based on the review of policies, staff training, available resources for translation services to include staff and interagency contract for interpretation, site observation, and interviews with staff and inmates, the facility has demonstrated compliance with

	all the provisions of this standard.
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 301.04 Job Requirements (Effective 03-15-2023)</li> <li>3. TDOC PREA Self Declaration Forms</li> <li>4. Hiring and Promotional Records</li> <li>5. TDOC Staff, Contractors, and Volunteers' Criminal History Background Records</li> <li>6. Previous Employee Information Request Tracking Log</li> <li>7. Interviews with: <ol style="list-style-type: none"> <li>a. BCCX Human Resource Administrator</li> <li>b. BCCX Religious Services Chaplain</li> <li>c. Central Office Director of Religious and Volunteer Services</li> </ol> </li> </ol> <p>115.17(a) (b) (c) (d) Per TDOC Index 301.04, After a conditional offer of employment is made, a National Crime Information Center (NIC) criminal history check shall be conducted on all prospective departmental, contract and TRICOR employees, who are assigned to TDOC facilities and work locations, and fingerprints shall be taken and processed on all new or prospective staff assigned to safety-sensitive positions. The NCIC criminal history record check shall be conducted prior to employment. Such inquiries will be made to determine whether there is past or pending criminal matters that would adversely impact the TDOC's mission.</p> <p>TDOC Index 301.04 states All applicants for employment or promotions, all contract employees, and all volunteers who may have any contact with offenders, shall sign PREA Self-Declaration for Sexual Abuse /Sexual Harassment, CR-3819 to ensure compliance with PREA Standard #115.17 which states the agency shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor, who may have contact with inmates. who: a) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. b) 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, or;</p>

(c) Has been civilly or administratively, adjudicated to have engaged in activity described in (b) above. d) The Department shall consider any incident of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. A review of the policy confirms compliance of the provision.

Per the PAQ noted, 84 staff were hired who may have contact with inmates who have had criminal background record checks during the 12-month review period.

Additionally, the PAQ noted two (2) contract services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates. The contracts were identified with Centurion (medical and mental health), and Armark (food service). Per the Human Resource Administrator, although the contractors are employed through their respective agency, BCCX human resource staff conduct all background checks and notifies their agency when the contractor has been cleared for employment at BCCX.

Per the Human Resource Administrator, staff utilize the NCIC program for all background investigations for all TDOC new hires and contract workers after a conditional offer of employment is made. Additionally, all applicants are also required to complete a PREA Self-Declaration for Sexual Abuse/Sexual Harassment, CR-3819 for submission prior to the interview and the conditional offer.

Annual background checks for all TDOC staff are conducted during the staff's birthday month. Annual background checks for all contract staff such as medical, mental health and food service staff are conducted throughout the month of July.

Per the Human Resource Administrator, applicants are also required to complete the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 with their application which is required before the submission for a background check. In addition to new hires, all current TDOC staff are required to complete the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 annually in conjunction with the completion of their annual background check which is completed during their birth month. Contract staff are required to submit a new PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 form in July during their annual background check.

The PAQ identified 251 volunteers were approved to provide services for the inmate population. Per an interview with the Director of Religious and Volunteer Services, the background checks for volunteers are completed through the Central Office for all volunteers to include those entering for special events only. Additionally, all are required to complete a PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819. Electronic signatures are available. The current procedure recently changed as it was previously the responsibility of the respective BCCX facility's Religious Service Chaplains to ensure the background checks and submission of the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 were completed in accordance with the agency policy.

Additionally, prior to staff's consideration for a promotion and entry for the interview, each are required to complete an updated PREA Self-Declaration of Sexual Abuse/

Sexual Harassment, CR-3819. The submission of false information will result in disqualification and/or termination for all staff.

Per the Human Resource Administrator, all staff to include contractors, are required to complete a PREA Self-Declaration form. All applicants are required to complete the questionnaire. All staff to include TDOC, contractors and volunteers are required to complete a new PREA Self-Declaration of Sexual Abuse/Sexual Harassment during their new hire, annually during their annual background check and upon selecting to apply for a promotion.

The auditing team requested a random selection of the following for confirmation of the standard provisions for the completion of background checks: 15 TDOC new hires; 8 Armark (food service); 25 Centurion (medical and mental health) and 20 volunteers. The review of staff personnel files confirmed a criminal background check was performed for each of the requested applicants.

115.17 (e) TDOC Index 301.04 indicates current employees will be required to submit to an annual background check. The check is to be completed by the end of the month in which the employee's birth date occurs. The Human Resources Office for each TDOC work location will be responsible for compiling a monthly list of employees who have birthdays within each month. TDOC utilized the NCIC to conduct all background investigations for new hires and annually for current staff. An annual background check is completed on all TDOC staff during their birth month. Staff are required to acknowledge that an annual background check is required to be completed annually during their birth month, notification to the affected staff members is not required. However, staff are required to submit an annual PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 to ensure compliance with the PREA Standard during their birth month and in the event, they are seeking a promotion.

The auditing team randomly selected 30 TDOC staff for confirmation of annual background checks in accordance with the agency policy and the standard provision. Documentation supported a criminal background investigation was completed through the NCIC for each was conducted within the review period and staff's employment.

115.17(f) TDOC Index 301.04 indicates all applicants for employment or promotions, all contract employees, and all volunteers who may have any contact with offenders shall sign PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 to ensure compliance with PREA Standard 115.17. Assigned employees who have substantiated PREA complaints against them for sexual harassment or abuse must acknowledge such each year on their CR-3819 and whenever they apply for advancement. The PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 requires staff to respond to the following questions: a) Has engage in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution? b) has been convicted of engaging or 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? c)



Have you ever been civilly or administratively adjudicated to have engaged in sexual activity, sexual abuse, or sexual harassment? Per the Human Resource Administrator, the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, is a section of the application process for new hires and an annual requirement of all TDOC staff, contact and volunteers in addition to a current employee who apply for a promotion. If an individual provides incorrect information in response to the PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, they would automatically be disqualified for consideration of employment. All staff seeking a promotion are required complete a new PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819 prior to entering for the interview. She further stated, the agency imposes upon employees a continuing affirmative duty to disclose any such misconduct. Staff are required to immediately report any arrest within 24 hours and/or prior to their next shift directly to the Warden.

The auditing team confirmed the submission of completed PREA Self Declaration for Sexual Abuse /Sexual Harassment, CR-3819, through the review of the following personnel files for each of the staff selected for background checks that included 15 TDOC new hires; 8 Armark (food service); 25 Centurion (medical and mental health) 20 volunteers, and 30 who was selected for confirmation of annual background checks per agency policy that exceeds the standard provision requirement of five (5) years standard provision. The review confirmed the agency policy requires the consideration of any incidents of sexual harassment in determining in whether to hire or promote anyone who may have contact with inmates.

115.17 (g) TDOC Index 301.04 indicates that a material omission regarding conduct described in this directive or providing materially false information may result in disqualification from further consideration for employment and shall be grounds for termination of employment. Additionally, the Self-Declaration Application Form states "I hereby certify that to the best of my knowledge and belief, all the information I provide in this form is true, complete, and made in good faith. I understand that false and fraudulent information provided herein may disqualify me from further consideration for employment and, if employed, may result in termination of employment if discovered later." This information was also identified as provided to all applicants within the pre-employment packet.

115.17 (h) TDOC Index 301.04 states Consistent with Federal, State, and local law, the TDOC will make it that officials receiving the results of the criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal statute. An interview with Human Resource Manager confirmed the agency does provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from a potential employee. The questionnaire is forwarded to the facility's OIC Investigator for completion. Upon completion, the form is returned to the inquiring facility by the human resource staff. A staff member seeking employment must give prior approval via signature for the release of information to include prior discipline. The request for information is always documented. Employees identified in a substantiated sexual harassment and/or abuse investigation would be place on a "no rehire" list. Human Resource staff forwards a referral to all applicants' previous employers requesting a

	<p>work history and document when the requested information was forwarded. Documentation of human resource staff's request to applicants current and or former employees were submitted for review. The requests are forwarded and monitored for confirmation of receipt through a tracking log.</p> <p>Based on the review various departmental staff background checks to include TDOC staff, contract staff and volunteers to include annual background investigations, submission of completed PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819, that is a section of the application process and required to be submitted annually by staff and when applying for promotions, BCCX does meet all provisions of the standard.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index #108.01 Facility Construction, Renovation, and Physical Plant Maintenance (Effective date (04/03/2023)</li> <li>3. TDOC Index #108.02 (Effective date 06-21-2021)</li> <li>4. BCCX – Security Electronics Refresh Meeting Minutes</li> <li>5. BCCX Field Reports</li> <li>6. Interviews: <ol style="list-style-type: none"> <li>a. BCCX Warden</li> <li>b. TDOC Agency Head Designee</li> </ol> </li> </ol> <p>115.18 (a) (b) TDOC Index 108.01 and TDOC Index 108.02 outlines the mandates of the standard provisions. The policies note that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion, or modification upon the Department's ability to protect inmates from sexual abuse. Per the agencies policies, when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the Designer shall consider the PREA impact of how such technology may enhance the TDOC's ability to protect inmates and staff from sexual abuse."</p> <p>An interview with the Agency Head/Designee indicated all modifications require request and approval. Any request submitted must also account for any additional</p>

	<p>cameras or mirrors that will be necessary to add to the area to ensure sexual safety. The agency utilizes video recording systems to monitor and record activities within the facilities. This tool is utilized to cover blind spots, to verify allegations, and to hold individuals accountable for their actions.</p> <p>An interview with the Warden confirmed the completion of the segregation unit located in Unit 28 (female unit). The special housing unit is an extension of Unit 28 and consists of six single cells. Two cells are identified as observation cells and are equipped with video monitoring. The special housing unit also includes 360-degree video monitoring cameras that enhance the safety of both staff and the inmate population.</p> <p>The auditing team observed the ongoing project of the ongoing construction modification within the Intake/Diagnostic department. Per the Warden, the constructional modification was necessary for the installation of the Body Scanner to be utilized on the inmate population.</p> <p>The field reports, meeting minutes and interview with the Warden, confirmed repairs, replacement and the upgrade of video monitoring equipment to include the installation of 360-degree cameras. Warden indicated the facility currently has 819 cameras that are strategically located throughout the facility in an effort to provide a safe environment for staff and the various inmate population that include the prevention and/or detention of sexual abuse and sexual harassment.</p> <p>Based on the review of policy, observation, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. National Protocol for Sexual Assault Medical Forensic Examinations Adults/Adolescents (Effective 2014)</li> <li>3. TDOC Office of Investigation and Compliance Evidence Operational Protocol: 08 alleged Sexual Abuse (Effective 07/27/2019)</li> <li>4. TDOC 502.06 Prison Rape Elimination Act (PREA) Implementation, Education, and Compliance (Effective 08-01-2020)</li> <li>5. BCCX 502.06-1 PREA Allegations, Investigations and SART (Effective 12/15/2020)</li> </ol>

<p>6 BCCX 502.06-1 PREA Allegations, Investigations and SART (Effective 10/25/2024)</p> <p>7. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</p> <p>8. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy and Community Support for PREA Victims</p> <p>9. MOU with The Avalon Center</p> <p>10. Avalon Center Support Services Postings</p> <p>11. Appointment of BCCX Victim Advocate</p> <p>12. PREA Case File/Medical Documentation</p> <p>13. Interviews with:</p> <ul style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Inmates Who Reported Sexual Abuse</li> <li>c. BCCX Facility Victim Advocate</li> <li>d. Avalon Center Representative</li> <li>e. Cumberland Medical Center Medical Practitioner</li> <li>f. BCCX PREA Compliance Manager</li> </ul> <p>115.21 (a) TDOC 502.06 states the TDOC has absolute zero tolerance towards sexual acts between staff and inmates as well as between inmates. There are no consensual sexual acts in a custodial or supervisory relationship or consensus sexual contact between inmates. All allegations of sexual abuse/sexual harassment will be reported and investigated.</p> <p>TDOC index 107.01 defines the Office of Investigation and Conduct (OIC) as the Investigative Unit (IU) that performs both administrative and criminal investigations. Institutional Investigators are assigned by the OIC to each TDOC institution to conduct investigations at an institutional level. OIC Special Agent (SA) is defined as a qualified, commissioned individual assigned to the OIC who conducts both criminal and administrative investigations of matters pertaining to the TDOC.</p> <p>Operational Protocol #008 dated July 27, 2019, identifies the (1) Notification and Response Procedure stating "It shall be the protocol of the Investigations Unit to appropriately respond to incidents and/or allegations of sexual abuse which occur on TDOC institutional property. When notification is made in a timely manner, Agents will respond as the situation mandates to the site of examination for the purpose of evidence collection and preservation. The Department's response to sexual assault follows the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," dated April 2013, or the most current version. (2) Upon</p>
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notification of alleged sexual abuse within any TDOC institution, the institution shall immediately have the alleged victim examined by qualified medical personnel. After the initial examination and collection of clothing for potential evidence, the alleged victim will be transported to the nearest Emergency Room. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit provided by TBI.

This kit will be retained by the ER staff until received by an IU Agent. (3) The responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. (4) Upon evaluation of all information and evidence obtained, IU staff shall deliver evidence obtained from the investigation to the TBI Crime Laboratory for evaluation as possible evidence. (5) The Agent will present all evidence in the case of the appropriate District Attorney for review, adoption and prosecution of any suspects.

Interviews with 20 randomly selected security and non-security staff indicated all were knowledgeable of obtaining usable physical evidence if an inmate reported sexual abuse and the actions they are required to complete as a first responder and their duty to report to their immediate supervisor who would report to the Shift Commander. All staff to include security and non-security staff, are issued and carry in their possession a PREA Action Card that lists the duties of a first responder and immediate notification to the Shift Commander.

115.21(b) BCCX does not house youthful offenders. Therefore, the standard provision is not applicable.

115.21 (c) TDOC 502.06.3 indicates upon receiving a report of an alleged sexual abuse within the 72-hour time frame members SART that includes medical staff and the OIC institution Investigator shall determine if SAFE/SANE response is indicated at an outside medical facility. If the services of an outside medical facility are determined to be warranted, the victim shall be transported by security to an outside medical facility with SAFE/SANE personnel for a forensic examination at no cost to the victim. Upon receiving a report to an alleged sexual abuse outside of the 72-hour time frame, SART members shall determine if SAFE/SANE response is indicated at an outside medical facility with SAFE/SANE personnel. The alleged victim shall be transported only to medical facilities trained and equipped with SANE personnel. If SAFE/SANE personnel cannot be made available, the forensic examination can be performed by other qualified medical practitioners. The medical member of the SART shall document the efforts to provide SANE services. Interviews with the BCCX medical staff confirmed the facility is scheduled to utilize the local Cumberland Medical Center 79 S Main Street Crossville, TN for all forensic examinations.

Per the interview with the Cumberland Medical Center Medical Practitioner, the facility does not employ SANE or SAFE. However, four (4) medical practitioners have received the appropriate training to serve as qualified medical practitioners to perform forensic medical examinations on victims of sexual abuse and typically one (1) qualified

medical practitioner is on duty 24/7 to perform the service. The Medical Practitioner also recalled one (1) victim assigned at the BCCX arrival at the Cumberland Medical Center who completed a forensic medical examination during the 12-month review period.

Per interviews with the BCCX PREA Compliance Manager and review of the applicable sexual abuse investigative file, one alleged victim was transported to the Cumberland Medical Center for a forensic examination. However, the inmate elected not to complete the forensic examination after a physical assessment by the attending qualified medical practitioner.

The PAQ noted the number of forensic medical exams conducted during the past 12 months and the number of exams performed by SANES/SAFEs during the past 12 months as one (1). The PAQ also noted the number of exams performed by a qualified medical practitioner during the past 12 months as zero. However, the one (1) forensic medical examination was later identified correctly as completed by a qualified medical practitioner upon transport to the Cumberland Medical Center.

115.21 (d) TDOC established a Memorandum of Understanding (MOU) with The Avalon Center on April 17, 2015, that remains in effect. The MOU agrees (1) involvement of trained sexual assault advocates is a component of the standard response to a report to sexual assault and /or a request for help from a survivor of sexual assault. (2) Provide for logistical needs, such as a private meeting space for counseling sessions and security clearance for designated Sexual Avalon Center staff. (3) Respect the nature of privileged communication between the sexual assault advocate and client. (4) Facilitate follow-up and ongoing contact between the client and sexual assault advocate without regard to the presence of status of an investigation. (5) Provide training to the Avalon Center staff; (6) Communicate any questions or concerns to Avalon Center. The Avalon Center also agrees to the following: 1) Maintain confidentiality of survivors of sexual violence who are incarcerated at Bledsoe County Correctional Complex (BCCX) and Morgan Correctional Complex (MCCX). 2) Maintain available crisis counseling through the organization's crisis hotline at any time 24 hours a day; 3) Work with designated BCCX and MCCX officials to obtain security clearance and follow all institutional guidelines for safety and security; 4) Maintain confidentiality as outlined in the Avalon Center confidentiality policy; 5) Provide training for BCCX and MCCX staff. Per an interview with the TDOC Statewide PREA Coordinator, the agency is currently in the beginning negotiation stage of attempting to renew/update previously established Memorandum of Understanding with the various Crisis Centers throughout the TDOC.

The available victim advocate services provided by the Avalon Center was observed noted in the inmate handbook in English and Spanish and is posted on bulletin boards. Additionally, the Avalon Center sponsors weekly Support Group sessions to the female population. This service has not been requested by the male population.

115.21 (e) TDOC Index 502.06 outline the mandate of the standard provision. A PREA Victim Advocate is made available to the alleged victim, when requested, to accompany and support the victim through the forensic medical examination and the

investigation process.

A memorandum drafted by Associate Warden (T) identified the Mental Health Case Manager as the Facility Victim Advocate. The notice was observed posted on bulletin boards accessible for viewing by staff and the inmate population. Per an interview with the Facility Victim Advocate although he has communicated with the victims of sexual abuse upon reporting, none have requested services. He was aware of the available services that are provided to the inmate population by the Avalon Center via free confidential phone calls made by the inmate wall phones and personal issued tablets.

Per interviews with the BCCX PREA Compliance Manager, the Avalon Center is an established crisis center who meets all the qualifications per the standards that are identified within the MOU and through the phone and in-person services available to the inmate population. The available services were confirmed during an interview with the representative of the Avalon Center and review of history and services noted on the Avalon Center's website.

Per the interview with the Cumberland Medical Center medical practitioner, they indicated upon a victim arrival for a forensic medical examination, the medical practitioner immediately discusses available services while also offering a victim advocate who is provided by the Avalon Center. Upon the victim's request, they are required to sign a consent form as the services are only offered and are not forced.

Per an interview the Avalon Center Representative, upon receiving a call from the Cumberland Medical Center that an inmate has requested victim advocate services, an Advocate is always available and respond to accompany the victim through the forensic medical examination process, investigatory interviews and answer any questions they may have regardless of when the calls are received for advocate services. Depending on the victim's comfort level, the Advocate may be present in the room during the forensic examination or may be seated in the waiting area. She acknowledged her awareness of one (1) BCCX inmate reporting to the Cumberland Medical Center for a forensic examination within the previous 12 months but could not recall if the victim accepted advocate services.

The Avalon Center Representative further stated the agency's Advocates also provide facility support group services for the inmate population such as emotional support and therapeutic support at BCCX. However, these services have only been requested by the BCCX female population and not by the males. Additionally, there has been a decline in the request for in-person visits from BCCX from the male population which are also provided by the Avalon Center Advocates.

Interviews with four (4) inmates who reported sexual abuse were asked if they had requested to speak with a victim advocate upon reporting. Three (3) inmates acknowledged they are on the mental health caseload and are scheduled regular sessions with mental health staff. One of the three (3) also acknowledged attending in -person weekly group sessions presented by the Avalon Center at the facility. The fourth victim acknowledged attending weekly one-on-one sessions presented by an advocate with the Avalon Support Group. Therefore, neither of the four (4) stated they

	<p>requested to speak with a victim advocate upon reporting the sexual abuse allegation.</p> <p>The one alleged victim who completed a forensic medical examination was not assigned at BCCX during the site observation to conduct an interview.</p> <p>115.21 (f) (g) The TDOC Office of Investigations and Conduct is responsible for conducting all administrative and criminal investigations of sexual abuse. Therefore provisions (f) and (g) are not applicable.</p> <p>115.21 (h) A facility victim advocate has been assigned who is also assigned as a Mental Health Case Manager. Confirmation of the training course “Meeting the Needs of Prison Rape Victims, A technical Assistance Guide for Sexual Assault Counselors and Advocates” was provided. The BCCX Facility Victim Advocate stated he was aware some of the inmates who report sexual abuse are on the mental health case load in addition to some are receiving services through the Avalon Support Group, he has not received a request by the inmate population for advocacy services.</p> <p>Based on the review of agency policies, MOU between the TDOC and The Avalon Center, services provided by the Avalon Center to the inmate population, PREA investigative case files and medical documentation, appointment of facility victim advocate, and interviews, the facility does meet all provisions of the standard.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigation and SART (Effective 08/01/2020)</li> <li>3. TDOC Inde 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>4. TDOC Index 107.01 Office of Investigation and Conduct: Unit Authority, Responsibility, Personnel Selection and Training (Effective date 09/02/2020)</li> <li>5. TDOC Index 107.01 Office of Investigations and Conduct (OIC) Roles and Responsibilities (Effective date 05/09/2024)</li> <li>6. PREA Allegation System (PAS) List</li> <li>7. Interviews with: <ol style="list-style-type: none"> <li>a. BCCX Institutional Investigators and OIC Special Agent</li> </ol> </li> </ol>



b. Agency Head Designee

115.22 (a) (b TDOC Index 502.06.2 states, "It is the policy of the TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guideline (Title 28 CFR part 115).

TDOC Index 502.06.2 and TDOC Index 502.06 states, staff accept reports, made verbally, in writing, anonymously, and from third parties. All allegations are documented within 24 hours of becoming known to facility staff in the PREA Allegation System (PAS). These investigations are conducted within 72 hours of receiving the allegation. Sexual Assault Response Team (SART) members/ investigators who have received special training in conducting sexual abuse investigations in confinement settings investigate all allegations of sexual abuse sexual harassment promptly, thoroughly, and objectively, including third-party and anonymous reports. Investigative Unit (IU) Special Agents are contacted immediately when circumstances warrant further actions pursuant to criminal findings.

TDOC 502.06 notes It is the policy of the TDOC to provide a safe, humane, appropriately secure environment , appropriate medic and behavioral health care, victim advocacy, and community support services that are 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 and sexual harassment.

Interviews with the BCCX Institution Investigators and Office of Investigations and Conduct (OIC) Special Agent indicated normally the initial investigation begins on the date of the reported allegation. All allegations are documented in the PREA Allegation System within 24 hours of reporting.

The facility provided a copy of the PREA Allegation System List for the review period that identified an investigative finding was concluded for each of the reported 15 sexual abuse allegations, and nine (9) sexual harassment allegations.

Pursuant to TDOC Index 502.06.02 and TDOC Index 502.06 in addition to interviews with the BCCX Warden, BCCX Institution Investigator and OIC Special Agent confirmed all allegations of sexual abuse and/or sexual harassment are investigated by BCCX Institution Investigators and/or OIC Special Agents within the Tennessee Department of Corrections. The BCCX Institution Investigators are authorized to conduct administrative investigation only. Upon the determination of the possible criminal acts committed, the BCCX Institution Investigator refers the allegation to the OIC Special Agent for completion. The OIC Special Agents has the legal authority to conduct both administrative and all allegations that involve potential criminal behavior for criminal prosecution. All PREA allegations to include those reported by third party, anonymously, verbally, written and/or via a drop note are investigated in the same manner. Substantiated sexual abuse allegations of criminal behavior are referred by the OIC Special Agent to the State Assistant District Attorney for prosecution.

The Agency Head/Designee stated, the agency does ensure an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual

harassment. For each allegation, policy mandates that an entry be made in the PREA Allegation System. The allegation system is used to track the steps in the investigation and the results. Policy also mandates that all investigations are completed even if the offender transfers facilities or the staff member abruptly quits. When a PREA allegation is made, an investigation is completed and documented in the PREA Allegation System. Both types of investigations are completed in the same way initially by the Institutional Investigator. After the initial response of separating and securing the victims, securing the scene and collecting evidence, both the victim and aggressor are interviewed. Corroborating evidence is sought, and a determination is made regarding the level of allegation. If the allegation could possibly be a criminal case, the case is referred to the OIC Special Agent for additional review and prosecution if applicable.

Per interviews with the OIC Special Agent and BCCX Institutional Investigators, agency policies do require an investigation of all reported allegations of sexual abuse and sexual harassment. TDOC authorizes both administrative and criminal investigations to be conducted by agency investigators.

The PAQ noted for the number of allegations of sexual abuse and sexual harassment that were received within the past 12 -months as 24.

The PAQ noted the number of allegations in the past 12 months resulting in administrative investigations as 8. The correct number was identified as 24.

The PAQ noted in the past 12 months, the number of allegations referred to for criminal investigations was zero. The one (1) substantiated sexual abuse investigation (staff on inmate) did not identify criminal activity.

The auditing team reviewed the TDOC website at [www.TennesseeDepartmentofCorrections](http://www.TennesseeDepartmentofCorrections). TDOC included a section regarding investigation of sexual assault and sexual misconducts. The department is dedicated to producing quality investigations of alleged sexual abuse incidents. All investigators receive specialized training specific to sexual assault in correctional institutions. The TDOC Law Enforcement Unit, in consultant with the department legal office, aggressively refer substantiated cases of sexual assault by offenders or employees to the local district attorney's office for criminal prosecution.

115.22 (c) (d) (e) TDOC Index 107.01 defines The Office of Investigation and Conduct (OIC) as a division within the TDOC which consists of Apprehension and Enforcement (AEU), Investigations Unit (IU), Security Threat Group (STG) and Special Operations Unit (SOU).

The Investigation Unit (IU) is defined as a specialized law enforcement unit of the TDOC which conducts both criminal and administrative investigations of offenses relative to or affecting the TDOC.

Institution Investigators are assigned by the OIC to each TDOC institution to conduct investigations at an institutional level. An OIC Special Agen is a qualified, commissioned individual assigned to the OIC who conduct both criminal and

	<p>administrative investigations of matters pertaining to TDOC.</p> <p>Therefore, TDOC is responsible for conducting all sexual abuse and sexual harassment investigations and provisions c, d, and e, are not applicable.</p> <p>Based on the review of agency policies, PREA Allegation System (PAS) List, TDOC agency's website, staff interviews, and analysis, the facility has demonstrated compliance with all applicable provisions of the standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 PREA Implementation, Education, and Compliance (Effective 08/01/2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective October 21, 2024)</li> <li>4. TDOC Index 110.05 In-Service Training</li> <li>5. Tennessee Correctional Academy Program Curriculum/ PREA Inmate Sexual Abuse/ Assault/ Pre-Service/In Service FY 24-25</li> <li>6. TDOC PREA Training Via PowerPoint</li> <li>7. New TDOC PREA Training Records</li> <li>8.TDOC Security Staff In-Service Training Records</li> <li>9. Non-Security Staff PREA Training Records</li> <li>10. All BCCX Completed PREA Training Roster</li> <li>11. Observation During Site Visit</li> <li>12. Interviews with: <ol style="list-style-type: none"> <li>a. Random and Specialized Staff</li> </ol> </li> </ol> <p>115.31(a) TDOC Index 502.06 states, "The Tennessee Correction Academy (TCA) will be responsible for the development and distribution of the course lesson plans annually. All lesson plans or materials utilized for pre-service and in-service training on inmate sexual abuse and sexual harassment shall be approved by TDOC Statewide</p>

PREA Coordinator and TDOC General Counsel. At a minimum the training shall cover the following: a) TDOC policy on zero tolerance for sexual abuse and/or sexual harassment; b) Staff responsibilities under TDOC policies on sexual abuse and sexual harassment, prevention, detection, proper reporting procedures, c) Inmate's rights to be free from sexual abuse and sexual harassment; d) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; e) The dynamics of sexual abuse and sexual harassment in confinement; f) The common reactions of sexual abuse and sexual harassment victims; g) How to detect and respond to signs of threatened, suspected, or reported sexual abuse; h) How to avoid inappropriate relationships with inmates; i) How to communicate effectively and professionally with inmates, including lesbian, gay, transgender, intersex, or gender nonconforming inmates; j) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The TDOC Correction Academy Program Curriculum Lesson Title PREA Inmate Sexual Abuse/Assault a 2-hour Pre-Service and/ In-Service annual training course is used for training and covers 10 topics specified in this provision. New hires include agency staff, and contractors receive PREA training during New Hire Orientation during the first week of employment at the facility prior to contact with the resident population. Staff also attend and receive additional comprehensive PREA training while attending the Tennessee Correctional Academy (TCA).

Pursuant with TDOC Index 110.05, "Mandatory in-service training that is required for all TDOC employees' (as driven by departmental policies) shall include but not limited to Prison Rape Elimination Act (PREA) (2 hour)." In-service annual PREA training is conducted during the classroom sessions and online by all staff at the facility.

Although agency staff, contract staff and volunteers can access the PREA training at the facility, while at home or any available computer, security staff are required to complete the PREA training course during the classroom sessions. A passing score is required. The completion of the PREA training is monitored by the Training Specialist. Anyone who has not completed training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) and would be required to make up any missed training by the required deadline. The TDOC PREA Training PowerPoint Lesson Plan was presented for review.

Interviews with 20 random staff in addition to interviews with specialized staff indicated PREA training is required to be completed during the new hire orientation and annually during in-service training. Staff also acknowledged their awareness of the PREA posters and bulletins throughout the Complex at Sites 1, Site 2 and Unit 28. Each indicated the topics of training within the standard provision are included in the agency's PREA lesson plan.

115.31(b) TDOC Index 502.06 states, "Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa." TDOC PREA training courses are developed to provide appropriate training for employees assigned to both male and female correctional facilities. BCCX houses both male and female inmates at

separate sites. Specifically, males are housed at Site 1 and Site 2, while female inmates are housed at Unit 28.

115.31 (c) The Department shall provide each employee with refresher training annually to ensure that all employees know the Department's current sexual abuse and sexual harassment policies and procedures. All staff are required to complete PREA training annually during in-service training in classroom sessions and online at the facility. Although agency staff, contract staff and volunteers can access the PREA training via computer, the training is also required to be completed during the classroom session. A passing score is required. Anyone who has not completed training or may have been unable to attend for various reasons (i.e. injury, illness, schedule conflict) and would be required to make up any missed training by the required deadline.

The facility provides refresher PREA training for employees annually rather than the standard provision requirement of every two years. Additionally, PREA education is located on bulletin boards and walls and throughout the institution visual to all. All staff are issued PREA refresher cards that are required to be in their possession as continuous refresher training. Documentation of refresher training was submitted review through staff acknowledgement on the TDOC Employee PREA Training Acknowledgement Form for in-service training and an electronically stored data roster identifying all TDOC and contractor's PREA training for FY 24/25.

The auditing team observed continuous PREA education posted throughout the facility on bulletin boards and walls accessible to staff and inmates. All staff are issued and carry PREA education refresher cards titled "PREA Refresher Information, Ways to Report, PREA Action Steps, Immediate Action Steps, and Internal/External PREA Reporting Options." Security staff indicated security supervisory staff often discuss PREA educational material during shift briefings.

115.31(d) TDOC Index 502.06 states, "The TCA Department and facilities shall document, through employee signature or electronic verification, that employees understand the training they have received using Employee PREA Training Acknowledgement, CR-3965. Confirmation of staff's PREA training was supported by their signature noting "I acknowledge that I have received training on the PREA and understand the training" on the TDOC Employee PREA Training Acknowledgement Form. The facility reported 672 staff on the first day of the site observation. Confirmation of PREA training was provided for 55 TDOC employees through signatures on the Employee PREA Training Acknowledgement CR-3965 forms. Staff acknowledged their receipt of the training in addition to their understanding of the training. The completion of the staff PREA training is monitored and maintained in the employees' training file and electronically stored in the Collaboration Training database operated by the BCCX Training Specialist. Documentation of the electronically stored data of PREA training for all BCCX staff to include contractors was provided for review by the auditing team.

Based on the review of policies, training lesson plans, training records, interviews and analysis, the facility has demonstrated compliance of this standard. requirement.

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. Tennessee Correctional Academy Program Curriculum/ PREA (Prison Rape Elimination Act) FY 24-25</li> <li>3. TDOC Index 502.06 PREA Implementation, Education, and Compliance (Effective 08/01/2020)</li> <li>4. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>5. TDOC Index 110.01 Pre-Service (Basic) Training and Employee Orientation (Effective 07-21-2023)</li> <li>6. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement (Effective 07-01-2021)</li> <li>7. TDOC FY24 -25 PREA Training Power Point</li> <li>8. PREA Refresher Cards</li> <li>9. PREA Informational Posters</li> <li>10. TDOC Website</li> <li>11. Contractor and Volunteer PREA Training Records and Rosters</li> <li>12. Site Observation</li> <li>13. Interviews with: <ol style="list-style-type: none"> <li>a. Contractors</li> <li>b. Director of Religious and Volunteers Services</li> <li>c. Religious Services Volunteers</li> <li>d. BCCX Religious Service Chaplain</li> </ol> </li> </ol> <p>115.32 (a) (b) (c) Pursuant to TDOC 502.06 the policies outline the mandate of the standard requiring all volunteers and contractors who have contact with inmate shall be trained on their responsibilities under TDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Training acknowledgement for volunteers and contractors is required to be documented</p>

through signature on CR-3965. The PAQ identified the 439 contractors and volunteers as the following: 251 volunteers and 188 contractors.

TDOC Index 110.01 states that part-time employees, volunteers, contract staff and other transferring employees NEO; part-time employee, volunteer, contract staff and employee who are permanent transferring from one location to another shall receive a minimum of 20 hours of work site orientation appropriate to their assignment. The TCA Curriculum for PREA will be used.

TDOC Index 502.06 states, "The Tennessee Correction Academy (TCA) is responsible for the development and distribution of the course lesson plans annually. All lesson plans or materials utilized for pre-service and in-service training on inmate sexual abuse and sexual harassment shall be approved by TDOC Statewide PREA Coordinator and TDOC General Counsel. At a minimum the training must cover the following: 1) TDOC policy on zero tolerance for sexual abuse and/or sexual harassment; 2) Staff responsibilities under TDOC policies on sexual abuse and sexual harassment, prevention, detection, proper reporting procedures, as outlined in and how to document response to allegations; 3) Inmate's rights to be free from sexual abuse and sexual harassment; 4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; 5) The dynamics of sexual abuse and sexual harassment in confinement; 6) The common reactions of sexual abuse and sexual harassment victims; 7) How to detect and respond to signs of threatened, suspected, or reported sexual abuse; 8) How to avoid inappropriate relationships with inmates; 9) How to communicate effectively and professionally with inmates, including lesbian, gay, transgender, intersex, or gender nonconforming inmates; 10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The TDOC Correction Academy Program Curriculum Lesson Title PREA (Prison Rape Elimination Act) is a 2-hour utilized for Pre-Service and/ In-Service (annual training course) that exceeds the 10 topics specified in this provision. New hires include agency staff, and contractors receive PREA training during the New Hire Orientation during the first week of employment at the facility prior to contact with the inmate population. Staff also attend and receive additional comprehensive PREA training while attending the Tennessee Correctional Academy (TCA).

The TDOC Prison Rape Elimination Act (PREA) training course presented by the Tennessee Correction Academy for FY 24/25 is provided in a 64-page PowerPoint presentation is utilized in conjunction with the instructor's use of the TDOC Program Curriculum. The PowerPoint presentation requires staff to complete it electronically during classroom sessions.

The training course notes the Performance Objectives is that upon successful completion of the class, the participant will be able to: 1) Name the TDOC policy that relates to zero tolerance of sexual abuse or sexual harassment; 2) Identify eight (8) of the ten (10) significant consequences discussed concerning, offenders' rights to be free from sexual abuse and harassment; 3) Name four (4) of the five (5) vulnerable populations of Sexual Abuse and Sexual Harassment. 4) (Identify seven (7) of the nine

(9) behaviors that can put the staff member at risk of crossing professional boundaries; 5) Name the three (3) appropriate mechanisms used in reporting to outside agencies.

Contract employees attend the Non-Academy Pre-service Orientation training course for new employees and annual in-service training with TDOC staff during CORE Training. In addition to attending a classroom session, staff complete the on-line PREA training course. The facility's Training Specialist is responsible for monitoring and maintaining the training records.

Although vendors to include those who are scheduled for extensive projects who do not have direct contact with the inmate population, are also required to complete the PREA training and acknowledge receipt of the training via signature on the Employee PREA Training Acknowledgement, CR-3965.

Pursuant to TDOC Index 115.01, Orientation and training for volunteers is mandatory. To be considered for a position, any prospective volunteer must complete an online Volunteer Services Application at <https://www.tn.gov/correction/agency-services/volunteer-ppportunities.html>.

The TDOC Director of Religious and Volunteer Services assigned to the TDOC Central Office explained training procedures for all TDOC volunteers. Upon individuals request to serve a volunteer, each is required to attend a live on-line training presentation via TEAM that is presented by staff assigned to the Central Office. The initial training course consists of three-hour training that includes PREA training. The PREA training is also offered numerous times weekly throughout each month and is available to the volunteers for the completion of new volunteer and annual training. Central Office staff utilized the Distributed Application that generates reports for the monitoring of timely completion of PREA training for all agency volunteers. The volunteers also receive orientation training upon reporting to their assigned facility.

Per the BCCX Religious Services Chaplain, volunteers who enter only for a special event are also required to complete PREA training and normally arrive an hour before the event for the training session. The training is presented by the facility's Religious Services Chaplains.

The auditing team observed continuous PREA education posted throughout the facility on bulletin boards and walls accessible to staff, contractors, volunteers and inmates. All contractors and volunteers are issued and carry a PREA education refresher card titled "PREA Action Steps/ PREA Refresher that includes guidance for the following: Staff Duty to Report, Knowledge, Suspicion, Steps to follow to include immediate actions, Internal/ External PREA Reporting methods, and the definition of Intersex and Transgender.

The auditing team conducted interviews with four (4) contractors that included medical and mental health, and food service (Armark) each indicated they received PREA training during the new hire orientation and annually. All were awareness of the agency's zero tolerance for sexual abuse and sexual harassment, how to report it, and their responsibility upon becoming aware of occurrences.



	<p>Two (2) religious services volunteers were interviewed. Each confirmed their receipt of PREA training and their awareness of the agency's zero tolerance for sexual abuse and sexual harassment, how to report it, and their responsibility upon becoming aware of occurrences.</p> <p>The acknowledgement of volunteers and contract employees' completion of PREA training is documented through their signature on their Employee PREA Training Acknowledgement, CR-3965, in addition to their attendance rosters notating they have received and understanding the training. Documentation of completed PREA training and understanding of the training received via the Employee PREA Training Acknowledgement, CR-3965 was provided for the 33 contract vendors; eight (8) Armark (food service); eight (8) tablet workers; 25 medical and mental health, and 19 volunteers. Additionally, confirmation of PREA training for 123 staff medical staff, 29 mental health staff, and were documented electronically via a PREA Course Completion History Roster.</p> <p>Mental health and medical staff are also required to complete specialized PREA training which is identified in standard 115.35.</p> <p>Based on the review of agency policies, PREA training lesson plans, documentation of PREA training records for contractors and volunteers and interviews, the facility has demonstrated compliance with all the provisions of the standard.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 PREA Implementation, Education, and Compliance (Effective 08-01-2020)</li> <li>3. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. BCCX Rules and Regulations Handbook (English and Spanish)</li> <li>5. Comprehensive PREA Educational Videos (Spanish/English /Closed Caption/ASL)</li> <li>6. PREA Informational Postings (English and Spanish)</li> <li>7. Contract for Translation Services</li> <li>8. BCCX Plan for Providing Inmates with Limited English Proficiency Access to Program and Activities</li> </ol>

9. Inmate Issued Tablets

10. "I Speak" Language Identification Guide

11. Inmate TDOC Orientation Acknowledgement Forms

12. Site Observation

13. Interviews with:

a. BCCX Intake Counselors

b. Inmate Population

115.33(a) TDOC Index 502.06 policies outline the mandate of the standard. All inmates entering the TDOC system shall receive verbal and written information concerning sexual abuse within 24 hours of intake at the diagnostic centers. Each facility shall take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Each facility shall take appropriate steps to ensure that inmates with disabilities (including inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

Facility staff ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skill, or who are blind or have low vision.

Per the PAQ, the number of inmates admitted during the past 12 months who were given PREA education at intake was 4011. This number includes those inmates designated, and those held for temporary hold pending transfer to other TDOC facilities.

Per interviews with staff who conduct intake with the newly arriving inmates to the TDOC and those inmates who have transferred, all inmates receive PREA education on the day of their arrival during the intake process. Inmates receive an institutional Rules and Regulation Handbook with PREA information, observe a PREA video that was developed by the National PREA Resource Center in addition to a discussion on the agency/facility zero tolerance on sexual abuse and sexual harassment is presented by staff. Inmates are given the opportunity to participate in the discussion and ask any questions they may have.

The auditing team conducted interviews with 44 inmates to include random and targeted inmates for confirmation of receiving PREA education upon their arrival during the intake process. The selected inmates to include additional informal interviews provided mixed responses in whether they received PREA education and in

what method. Those that acknowledged receiving PREA education included receiving an orientation packet that included a BCCX handbook, PREA brochure, observing the PREA video, and/or a staff discussion of PREA to include how to report sexual abuse and sexual harassment.

The auditing team shared the responses of inmates that included those who indicated they had not observed the educational PREA video with the BCCX Warden and TDOC Statewide PREA Coordinator. As those inmates were identified as housed at Site 1 and Site 2, the TDOC Statewide Coordinator, and BCCX elected to schedule all inmates at both sites to observe the PREA video during a four-day period. All inmates acknowledged by their signature as observing the PREA video upon completion.

The inmate population at Site 1, 2, and Unit 28 acknowledged their observation of continuous PREA education posted in all housing units, programming areas, and operational areas. The inmates also reference the signage on the walls, and recordings on the phones that provide the toll free telephone numbers to report sexual abuse and sexual harassment internally and externally to include available victim advocate services by the Avalon Center. These services were confirmed during testing by the auditing team.

The auditing team requested inmates from each site and various housing units to demonstrate their use of their personal issued tablets. Inmates have access to report sexual abuse and sexual harassment both verbally and through written communication via the tablets. Inmates were able to access PREA information to observe a PREA video presented by the National PREA Resource Center with unlimited viewing opportunities.

115.33 (b) Per the PAQ the number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from sexual abuse, sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake was 4011.

115.33 (c) TDOC Index 502.06 states All inmates entering the TDOC system shall receive verbal and written information concerning sexual abuse within 24 hours of intake at the diagnostic centers.

The PAQ noted those inmates who were not educated within 30 days of intake as zero.

An interview conducted with Intake Staff at Site 1, Site 2 and Unit 28, indicated upon the arrival of all inmates, in addition to each being issued a BCCX Inmate Rules and Regulations Handbook, they observe the PREA educational video that is developed by the National PREA Resource Center for Adult Intake Comprehensive Training upon arrival during the intake process. The training is available as PREA Adult Comprehensive ASL, PREA Adult Comprehensive Closed-Captioned English, and PREA Adult Comprehensive Closed-Captioned Spanish.

115.33 (d) Per TDOC Index 502.06, Each facility shall take appropriate steps to ensure

that inmates with disabilities (including, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Orientation/Classification Assignment and Hearing are conducted by the Counseling Service Team who evaluates the ability of the offender to understand without an interpreter. If it is evident that the offender's knowledge of the English language is insufficient, then interpretation services shall be provided. The unit team will evaluate the ability of the inmate to understand the classification procedures and conduct a structural interview through an interpreter, if necessary, for understanding, and provide an explanation of the sentence structure. The Chief Counselor/Designee will conduct all classification hearings through an interpreter (if necessary) and provide an explanation of the results of the hearing and the recommendations made during the hearing.

The auditing team observed the "I Speak" Language Identification Guide posted in the intake area that allow inmates to identify their language from a variety of languages to include Spanish and Sign Language. English and Spanish were the only languages identified as used by the inmate population.

The BCCX Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities documents the facility's obligation to provide appropriate services to inmate identified as Limited English Proficiency. The Plan includes a list of BCCX staff who are bilingual and provide translation services in the Spanish language as needed for the inmate population. The BCCX LEP Plan is updated annually and was noted as revised May 2024.

The Tennessee Language Center Video Relay Interpreting services and the Tennessee Language Center Telephonic Interpretation are available to aid in providing PREA education to the inmate population as applicable to their disability.

In addition to designated staff to provide translation services for inmates identified as LEP, the agency has established a contract with the University of Tennessee Language Center, to provide qualified language interpreter services for non-native English-speaking inmates. Confirmation of services provided for translation services was presented for review by the auditing team.

The BCCX Inmate Rules and Regulations Handbook pages 41, 76, and 77, includes the facility has a zero-tolerance of sexual abuse and sexual harassment and various methods of reporting both internally and externally that include confidential and unmonitored calls. Methods of reporting include the following: Directly to any staff; PREA Hotline telephone \*9222; and The Avalon Center \*9555.

115.33 (e) The auditing team randomly selected a total of 69 inmates from Site 1, Site 2, Unit 28, who arrived during the 12-month review period, for confirmation of the inmate's acknowledgement of receiving PREA education upon their arrival at BCCX. The review revealed all selected inmates acknowledged orientation included the PREA video, and receipt of the inmate handbook that included the agency's zero tolerance of sexual abuse and how to report PREA allegations. Documentation of the

	<p>inmates' receipt of PREA education is securely maintained in each inmate's personal file that is maintained in secured file cabinets within the Unit Manager's Office accessible to the assigned Unit Manager and Unit Counselor.</p> <p>115.33 (f) PREA information was observed to be continuously and readily available to the inmate population throughout the facility on walls and bulletin boards visible to staff, inmates, contractors and volunteers. PREA signage include "PREA Rape Elimination Act Zero Tolerance" posters that includes methods to report confidential and free call in Spanish and English, to include the PREA Hotline *9222.</p> <p>Additionally, memorandums noting the Avalon Center of Crossville has a Memo of Understanding with BCCX to provide confidential crisis counseling to victims while providing methods of reporting via phone and/or in writing. The memorandums were posted in both English and Spanish.</p> <p>The inmate population assigned to BCCX are issued personal tablets to maintain in their possession. Inmates from various sites 1, 2, and Unit 28, demonstrated their knowledge in the use of their personal assigned tablets and accessibility to review PREA education via a PREA video presented by National PREA Resource Center. Additionally, inmates have access to report sexual abuse and sexual harassment through free confidential calls via the PREA Hotline at *9222 and/or the Avalon Center at *9555 through use of their tablets. The information is presented in both English and Spanish.</p> <p>Based on the review of agency policies, LEP Plan, established contract for interpretation translation, site observations, inmate issued tablets, documentation of inmate PREA education, and interviews with staff and inmates, and site observation, the facility does meet all provisions of the standard.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 Prison Rape Elimination Act (PREA) Allegations, Investigations, and Sexual Abuse Response Team (SART) (Effective 08-02-2020)</li> <li>3. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>4. TDOC Index 107.01 Office of Investigation and Conduct: Unit Authority, Responsibility, Personnel Selection and Training (Effective 09/01/2020)</li> <li>5. TDOC Index 107.01 Office of Investigations and Conduct (OIC) Roles and</li> </ol>

Responsibilities (Effective 05-9-2024)

6. Documentation of Specialized Training for Agency Investigators

7. Interviews with:

a. BCCX Institutional Investigator

b. Office of Investigation and Conduct (OIC) Special Agent

115.34 (a) (b) TDOC 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard provision for Sexual Assault Response Team (SART) Investigations. SART members/investigators who have received special training in conducting sexual abuse investigations in confinement settings investigate all allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively, including third-party and anonymous reports. IU Special Agents are contacted immediately when circumstances warrant further actions pursuant to criminal findings

TDOC 107.01 states: All newly selected OIC Special Agents will attend and successfully complete at a minimum, an accredited law enforcement academy (e.g., Tennessee Law Enforcement Training Academy, Memphis Police Academy, Watler State Community College, etc.) or Tennessee Bureau of Investigation Basic Agent School. Newly selected Special Agents who have previously attended an eligible accredited law enforcement academy prior employment within OIC will be considered as successfully completed on a case-by-case basis.

The OIC Special Agent acknowledged his experience of 35 years as a police officer prior to his employment with the TDOC. He also acknowledged the completion of new agent training with TDOC, and the National Institute of Corrections (NIC) Course, "PREA: Conducting Sexual Abuse in a Confinement Setting."

Interviews with BCCX Institutional Investigators indicated they are required to complete a specialized investigative training course presented by the NIC annually.

A copy of the NIC training course outline was submitted for review that included the elements of the standard provision.

Interviews with the OIC Special Agent and BCCX Institution Investigators, confirmed the training received include the initial response to reports of sexual abuse, general investigative protocols interview and interrogation techniques for both victim, aggressors, non-witness interviews, evidence collection and preservation, proper use of Miranda and Garrity warnings, during administrative and criminal investigations, review of past reports and records and the determination of investigative findings.

115.34 (c) Per the PAQ, three (3) staff are approved to complete PREA allegations. The BCCX PREA Compliance Manager identified this number included the OIC Special Agent. The OIC Special Agents assigned to the Office of Investigations and Conducts are authorized to conduct both administrative and criminal investigations for the agency.

	<p>The OIC Special Agent who conduct both administrative and criminal investigation complete extensive investigative training. Documentation of the OIC Special Agent training included the following: Certificate of Law Enforcement Officer Training School for Basic Criminal Investigations; Training completion presented by the Federal Bureau of Investigations (FBI); FBI Managing Investigations of Death and Sexual Offense Using Investigative Psychology; and NIC Course PREA: Your role in responding to sexual abuse; and NIC "PREA Conducting Sexual Abuse Investigations in a Confinement Setting" were submitted for review.</p> <p>The BCCX Institution Investigators are required at a minimum to complete an approved investigative training course presented through the National Correctional Institution (NIC) PREA: "Conducting Sexual Abuse Investigations in a Confinement Setting." The facility provided training certificates for the completion of the "PREA: Investigating Sexual Abuse in a Confinement Setting" presented through the NIC issued to the BCCX Institution Investigators.</p> <p>115.34 (d) The TDOC is responsible for conducting all administrative and criminal investigations to include sexual abuse. Therefore, zero allegations are referred to other State or Department of Justice entity for an investigation.</p> <p>Based on the review of agency policies, documentation of investigators' training per standard, interviews, and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
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115.35	Specialized training: Medical and mental health care
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 PREA Implementation, Education and Compliance (Effective 08/01/2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>4. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08/01/2020)</li> <li>5. Specialized Training PREA Medical and Mental Care Standards presented by the National PREA Resource Center</li> <li>6. Medical and Mental Health Specialized Training Documentation</li> <li>7. Interviews with:</li> </ol>

- a. Director of Nurses
- b. Behavior Health Administrator
- c. Regional Director of Centurion Health

115.35(a) TDOC Index 502.06.3 and TDOC 502.06 states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment.

Medical and mental health staff are contract employees who must complete the agency's PREA training and medical and mental health specialized training received from designated supervisory instructor contract staff within the department. The policy states all full and part-time medical and mental health care practitioner who work regularly in the facility shall be trained in: (a) How to detect and assess signs of sexual abuse and sexual harassment; (b) How to preserve physical evidence of sexual abuse; (c) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; (d) How and to who report allegations or suspicions of sexual abuse and sexual harassment; (e ) This training shall be documented on the TDOC training Roster, CR-2245, and copies provided to the facility training specialist.

An interview with the BCCX Behavioral Health Administrator (BHA), Regional Director of Centurion Health and Director of Nurses confirmed all medical and mental health staff are required to complete Specialized Training: PREA Medical and Mental Care Standards Notification of Curriculum Utilization. The Specialized Training PREA Medical and Mental Care Health Care Standard Instructors' Curriculum Guide and Lesson Plan is completed upon new hire and annually. The Behavioral Health Administrator and the Health Services Administrator present the training course to both medical and mental health staff departmental staff. The lesson plan includes four modules identified as the following: Module 1 - Detecting and Assessing Sign of Sexual Abuse and Sexual Harassment; Module 2 - Reporting; Module 3 - Effective and Professional Response; Module 4 - The Medical Forensic Examination and Evidence Preservation. Training objectives are designed to 1) Identify the signs of sexual abuse and sexual harassment; 2) Know how to respond to a trauma-informed way to survivors of sexual abuse; 3) Recognize how to preserve and collect forensic evidence; 4) Know how to report and to whom to report to.

The PAQ noted 156 medical and mental health care practitioners who work regularly at this facility received the training required by agency policy and 100 % completed the specialized training pursuant to the standard.

115.35 (b) TDOC Index 502.06.3 stated upon receiving a report of an alleged sexual abuse within the 72-hour time frame SART members shall determine if SAFE/SANE response is indicated at an outside medical facility. Per interviews with medical staff, all forensic examinations are performed off-site at the local medical facility, Cumberland Health Center located at 79 S Main St. Crossville, TN.

115.35(c) TDOC Index 502.06.3 states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment. This



	<p>training shall be documented on the TDOC Training Roster, CR-2245, and copies provided to the facility training specialist. The PAQ noted 156 medical and mental health staff. The auditing team reviewed training records supporting both medical and mental health care practitioners received Specialized PREA training for medical and mental health. Random rosters were selected for the confirmation of Specialized PREA training for medical and mental health staff. The auditing team's selection of TDOC Training Rosters, CR-2245, confirmed 20 mental health staff and 111 medical staff acknowledged receipt of the specialized training and their understanding of the training content by their signature.</p> <p>115.35 (d) in addition to PREA training pursuant to standard 115.32. Interviews with both the Behavioral Health Administrator, Director of Nurses, and Regional Director of Centurion indicated departmental staff are required to complete standard PREA training upon reporting to the facility during new employee orientation and annually. The PREA training is completed through classroom sessions and an on-line TDOC PREA training course in which all staff to include medical and mental health staff are required to complete. Confirmation of PREA training pursuant to standard 115.32 for 123 staff medical staff and 29 mental health staff were documented electronically via a PREA Course Completion History roster. Additionally, the auditing team requested the Employee PREA Acknowledgement Form for 25 medical and medical health staff documenting their signature acknowledging receipt and understanding the training presented,</p> <p>Based on the review of the TDOC policies, the National PREA Resource Specialized title Specialized Training "PREA Medical and Mental Care Standard Notification of Curriculum Utilization December 2013," signature confirmation PREA Specialized Training for Medical and Mental health and PREA training pursuant to standard 115.32, and staff interviews, BCCX does meet all provisions of the standard.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring (Effective 08-01-2020)</li> <li>3. TDOC 052.06 Prison Rape Elimination Act (PREA) (Effective 10-121-2024Rnm</li> <li>4.TDOC 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08-01-2020)</li> </ol>

5. PREA Screening System Application
6. Documentation of Inmates' Arrival Dates
7. Completed Risk Screenings
8. Observation of Intake Risk Screening Process
9. Interviews with:
  - a. Staff Responsible for Risk Screening
  - b. Random and Targeted Inmates
  - c. TDOC Statewide PREA Coordinator

115.41(a) (b) TDOC Index 502.06.1, TDOC 502.06 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the TDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. The agency uses the PREA Screening System Application located on the TDOC intranet to assess an inmate's risk of sexual victimization and risk of sexually abusing other inmates.

TDOC 502.06 notes the mandate for screening /assessing inmates at the diagnostic center. Classification team or unit management teams from diagnostic classification units will interview and evaluate all inmates for sexually aggressive/victims tendencies utilizing the PREA Screening System Application located on the TDOC intranet with 72 hours of arrival.

Per the PAQ, the number of inmates entering the facility (either through intake or transfer) within the past 12 months, whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility was noted as 4011.

Interviews were conducted with staff who conduct risk screening at Site 1 Classification Unit/Diagnostic Center). The Classification Center/Diagnostic Center is the processing location for all newly sentencing inmates such as those arriving from various county jails, and those inmates transferred from other TDOC correctional facilities for permanent designation at BCCX All inmates are screened on the day of their arrival for risk of sexual abuse victimization or sexual abusiveness toward other inmates and the PREA Screening System Application located on the TDOC intranet is utilized.

Interviews were conducted with staff who perform risk screening assigned to Site 2, who stated inmates are rescreened on the day arrival upon transferred from Site 1. Staff stated they utilize the PREA Screening System Application located on the TDOC intranet to assess an inmate's risk of sexual victimization and risk of sexually abusing other inmates.

Counselors assigned to Unit 28 are responsible for conducting all risks of sexual

abuse victimization or sexual abusiveness toward other inmates by usage of the PREA Screening System Application located on the TDOC intranet for the inmates assigned to Unit 28 (female unit). Per the Counselor, the newly arriving female inmates are those who have transferred from other TDOC facilities. All inmates are immediately screened on the day of their arrival.

Interviews conducted with the inmate population assigned at Site 1, Site 2 and Unit 28 within the review period indicated they were asked the risk screening questions during the initial intake on the day of arrival and again within two weeks of their arrival.

Each of the auditing team members (2) observed the intake process during the arrival of newly committed inmates and inmates identified as transfers from other TDOC facilities. Staff were observed using the PREA Screening System Application located on the TDOC intranet to assess an inmate's risk of sexual victimization and risk of sexually abusing other inmates. The risk screenings interviews were conducted in an office separated from other inmates while reading each question in a manner that fostered a comfort level for responses.

Per interviews with intake counselors, due to the possibility of internet failure, staff maintain blank copies of the risk assessment instrument to document the inmates' response in order to prevent the delay in completing the assessments. The information is transferred electronically to the PREA Screening System Application within the Distributed Application located on the TDOC intranet and the hard copies are shredded immediately upon restore of electrical power.

Inmates' individual files containing hard copies of personal and/or sensitive documentation to include orientation information were observed in the unit management office, designated Records Office and/or the Medical Records Office. Accessibility to the identified areas is limited to authorized staff only based on their job assignment responsibilities. Information stored electronically is accessible only to staff assigned to the respective departments with a personal encrypted password for security purposes.

115.41(c) (d) TDOC Index 502.06.1 and TDOC 502.06 requires authorized users to utilize the PREA Screening System Application located on the TDOC intranet. User security access to this system is authorized by the Associate Warden of Treatment. The PREA Screening System Application form is the agency-approved standardized screening instrument. Copies of the Tennessee Inmate Management Information System (E-TOMIS system) PREA Screening form were provided within the PAQ in addition to those for confirmation of six (6) inmates for each month during the 12-month review period (72) randomly selected due to their arrival to the BCCX Site 1 Diagnostic/Intake/Classification Center; 25 inmates randomly selected based on their transfer from BCCX Site 1 to BCCX Site 2; and 24 (females) who were transferred from other TDOC facilities to BCCX Unit 28.

The TDOC PREA Screening instrument assigns a numerical point value to questions regarding their risk and/or history of victimization and/or abusiveness categories based on the responses provided by the inmate and information obtained from the

inmate records. Inmates are asked to provide a response to the questions during the interview/risk screening procedures. The risk screening form is identified as the Offender Information Screening form. The risk screening instrument includes an excess of the 10 factors identified in the standard provision. Sexual Victim Factors include 1) Whether the inmate is a former victim or institution ((prison or jail) sexual abuse; 2) The inmate's own perception of vulnerability; 3) Whether the inmate is detained solely for civil immigration purposes; 4) Whether the inmate has a mental, physical, or developmental disability; 5) The age of the inmate (24 or younger or elderly, 60 or older); The physical build of the inmate (5'5 and/or less than 150 pounds; 7) Whether the inmate has previously been incarcerated; 8). Whether the inmate's criminal history is exclusively non-violent; 9) Whether the inmate has prior convictions for sex offenses against an adult or child; 10) Whether the inmate is or perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; 11) Whether the inmate has previously experience sexual victimization.

Additional Sexual Aggressor Factors included in the risk screening process include: 1) History of prior institution (jail or prison sexual abuse; 2) Prior acts of sexual abuse; 3) Prior acts of violent offenses; and 4) History of prior institution violence.

115.41(e) TDOC Index 502.06.1 notes the PREA Screening application to determine if an inmate is at risk of being abusive shall, at a minimum, consist of prior acts of sexual abuse; prior acts of violent offenses; history of prior institutional violence and prior history of institutional sexual abuse. Based on the inmate's response, of yes or no, the inmate is scored at risk for abusiveness and or as an aggressor. Confirmation of the standard provision compliance was based on the review of risk assessment questionnaire and observation of the risk screening process during the site visit

115.41(f) TDOC 502.06 notes inmates arriving at a diagnostic center who will be excluded from a risk needs assessment still receive a PREA Screening as any other inmates entering the TDOC system. Within 30 days, the inmate will be rescreened with the PREA Screening System Application. Once an inmate has been transferred to his/her receiving institution, his/her PREA screening is rescreened. This may also be based upon any additional, relevant information received since the screening intake.

TDOC Index 502.6.3 notes within a set time period, not to exceed 30 days from the inmate's arrival of the institution, the institution will rescreen the inmate for risk of victimization or abusiveness or base upon any additional relevant information received by the facility since the screening.

TDOC Index 502.06.1 requires unit management staff to reassess each inmate within 30 days of the inmate's arrival at the facility using the PREA Screening Application.

The PAQ noted the number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was noted as 4011.

The Chief Counselor indicated a tracking log identified a PREA Intake Spreadsheet is maintained throughout each month. The spreadsheet maintains a tracking log of the inmates' arrival, their initial facility screening date, 15-day review for the 30 -day rescreening and the date of the completed 30-day rescreening. Emails are forward to staff as a reminder of the upcoming reassessments to prevent occurrences of non-compliance. Additionally, tracking log documents the submitted mental health referrals and date the inmates are seen by mental health.

The auditing team randomly selected the following PREA Screening forms from the various sites as a new assessment is required upon the inmates' designation at each. Six inmates for each of the 12-month review period, (72) were randomly selected due to their arrival to the BCCX Site 1 Diagnostic/Intake/Classification Center. Twenty-five inmates were randomly selected based on their transfer from BCCX Site 1 to BCCX Site 2. The auditing team randomly selected 24 (females) who were transferred from other TDOC facilities to BCCX Unit 28.

Per interviews with the Intake Counselors, inmates arriving at the Diagnostic/Classification Center are housed as a temporary status throughout the classification process and are often transferred to other TDOC facilities to include Site 2 within three (3) weeks. Therefore, reassessments are normally completed within two (2) weeks and again upon receipt of additional information that could result in a change of classification status.

Interviews with Intake Counselors at Site 2 and Unit 28 confirmed a risk assessment screening is conducted on all inmates on the day of their arrival, by use of risk screening instrument through the Distributed Application in the ETOMIS Offender Management System. Reassessments are always completed within 30 days of their arrival and again upon the receipt of additional information.

Interviews were conducted with inmates assigned at Site 1, Site 2 and Unit 28 that included newly arriving inmates at the diagnosis center and those inmates designated for long term stay at BCCX who arrived at the facility within the 12-month review period. Inmates acknowledged they were asked questions related to the PREA Screening Application forms by Counselors within a private area/office to include numerous recalling they were asked twice within 30 days of their arrival.

115.41(g) TDOC Index 502.06.1 and TDOC 502.06 notes the requirement that unit management staff are to re-assess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or potential for abusiveness. 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. If the PREA screening outcome changes an inmate's status as a Sexual Aggressor or Sexual Victim, staff must review the current cell/bed assignment of the inmate to ensure compatibility with other inmates assigned to the same cell and the new screening outcome. If a cell/bed assignment is needed, staff must notify the Associate Warden of Treatment/Deputy Superintendent/ Assistant Warden of Programs and unit management staff via email of the required move.

Interviews with the Chief Counselor, and Intake Counselors indicated an additional assessment is conducted upon receiving any additional information that could result in changes of custody level scoring, and/or other classification changes to include upon an inmate being identified as a victim of sexual abuse and/or as an aggressor in a substantiated sexual abuse investigation. The PREA Screening System Application is utilized to conduct all re-assessments. Upon an inmate's status change, the Count Room Officer is notified of the inmate's status change to ensure the proper labelling for housing assignments.

One (1) sexual abuse investigation was determined as substantiated during the review period. The substantiated sexual abuse investigation was identified as a staff on inmate report. Documentation was provided that supports the victim was reclassified as a victim of sexual abuse.

Documentation supports two (2) inmates were identified as gender dysphoria and were reassessed as such.

115.41(h) TDOC Index 502.06.1 and TDOC 502.06 notes inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions.

During interviews with various staff who conduct risk screening, inmates would not receive discipline for refusing to cooperate during the risk screening process. Staff indicated they have not encountered an incident in which an inmate has refused to cooperate during the risk screen assessment.

115.41(i) TDOC Index 502.06.1 and TDOC 502.06 indicates that screening information is strictly need-to-know. Access to the PREA Screening System Application is controlled through authorized user security access. User security access to the system is requested by the Associate Warden of the Treat/Deputy Superintendent/ Assistant Warden Program at privately managed facility to the TDOC Statewide PREA Coordinator. Unit Management staff will ensure screening information is entered within the PREA Screening System Application, E-TOMIS.

Per the Statewide PREA Coordinator, TDOC has outlined those staff who should have access to the inmates' risk assessments. The information must be requested through the onsite PREA Coordinator and approved at the facility level. The request is then forwarded to the Statewide PREA Coordinator, who must also vet and approve access. The decision to grant access is based on the job responsibilities of the employee. The process of approval was also identified the BCCX Chief Counselor and BCCX PREA Compliance Manager.

The auditing team observed risk screening information to be securely stored within the PREA Screening System Application (Distributed Application) computerized program accessibility to authorized unit management staff accessible only through an encrypted password.

Based on the review of agency policies, and procedures to include the review of the objective screening instrument utilized to conduct PREA risk screening that includes the provisions within the standard, documentation of timely completed initial risk

	screenings and reassessments, observation of the intake process to include risk screening process, interviews with staff and the inmate population, it is determined BCCX does meet all standard provisions.
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.1 Prison Rape Elimination Act (PREA) Screening, Classification, and Monitoring (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. TDOC Index 113.37 Gender Dysphoria (Effective 12-15-2022)</li> <li>5. PREA Screening and Monitoring Report</li> <li>6. Bi- Annual Assessment/ PREA Housing and Program Review forms</li> <li>7. BCCX Index 112.08-1 Personal Hygiene Resources for Inmates (Effective 03/01/2023)</li> <li>8. BCCX 112.08-1 Personal Hygiene (Bathroom/Shower/Haircare) Resources (Effective 03-1-2024)</li> <li>9. Interviews with: <ol style="list-style-type: none"> <li>a. BCCX PREA Compliance Manager</li> <li>b. Staff Who Conduct Risk Screening</li> <li>c. Inmates identified as Gay, Transgender and Intersex</li> <li>d. TDOC Statewide PREA Coordinator</li> <li>e. Random Staff</li> </ol> </li> </ol> <p>115.42 (a) (b) TDOC Index 502.06.1 and TDOC 502.06 outlines the mandate of the standard. Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and are identified as sexual aggressors or prior sexual victims are under the supervision of the unit management. Housing, cell assignments, work, education, and program assignments are made with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive.</p>

No inmate will be double celled until the required PREA screening has been completed. Those inmates who are deemed Sexual Aggressors or Sexual Victims will be appropriately housed unit assessed by behavioral health professional or classification.

Inmates who enter TDOC and are identified as a Sexual Aggressor or a Sexual Victims on the PREA Screening System Application may be considered for protective custody placement or placement in an institution setting considered more controlled than general population. Clinical services are offered to those inmates. Clinical decisions regarding these inmates are the responsibility of the medical and behavior health staff at the diagnostic center.

Per an interview with staff who conduct risk screenings, and the BCCX PREA Compliance Manger, the facility utilizes the information collected during the intake risk screening to determine housing for those identified as an aggressor/potential aggressor, victims or potential victims, an inmate's age, mental status, their own perception of vulnerability, whether it is their first time in prison, their physical build, criminal history, prior convictions of sex offenses against a child or adult, and whether the inmate is or is perceived to be gay, bisexual, transgender, intersex or gender nonconforming are factors considered during the risk screening in determining housing. An inmate's status may change based on the outcome of an investigation in which they may be identified as a victim or an aggressor or newly received information. The electronic program ETOMIS will not allow the assignment of inmates identified as victim or potential victims with those inmates identified as potential aggressors or an aggressor.

The auditing team requested a copy of the PREA Screen and Monitoring Report that identified the housing of inmates identified as victims, potential victims, potential aggressors, and aggressors. The review confirmed those identified as victims and/or potential victims were not housed with inmates identified as a potential aggressor or an aggressor.

115.42 (c) TDOC Index 113.37 includes the guidelines for the identification, treatment, and institution management of inmates diagnosed or are identified as transgender, transexual, intersex, gender non-conforming and gender dysphoria conditions. The medical and behavioral health staff shall appropriately diagnose, treat, and manage TDOC inmates with gender dysphoria, transgender, transsexual, intersex, and gender non -conforming condition in a human and safe, correctional environment, sensitive to their unique adjustment issues, consistent with the core values, vision, and mission of the Department and its commitment to provide adequate medical care and mental health services to all inmates in its custody.

Facility and housing assignments shall be made on a case-by-case basis and documented on pages 1 and 2 of the PREA Housing and Programs Review, CR-4086, considering the patient's health and safety, as well as potential management and security concerns. An inmate's own views regarding safety shall be solicited and considered.

The BCCX PREA Compliance Manager, stated the result of the inmate's risk screening



is reviewed and utilized during the Gender Dysphoria meetings with the TDOC Central Office to determine the housing for transgender and intersex inmates during the intake/diagnostic process. The determination of housing is made on a case-by-case basis with consideration of the placement while ensuring the health and safety of the individual and does not present security and/or management problems.

The facility provided meeting minutes completed by the Gender Dysphoria Committee discussing the assignment of Gender Dysphoria for the selected three (3) transgenders and one (1) intersex.

Interviews with three (3) transgenders and one (1) intersex indicated they were all asked if they had any concerns about their safety at the facility and all indicated they did not have any safety concerns. Additionally, each stated they had not been assigned to designated housing based on their status as transgender or intersex.

115.42 (d) (e) In accordance with TDOC Index 113.37, Placement and programming assignments shall be reassessed at least every six months at a re-classifications hearing, or as warranted, to review any threats to safety experienced by the inmate. Facility teams shall convene and meet with the offender as part of the reassessment process and document the meeting and any accommodation changes on CR-4086.

Interviews with the BCCX PREA Compliance Manager and staff who conduct risk screenings, transgender and intersex inmates are reassessed at a minimum bi-annually and all assessments are documented on the CR-4086, TDOC Housing and Program Review form.

Two (2) transgenders were identified as housed at the facility for an excess of six months. Documentation supports a Housing and Program Review, CR-4086, was completed monthly for each of the transgenders housed during the review period in an excess of six months. The assessments included the following: inmates' own perception of vulnerability; privacy concerns with regard to showering; prior acts of sexual abuse; search preference; whether the inmate is receiving ongoing mental health services; whether the inmate has received any medical procedures related their transition process; Is the inmate currently under doctor's care; initial PREA Risk Assessment; and an assessment of housing; work status, education and programs.

115.42 (f) Per TDOC 113.37, outlines inmates diagnosed with gender dysphoria or identifying as transgender, transexual, intersex, and gender non-conforming conditions may submit a request to Health Services for an opportunity to shower separately from other inmates.

Per BCCX 112.08-1, Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

A memorandum was observed drafted by the BCCX Warden to All BCCX Staff that noted "Transgender /Intersex inmates that request to shower separately from the inmate population will shower during count time. This will occur while all other inmates are locked in their cells."

	<p>Interviews with staff who conduct risk screening and the BCCX PREA Compliance Manager confirmed inmates identified as transgender and/or intersex are awarded the opportunity to shower separately from other inmates while others are secured/prohibited during count time.</p> <p>Interviews with three (3) transgenders indicated they had not requested to shower separately from other inmates. One (1) intersex individual acknowledged approval to shower separately from other inmates during count time.</p> <p>115.42 (g) Per TDOC 113.37, Lesbian, gay, bisexual, transgender, or intersex inmate shall not be placed in dedicated facility, units, or wings, solely on the basis of such identification or status.</p> <p>Per an interview with the TDOC Statewide PREA Coordinator, every offender who enters the TDOC is initially housed based on the outcome of the initial PREA screening. If an inmate identifies as gay, lesbian, transgender, bisexual, or intersex, there is a panel that reviews the inmate's housing assignment on a case-by-case basis to determine the best discussion in providing each inmate a safe environment.</p> <p>Per the BCCX PREA Compliance Manager the facility is not subject to a consent decree, legal settlement, or legal judgment requiring that it establish a dedicated unit, wing for lesbian, gay, bisexual, transgender, or intersex inmates.</p> <p>The facility housed both male and female inmates. The female inmate population are assigned to Unit 28A, 28B, and 28C. Interviews with females identified as transgender indicated they have not been assigned to a designated wing based on their sexual orientation.</p> <p>The male inmate population are assigned to Site 1, Site 2, and Annex. Interviews with inmates identified as gay, transgender, intersex indicated they have not been assigned to designated housing based on their sexual orientation. A review of their housing assignment confirmed they were assigned to various housing units.</p> <p>Based on the review of policies, bi-annual assessments (PREA Housing and Program Review, CR-4086), inmate's housing and bed assignments, risk screening forms, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> </ol>

2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)

3. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 1-21-2024)

4. Segregation/Restrictive Housing Unit Logs

5. 30-Day Protective Custody Reviews

6. Interviews with:

a. BCCX Warden

b. Staff Who Supervise Segregation

115.43(a) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandate of the standard provision. Inmates at a high risk of sexual victimization may be placed in segregation/restrictive housing only after an assessment for all available alternative has been made, and then only until an alternative means of separation from likely alleged abuser(s) can be arranged.

Per the PAQ, the number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero. Therefore, documentation was not applicable.

Per an interview with the Warden, as required by agency policy, inmates at a high risk of sexual victimization in segregation/restrictive housing only after an assessment of all available alternative have been made and no alternative housing is available. However, alternative housing units are available throughout the Complex at Site 1, Site 2 and Unit 28 and the inmate would be house separately from any identified possible threat.

115.43(b) TDOC Index 502.06.2 and TDOC 502.06 outlines the standard provision. Inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If inmate access to program privileges, education, or work opportunities is restricted, the facility shall document what opportunities have been limited, the duration of the limitation, and the reasons for such limitations using Contact Notes LCDG in OMS.

Per the PAQ and interviews with staff who supervise segregation, and the Warden, the facility does not place inmates in segregation in relation to the standard provisions.

An interview with staff who supervise inmates in segregated housing indicated that inmates at a high risk for sexual victimization are not placed in involuntary segregated housing, as the facility has alternate housing available throughout the complex. However, all inmates who placed in segregation are given access to program privileges to include education, legal aid, religious services material, hair care services, showers, material medical, mental health, limited property, recreation, incoming and outgoing mail, in addition to telephone accessibility with limitations due to security requirements of the segregation unit. Documentation of services provided

to all inmates placed in involuntary was supported by segregation unit records, and records of staff visits to the restricted unit for sites 1, 2, and Unit 28.

Per an interview with staff who supervise segregation, all inmates in segregation are allowed access to educational programs, chaplain services, legal and leisure library material, visitation, legal aid to include attorney accessibility, showers, meals, hair care services, personal grooming, recreation, mail services, and limited telephone access. If an inmate has been sanctioned by phone restrictions, they may be approved by the Unit Manager or Warden. Phone accessibility to report PREA allegations would be given upon request. Confirmation of the services provided was supported through documentation review of Record of Staff Visits to Restricted Units, and Segregation Unit Records.

115.43(c) TDOC Index 502.06.2 and TDOC 502.06 outlines the standard provision. The housing assignment on the placement of inmates at high risk for sexual victimization placement in segregation/restrictive housing only must not exceed a period of 30 days unless extenuating circumstances prevent the inmate being housed in an alternative method. SART will document such circumstances during the monthly SART meeting.

The PAQ noted the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement during the 12-month review period as zero.

The facility provided documentation that support those inmates placed in segregation/restrictive housing are reviewed every 30 days, when housed in an excess of 30 days. However, zero inmates were identified as placed in placed in involuntary segregation based on being at a high risk of sexual victimization.

Per the Warden, the agency and facility does prohibit placing inmates at high risk of sexual victimization or who have alleged sexual abuse in involuntary housing in lieu of other alternative housing. The identified aggressor would be placed in involuntary segregation pending the completion of the investigation. Alternative housing is available on Site 1, Site 2 and Unit 28 that allows the prevention of interaction as needed to provide a safe environment. However, all inmates are awarded the opportunity to request protective custody.

115.43 (d) The facility reported 15 sexual abuse allegations and identified zero circumstances where an inmate was placed in segregation due to being at a high risk of sexual victimization. This was confirmed during the auditing team's review of 14 sexual abuse investigations and interviews with BCCX Warden and supervisory staff assigned to the segregation unit.

115.43(e) TDOC Index 502.06.2 and TDOC 502.06 outlines the standard provision. Every 30 days, the counselor affords each such inmate a review to determine whether there is a continuing need for separation from the general population. The reviews are documented using Contact Notes LCDG in OMM.

Interviews with staff assigned to supervise segregation and the Warden indicated the

	<p>alleged victim would remain on the compound and the alleged abuser would be placed in segregated housing pending an investigation. However, a male identified as at a high risk of victimization could be transferred to alternate housing within their assigned compound such as Site 1 or Site 2. A female identified as such would be housed in alternate housing within Unit 28. There were no inmates identified by the facility as placed in involuntary segregation based solely on being identified at a high risk of victimization.</p> <p>However, the facility provided documentation that supports inmates placed in segregation are reviewed every 30 days to determine whether there is a continuing need for their separation from the general population.</p> <p>Based on the review of the PAQ, agency policies, segregation unit logs and records, interviews with Warden and staff who supervise segregation, the facility has demonstrated compliance with all the provisions of the standard.</p>
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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 506.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.6 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. BCCX Inmate Rules and Regulations Handbook</li> <li>5. TDOC Index 501.01 Inmate Grievance Procedures (Effective 11/2/2022)</li> <li>6. BCCX Index 501.01-1 Inmate Grievance Procedures (Effective 03/01/2024)</li> <li>7. Informational Postings of the Avalon Center</li> <li>8. PREA Reporting Posters</li> <li>9. Auditor's PREA Notice</li> <li>10. Completed Calls via Inmate Telephone System and Inmate Tablets</li> <li>11. TDOC PREA Brochure</li> <li>12. Site Observation</li> <li>13. Interviews:</li> </ol>

- a. Avalon Center Supervisor
- b .Avalon Center Advocate
- c. Random staff
- c. Chief Counselor
- e. Inmate Population

115.51(a) (b) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandate of the standard provisions. The Department provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse. These include but are not limited to: Reporting directly to staff; Facility PREA Tip Line; or Written communication.

TDOC Index 502.06.2 and TDOC 502.06 also outlines the mandate of the standard provision the Department provides at least one way for inmates to report abuse or harassment to an outside governmental entity that is not affiliated with the Department or that is operationally independent from the Department leadership. This information is made available to inmates through the facility inmate handbook.

The BCCX Inmate Rules and Regulations Handbook states that all allegations of sexual abuse or harassment will be reported and investigated. If you feel you have been the victim of sexual abuse or sexual harassment; you may report this information directly to staff, use the facility PREA Tip Line (\*9222)."

The auditing team observed PREA educational posters throughout the facility on walls within frames noting the Prison Rape Elimination Act Zero Tolerance. The poster included internal methods of reporting to staff or by dialing \*9222. The call was identified as confidential and free.

TDOC index 501.01 and BCCX 501.01-1 states an inmate may submit a grievance alleging sexual abuse at any time. The auditing team observed grievance forms were accessible to the inmate population in designated areas in each of the housing units (pods) at Site 1, Site 2, and Unit 28, unit management office and annex operations office. Grievance depositories were observed located at Site 1 Unit 21 – housing units A, B, C, and D, and in front of the inmates' dining area. The auditing team observed grievance depositories located at Site 2 in the library, Unit 1, the Annex Administration Building and in front of the inmate dining area. Depositories Only authorized staff have access to secure mailboxes for collection. An interview conducted with the Grievance Sergeant indicated the grievances boxes are checked Monday – Friday, and grievances identifying PREA allegations are logged and forwarded to the Associate Warden (T)/BCCX PREA Coordinator and the BCCX Institution Investigators where applicable investigations are completed.

Inmates are issued to TDOC PREA brochure during the intake process that includes the following: Offenders incarcerated in TDOC facilities are encouraged to

immediately report allegations of sexual abuse to correctional staff, facility administrators, the PREA TIP LINE or through the grievance process.

The facility provides inmates with writing paper noted as "Two-way Message" to communicate in writing with staff. Inmates may personally give the note to staff, place it under the staff's office door, and/or place it in one of the available mailboxes.

Formal and informal interviews with the inmate population confirmed they have a continuous opportunity to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allows them to communicate in writing both internally and externally with others. Additionally, writing instruments are provided by the facility as needed.

An interview with the Chief Counselor confirmed that all inmates are given a stamped envelope during the intake process to communicate in writing with individuals outside the facility.

The auditing team also observed mailboxes for the placement of internal and external mail by the inmate population. Per an interview with staff assigned to the BCCX mailroom, staff collects all mail Monday - Friday except for Federal holidays to include anonymously submitted letters. Internal mail is forwarded to the department in which the letter is addressed too. Outgoing mail is prepared for processing by the United States Post Office.

The PREA Audit Notice was observed posted on bulletin boards in all inmate housing units, site entries, food services departments, libraries, warehouses, TRICOR, education, medical and mental health, and corridors at Site 1, Site 2 and Unit 28. The inmate population and staff acknowledged their observance of the PREA audit notice posted throughout their assigned compound. The auditing team received two (2) written correspondences from the inmate population via mail requesting to participate in the interview process. Both individuals were selected during the random interview selection.

The TDOC PREA brochure provided to the inmate population includes family and friends of inmates and the general public who have knowledge of sexual abuse allegations within the TDOC system are encouraged to report allegations to the TDOC Statewide PREA Coordinator TDOC Central Office 6th Floor, Rachel Jackson Building 320 Sixth Avenue North Nashville, TN 37243-0465 or (615) 253-8178.

The Lead Auditor conducted a test phone call to the TDOC third party reporting Tip Line at (615) 253-8178 during the pre-audit phase. The auditor was asked to leave a voice message with detailed information regarding the circumstances of the call. The auditor received a call from the TDOC PREA Coordinator acknowledging receipt of call within 30 minutes of the completed call.

The BCCX Inmate Rules and Regulations Handbook notes "To Report Incidents of Sexual Abuse to an Outside Resource You may call the following number: Avalon Center \*9555. This call is confidential and will not be recorded by TDOC." This information is provided in both English and Spanish. The Avalon Center mailing

address is noted as P.O. Box 3063 Crossville, TN 38558.

The auditing team observed The Avalon Center postings on bulletin boards throughout the Complex at Site 1, Site 2 and Unit 28 to include in all housing units, libraries, food service departments, education, religious services, medical, mental health, recreation, operational departments, maintenance, administration, visitation, intake/diagnostic, and staff offices. The posting read as such: The Avalon Center of Crossville has partnered with BCCX to provide confidential crisis counseling to victims suffering from sexual assault. The Avalon Center can be confidentially reached by call \*9555 from the inmate phone system or by calling 1-800-641-3434 (from outside the prison). These phone calls are not monitored and recorded. The mailing address is "The Avalon Center P.O. Box 3063 Crossville, TN 38557.

The auditing team conducted an interview with a supervisory representative of the Avalon Center prior to the site observation. The supervisor confirmed the Avalon Center operates under the Memorandum of Understanding with BCCX and other TDOC facilities. The supervisor further stated that in addition to offering crisis counseling services, the Avalon Center offers third party reporting opportunities for the inmate population in addition to weekly schedule support group meetings with the female population.

The auditing team utilized the inmate housing unit phone to conduct a test call at \*9555 identified for the Avalon Center. The call was immediately accepted by an Avalon Center Advocate who confirmed crisis counseling/victim advocacy services and third-party reporting of sexual abuse and sexual harassment services were available to the inmate population. Information reported by a caller would be shared with others upon being authorized by the caller.

The inmate population was observed to be in possession of individual agency assigned tablets that allow them to place calls and/or written correspondence to individuals within and outside the facility. The auditing team requested inmates in various housing units at each site to demonstrate their use of the tablet. The inmates were successful in completing calls for both internal and external reporting. Upon initial accessing the phone, the inmates were greeted with a recording stating to report sexual abuse or sexual harassment press \*9222 for internal reporting, press \*9555 for external reporting to the Sexual Assault Center (Avalon), or \*9111 to report a crime. The procedures were also confirmed during the auditing team's assessment of the inmate telephone system as all calls were successfully completed. Additionally, the instructions were available in English and Spanish.

Formal and informal interviews with the inmate population confirmed all were aware of the reporting options available while stating the internal and external PREA Hotline numbers are free. They also referred to the signage on the walls and messages on the inmates' phones, and tablets for calling the PREA Hotline and Avalon Center as their most common response. Inmates were also aware of the grievance procedure to report sexual abuse and sexual harassment.

The review of the investigative case files confirmed one (1) inmate elected to report an allegation of sexual abuse to the Avalon Center via the PREA Hotline at \*9555. The



information was forwarded via email to the BCCX Institution Investigator who immediately initiated an investigation.

Documentation of PREA case files, medical, mental health and inmate risk screening is stored electronically. Accessibility is given to authorized staff only within the specific department upon approval and the issuing of credentials for login accessibility. Hard copies of inmate medical and mental health records are maintained in the medical records office accessible to medical staff only. Inmate records are stored in secured cabinets in the records office that is manned by assigned staff. Inmate files containing information such as inmate orientation documentation is secured in filing cabinets within the unit management office accessible to the designated unit management staff only. Hard copies of PREA file cases are stored in secured file cabinets within the investigator's office accessible only to the assigned investigators.

115.51 (c) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandate of the standard provision. Staff accept reports made verbally, in writing, anonymously, and from third parties. All allegations shall be documented within 24 hours of becoming known to facility staff in the PREA Allegation System (PAS). The Facility PREA Coordinator (FPC) or institution investigator(s) call the TDOC Central Communication Center within 24 hours to report the allegation. The caller will not provide any details regarding the allegation, but rather provide only the PAS number assigned to the allegation. The FPC/designee reviews all PAS entries to ensure the allegation was documented within 24 hours of becoming known to facility staff. This review document on the Sexual Abuse Incident Check Sheet, CR-3776. Approval of selected staff to have security access for the PAS is requested by the FPC to the TDOC Statewide PREA Coordinator.

All staff are issued and carry a PREA Action Steps for Allegations Card that includes Staff Duty to Report; You have a duty to report any knowledge, suspicion, or informant of an incident to sexual abuse or sexual harassment; Neglect or violation of responsibilities by staff that may have contributed to incident or retaliation; Retaliation against an inmate or staff who reported an incident. .

Interviews conducted with random staff acknowledged their commitment to accept all reports of sexual abuse and/or sexual harassment regardless of the method received to include verbally, in writing, anonymously and/or via a third party. Staff also acknowledged they would document the information received as soon as possible and prior to departing from their assigned shift.

Interviews with random and targeted group inmates acknowledged their awareness of various way to report sexual abuse and sexual harassment that include reporting to staff, through family members or friends, in writing or through the free calls to \*9222, or \*9555 that is posted in large font on the bulletin boards in all housing units and throughout each site. They also acknowledged that the message on how to report sexual abuse or sexual harassment is an automatic message received upon assessing the inmate phones to include tablets.

115.51(d) TDOC Index 502.06.2 indicates that staff may privately report sexual abuse

	<p>and sexual harassment of inmates to the Central Office PREA Tip Line (615-253-8178). The PREA Lesson Plan includes a training session regarding the reporting of PREA allegations that include staff may privately report to the Central Office PREA Tip Line (615-253-8178). Interviews with random staff indicated they were knowledgeable in how to privately report sexual abuse or sexual harassment. Most staff cited the PREA Hotline to include the Central Office and/or reporting via a private conversation with their supervisor, higher ranking staff and/or the BCCX Institution Investigators as their primary methods of making a private report of sexual abuse or sexual harassment.</p> <p>Based on the review of agency policies, successful testing of internal and external reporting options available to the inmate population, interviews with staff and the inmate population, and site observation, the facility has demonstrated compliance with all the provisions of the standard.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 501.01 Inmate Grievance Procedures (Effective 11/2/2022)</li> <li>3. BCCX Index 501.01-1 Inmate Grievance Procedures (Effective 03/017/2024)</li> <li>4. TDOC Inmate Grievance Procedure Handbook</li> <li>5. PREA Investigative Case Files</li> <li>6. TDOC Agency Website</li> <li>7. Site Observation</li> <li>8. Interviews with: <ol style="list-style-type: none"> <li>a. Avalon Center Advocate</li> <li>b. Grievance Sergeant</li> <li>c. Inmates Who Reported Sexual Abuse</li> <li>d. TDOC Statewide PREA Coordinator</li> </ol> </li> </ol> <p>115.52 (a) TDOC Index 501.01 and BCCX Index 501.01-1 outlines the mandate of the standard provisions.</p>

TDOC Index 501.01 states an inmate may submit a grievance alleging sexual abuse at any time.

BCCX Index 501.01-1 states BCCX shall ensure that every inmate has the right to utilize the grievance procedure without fear of reprisal. All grievances shall be considered in a fair and impartial manner and settled at the lowest possible.

115.52 (b) TDOC Index 501.01 and BCCX 501.01-1 states applicable time limits shall apply to any portion of a grievance that does not allege an incident to sexual abuse. Inmates shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff an alleged incident of sexual abuse.

The TDOC Inmate Grievance Procedure Handbook pages 10 -11, includes Grievances Regarding PREA. Procedures include the applicable time limits of filing, notification to the inmate and the availability of third-party reporting. The handbook also includes the procedures of filing emergency grievances in relation to PREA.

115.52 (c) TDOC Index 501.01 and BCCX 501.01.1 states an inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint.

Per interviews with the BCCX Investigator, and BCCX Grievance Sergeant, all grievances alleging sexual abuse and /or sexual harassment are immediately forwarded to the BCCX Associate Warden of Treatment/Facility PREA Coordinator and BCCX Investigators for investigation. All correspondence with the inmate regarding the PREA allegation is by the BCCX Institution Investigators.

115.52 (d) TDOC Index 501.01 and BCCX 501.01.1 states a final decision on the merits of any portion of a grievance alleging sexual abuse shall be issued by the Associate Warden of Treatment (AWT) or Deputy Superintendent (DS) within 90 days of the initial filing of the grievance. Computation of the 90-time period shall not include time used by inmates in preparing the grievance. TDOC may claim an extension of the time to response, up to 70 days, if normal time period for response is insufficient to make an appropriate decision. The inmate shall be notified in writing by the AWT/DS of any such extension and be provided at by which a decision will be made. At any level of the grievance, including final level, if the inmate does not receive a response within the time allotted to reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

The facility reported one (1) sexual abuse allegation, and one (1) sexual harassment allegation were reported through the grievance process during the 12-month review period. Documentation supports both allegations were referred to the BCCX Institution Investigators for the completion of an investigation.

A grievance reporting an allegation of sexual harassment was submitted by an inmate on June 23, 2024. The BCCX Investigator acknowledged receipt of the grievance and initiation of the investigation on June 24, 2024. The investigation was determined as Unfounded on June 27, 2024. The reporting inmate was noted as

refusing to sign the Inmate PREA Allegation Status Notification form on June 28, 2024.

A grievance reporting an allegation of sexual abuse was submitted by an on October 16, 2024. The BCCX Investigator acknowledged receipt and initiation of the investigation on October 18, 2024. The investigation was concluded as Unfounded on October 29, 2024. The reporting inmate acknowledged receipt of the investigative finding by his signature on the Inmate PREA Allegation Status Notification form on October 29, 2024.

Therefore, the requirement of notification to an inmate in writing when the agency files for an extension, including notice of the date by which a decision was made was not applicable.

Interviews conducted with four (4) inmates who reported sexual abuse indicated each were aware of the grievance process as a method to report sexual abuse. None had elected to report their allegations through the grievance process, and each stated they had not attempted to research the process or the various time frames for staff's response. However, all were aware that the allegation would be investigated immediately.

115.52(e) TDOC Index 501.01 states Third parties (including fellow inmates, staff, members, family members, attorneys, and outside advocates) shall be permitted to assist in inmates filling grievances related to allegations of sexual abuse and shall also be permitted to file such grievances on behalf of the inmate.

If a third party files such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed on their behalf and document such on the Inmate Grievance, CR-1394. The inmate shall be required to personally pursue any subsequent steps in the grievance process. If the inmate declines to have the grievance processed on his/her behalf, the inmates' decision shall be documented on the original Inmate Grievance, CR-1394, and signed by the inmate.

The facility reported the number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline as zero. There was no supporting evidence that indicated the two (2) inmates who filed grievances requested third-party assistance.

The BCCX Inmate Rules & Regulations Handbook lists various third-party reporting resources available to the inmates and staff. Resources include written communication to The Avalon Center at P.O. Box 3063 Crossville, TN 38557; or by calling \*9555 from the inmate phone system., or 1-800-641-3434 from outside the prison. This information is provided in the English and Spanish language.

The auditing team utilized the inmate housing unit phones and tablets to test the inmate's access to third party reporting at \*9555. The call was identified as a free confidential call and accepted by Avalon Center Advocate who confirmed the agency provide third-party reporting services for inmates at the BCCX upon their approval.

The auditing team observed grievance forms were accessible to the inmate population in designated areas in each of the housing units (pods) at Site 1, Site 2, and Unit 28, unit management office and annex operations office. Grievance depositories were observed located at Site 1 Unit 21 – housing units A, B, C, and D, and in front of the inmates’ dining area. The auditing team observed grievance depositories located at Site 2 in the library, Unit 1, the Annex Administration Building and in front of the inmate dining area. Depositories located at Unit 28 were in each housing unit A, B, C, and D pods.

The auditing team conducted a telephone test for confirmation of third-party reporting noted on the agency’s website as the TIP line for third-party reporting of sexual abuse and sexual assault at (615) 253-8178. The auditor completed a call and was directed to leave a message with the reporting information and to include contact information for a return call. The Lead Auditor received notification of the received call by the TDOC Statewide PREA Coordinator within 30 minutes of the call. Per the TDOC Statewide PREA Coordinator, upon receiving third party reporting calls, the information is immediately shared with the affected facility and an investigation is initiated at the facility level.

115.52 (f) TDOC Index 501.01 and BCCX 501.01.1 states after receiving an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to the AWT/DS so that any required immediate corrective action may be taken. The grievance chairperson shall provide an initial response within 48 hours and shall issue a final decision within five calendar days. The initial response and final decision provided within the PREA Allegation System (PAS) shall document the facility’s determination as to whether the inmate is at substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The noted time frame in provision (d) still applies after any immediate corrective action has been implemented. The facility reported that zero emergency grievances of sexual abuse were filed during the review period.

115.52 (f) TDOC Index 501.01 states that after receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance to the Associate Warden of Treatment for any corrective action to be taken. The grievance chairperson will provide a response within 48 hours and a final decision within five calendar days. There were zero sexual abuse and/or sexual harassment allegations filed through the emergency grievance process where an inmate alleged being at a substantial risk of imminent sexual abuse during the 12- month review period. However, the initial response and final decision would be maintained within the PREA Allegation System (PAS) and shall document the facility’s determination as to whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

115.52 (g) TDOC Index 501.01 states an inmate may be disciplined for filing a grievance related to alleged sexual abuse only when it is demonstrated that the

	<p>inmate filed the grievance in bad faith. The facility reported zero allegations of sexual abuse or sexual harassment were reported through the grievance process were reported as being in bad faith. Therefore, there were zero instances of discipline applied relevant to the standard provision.</p> <p>Based on the review of the agency and facility's grievance policies, inmate handbook, allegations reported via grievances, site observation and testing of third-party reporting, staff and inmate interviews, BCCX does meet all provisions of the standard</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08/01/2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>4. BCCX Index 502.06-2-1 PREA- Allegations, Investigation and SART (Effective 12//15/ 2020)</li> <li>5. BCCX Index 502.06-1 PREA Allegations, Investigations, and SART (Effective 10/25/ 2024)</li> <li>6. MOU with The Avalon Center</li> <li>7. BCCX Rules and Regulations Handbook</li> <li>8. BCCX Designated Victim Advocate</li> <li>9. The Avalon Center Postings</li> <li>10. Services Provided by the Avalon Crisis Center</li> <li>11. PREA Posters</li> <li>12. Memorandum Drafted by the BCCX Warden</li> <li>13. Interviews with: <ol style="list-style-type: none"> <li>a. Formal and Informal Random Inmates</li> <li>b. The Avalon Center Supervisory Staff</li> </ol> </li> </ol>

c. Avalon Center Advocate

d. Inmates Who Reported Sexual Abuse

115.53 (a) (b) (c) TDOC Index 502.06.3, TDOC Index 502.06, BCCX Index 502.06.2-1, and BCCX 502.06-1 outline the mandates of the standard provisions. Inmates Access to Facility and Outside Confidential Support Services: (1) The name and contact information of the facility's Inmate PREA Victim Advocate shall be posted on each housing unit bulletin board. The facility shall ensure that inmates are provided access to outside victim advocate for emotional support services related to sexual abuse by giving inmates the mailing address and telephone numbers, including toll-free hotline numbers, were available, of local, state, or national victim advocacy or rape crisis organization and, for persons detained solely for civil immigration purposes, immigrant services agencies.

(2) The Facility PREA Coordinator shall ensure that inmates are informed, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

(3) The TDOC shall attain a memorandum of understanding (MOU) or other agreements with community services providers that are able to provide inmates with confidential emotional support services related to sexual abuse. Memorandum of Understand are to be approved by the TDOC General Counsel prior to implementation.

Upon each inmate's arrival at BCCX they are issued a BCCX Inmate Rules and Regulations Handbook that is available in English and Spanish. The BCCX handbook notes "To report incidents of sexual abuse to an outside resource, you may call the following number, Avalon Crisis Center \*9555. This call is confidential and will not be recorded by TDOC. "The Avalon Center of Crossville has a Memo of Understand with the BCCX is provide confidential crisis counseling to victims suffering from sexual assault. The handbook also provides the mailing address The Avalon Center P.O. Box 3063 Crossville, TN 38557. The Avalon Center can be reached by calling \*9555 from the Inmate Phone System or by calling 1-800-641-3434 (from outside the prison)."

The auditing team observed The Avalon Center postings on bulletin boards throughout the Complex at Site 1, Site 2 and Unit 28 to include in all housing units, libraries, food service departments, education, religious services, medical, mental health, recreation, operational departments, maintenance, administration, visitation, intake/diagnostic, and staff offices. The posting read as such: The Avalon Center of Crossville has partnered with BCCX to provide confidential crisis counseling to victims suffering from sexual assault. The Avalon Center can be confidentially reached by call \*9555 from the inmate phone system or by calling 1-800-641-3434 (from outside the prison). These phone calls are not monitored and recorded. The mailing address is "The Avalon Center P.O. Box 3063 Crossville, TN 38557.

The auditing team observed telephones available for usage by the inmate population in all housing units throughout the complex at Site 1, Site 2 and Unit 28 to include

those inmates in the segregation units who are also afforded the opportunity to utilize the phones. Per supervisory staff assigned to segregation, an inmate request to report a PREA allegation and/or contact The Avalon Center to include via phone would be given immediate access to the phone.

The auditing team conducted a test call to \*9555 The Avalon Center by using the inmate housing unit telephone and inmate issued tablets during the site observation. The call was immediately accepted, and the auditor was asked to identify the facility from which the call was made and to identify the requested services. The auditor was informed that both victim advocacy services and reporting sexual abuse services were available. The auditor's call was answered by an Advocate who confirmed the services are available 24 hours a day.

The inmate population was observed to be in possession of individual agency assigned tablets that allow them to place calls and/or written correspondence to individuals within and outside the facility. The auditing team requested inmates in various housing units at each site to demonstrate their use of the tablet. The inmates were successful in completing calls for both internal and external reporting. Upon initial accessing the phone, the inmates were greeted with a recording stating to report sexual abuse or sexual harassment press \*9222 for internal reporting, press \*9555 for external reporting to the Sexual Assault Center (Avalon), or \*9111 to report a crime. The procedures were also confirmed during the auditing team's assessment of the inmate telephone system as all calls were successfully completed. Additionally, the instructions were available in English and Spanish.

The review of the investigative case files confirmed one (1) inmate elected to report an allegation of sexual abuse to the Avalon Center via the PREA Hotline at \*9555. The information was forwarded to the BCCX Institution Investigator who completed an investigation of the reported allegation.

General mailboxes are accessible to the inmate population at Site 1, Site 2, and Unit 28. Mail is collected Monday through Friday and provides an avenue for the inmate population to report internally and externally to include anonymously. The facility provides inmates with paper noted as a "Two -way Message"/ Inmate Request form to communicate in writing to staff. Inmates may personally give the note to staff, place it under the staff's office door, and/or place it in one of the available mailboxes.

Formal and informal interviews with the inmate population confirmed they have the availability to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allows them to communicate in writing both internally and externally with others. Additionally, writing instruments are provided by the facility as needed. However, since the issuing of their individual tablets, they are used to communicate verbally and through written communication.

An interview with staff assigned to the facility mailroom confirmed the inmates' outgoing mail is sealed by the inmate. Written correspondence between inmate and The Avalon Center for reporting and/or emotional support would not be monitored by the mailroom staff and would be treated as legal mail.



Formal and informal interviews with the male inmate population acknowledged their awareness and observation of available advocate services information posted for the Avalon Center and the facility's designated victim and how to access. Inmates stated they could make a request to the facility's victim or contact the Avalon Center via phone or through their tablet. However, they indicated they had not utilized the service and could not provide any information regarding the services. The inmates were also aware of reporting methods that include verbally to staff, family members, friends, in writing, the PREA Tip Line and The Avalon Center in writing or via \*9555 through use of the wall phones and their personal issued tablets that also allow them to communicate from within their cells. They were aware that the calls were free and were noted as being confidential.

A memorandum drafted by the BCCX Warden to "All BCCX Staff & Inmates." was observed posted on bulletin boards throughout the Complex at Site 1, Site 2, and Unit 28 accessible to inmates, staff, contractors and volunteers. The memorandum provided the contact information to the PREA Facility Victim Advocate via an information request or the included phone extension.

An interview with BCCX Facility Victim Advocate stated he is also assigned a mental health case manager. He continued in stating, although he has made himself available for the inmate population and his contract information is posted on bulletin boards throughout BCCX that accessible to the inmates, staff, contractors and volunteers, he has not been requested to provide services as an advocate.

Interviews with four (4) inmates who reported sexual abuse acknowledged their awareness of the advocacy services as posted in their housing unit and throughout the facility in addition being asked if they would like to speak with an advocate. However, no one reported requesting the service at the time of reporting. However, all acknowledged they were aware of the services provided by Avalon as the information is posted throughout. Additionally, one (1) stated they attend one on one sessions regularly and one (1) acknowledged attending group sessions.

115.53 (c) The agency has established a Memorandum of Understanding (MOU) with The Avalon Center. Documentation of the MOU was provided for review. The MOU was signed by the previous Avalon Program Director on April 11, 2015, and by a previous TDOC Commissioner on April 17, 2015.

The lead auditor conducted an interview with the supervisory staff with the Avalon Center prior to the site observation who confirmed the Avalon Center operates under the Memorandum of Understanding with BCCX and other TDOC facilities. The supervisor further stated in addition to offering third party reporting opportunities for the inmate population, the Avalon Center offers victim advocacy services to include sponsoring weekly in-person support groups at BCCX for the female population. There has not been a request for such services for the male population. However, she did recall an inmate who was offered victim advocate services during a forensic examination at the Cumberland Medical Center during the review period. However, she could not recall if he accepted the advocate service. However, they would report to the outside hospital to include Cumberland Medical Center for any occurrence of

	<p>sexual assault. Depending on the comfort level of the victim, the Advocate may remain in the examination room with the victim or remain in the waiting area throughout the examination. Their goal is providing assistance to the victims. Although her agency offers emotional and therapeutic support, they have seen a large reduction in the request for services from BCCX to include those via phone. However, the Avalon Center does provide Support Group sessions for the female population that is held weekly. Additionally, one-one sessions are also scheduled for those who request such services. Documentation of The Avalon Support Group weekly class schedule to provide in- person advocacy service within the facility to the female inmate population was presented for review.</p> <p>Interviews with the female inmate population acknowledged they were aware of the weekly scheduled Support Group services provided by Avalon Center that is posted throughout Unit 28 in all housing units, program areas, operational areas to include visiting room, food service, education, library, medical and mental health, and unit management office. The Avalon Support Group sessions were identified as attended by several of the female inmate population to include regular sessions and individual sessions upon request.</p> <p>Per an interview with the Avalon Center supervisory staff, the Support Group services were confirmed as provided to the female population as there has not been a request for the program for the male population. Additionally, the Avalon Center has seen a decline in the request for services by the BCCX population.</p> <p>Based on the review of agency policies, facility's Inmate Rules and Regulation Handbook, confirmation of MOU with The Avalon Center (Crisis Center), designated facility victim advocate, on-site services provided by The Avalon Center, availability of resources to the inmate population to receive services, site observation, and interviews, facility does meet all standard provisions.</p>
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115.54	Third-party reporting
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08/01/2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>4. BCCX Index 502.06-2-1 PREA- Allegations, Investigation and SART (Effective 12//15/ 2020)</li> </ol>

5. BCCX Index 502.06-1 PREA Allegations, Investigations, and SART (Effective 10/25/2024)
  6. MOU with The Avalon Center
  7. BCCX Rules and Regulations Handbook
  8. PREA Audit Notice Posting
  9. BCCX Designated Victim Advocate
  10. The Avalon Center Postings
  11. Testing of Third-Party Reporting
  12. Services Provided by the Avalon Crisis Center
  13. PREA Posters
  14. Memorandum Drafted by the BCCX Warden
  15. Interviews with:
    - a. Formal and Informal Random Inmates
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    - d. Inmates Who Reported Sexual Abuse
- 115.53 (a) (b) (c) TDOC Index 502.06.3, TDOC Index 502.06, BCCX Index 502.06.2-1, and BCCX 502.06-1 outline the mandates of the standard provisions. Inmates Access to Facility and Outside Confidential Support Services: (1) The name and contact information of the facility's Inmate PREA Victim Advocate shall be posted on each housing unit bulletin board. The facility shall ensure that inmates are provided access to outside victim advocate for emotional support services related to sexual abuse by giving inmates the mailing address and telephone numbers, including toll-free hotline numbers, were available, of local, state, or national victim advocacy or rape crisis organization and, for persons detained solely for civil immigration purposes, immigrant services agencies.
- (2) The Facility PREA Coordinator shall ensure that inmates are informed, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.
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The auditing team conducted a test call to \*9555 The Avalon Center by using the inmate housing unit telephone and inmate issued tablets during the site observation. The call was immediately accepted, and the auditor was asked to identify the facility from which the call was made and to identify the requested services. The auditor was informed that both victim advocacy services and reporting sexual abuse services were available. The auditor's call was answered by an Advocate who confirmed the services are available 24 hours a day.

The inmate population was observed to be in possession of individual agency assigned tablets that allow them to place calls and/or written correspondence to individuals within and outside the facility. The auditing team requested inmates in various housing units at each site to demonstrate their use of the tablet. The inmates were successful in completing calls for both internal and external reporting. Upon initial accessing the phone, the inmates were greeted with a recording stating to report sexual abuse or sexual harassment press \*9222 for internal reporting, press \*9555 for external reporting to the Sexual Assault Center (Avalon), or \*9111 to report a crime. The procedures were also confirmed during the auditing team's assessment of the inmate telephone system as all calls were successfully completed. Additionally, the instructions were available in English and Spanish.

The review of the investigative case files confirmed one (1) inmate elected to report an allegation of sexual abuse to the Avalon Center via the PREA Hotline at \*9555. The information was forwarded to the BCCX Institution Investigator who completed an investigation of the reported allegation.

General mailboxes are accessible to the inmate population at Site 1, Site 2, and Unit 28. Mail is collected Monday through Friday and provides an avenue for the inmate population to report internally and externally to include anonymously. The facility provides inmates with paper noted as a "Two -way Message"/ Inmate Request form to communicate in writing to staff. Inmates may personally give the note to staff, place it under the staff's office door, and/or place it in one of the available mailboxes.

Formal and informal interviews with the inmate population confirmed they have the availability to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allows them to communicate in writing both internally and externally with others. Additionally, writing instruments are provided by the facility as needed. However, since the issuing of their individual tablets, they are used to communicate verbally and through written communication.

An interview with staff assigned to the facility mailroom confirmed the inmates' outgoing mail is sealed by the inmate. Written correspondence between inmate and The Avalon Center for reporting and/or emotional support would not be monitored by the mailroom staff and would be treated as legal mail.

Formal and informal interviews with the male inmate population acknowledged their awareness and observation of available advocate services information posted for the Avalon Center and the facility's designated victim and how to access. Inmates stated they could make a request to the facility's victim or contact the Avalon Center via phone or through their tablet. However, they indicated they had not utilized the service and could not provide any information regarding the services. The inmates were also aware of reporting methods that include verbally to staff, family members, friends, in writing, the PREA Tip Line and The Avalon Center in writing or via \*9555 through use of the wall phones and their personal issued tablets that also allow them to communicate from within their cells. They were aware that the calls were free and were noted as being confidential.

A memorandum drafted by the BCCX Warden to "All BCCX Staff & Inmates." was observed posted on bulletin boards throughout the Complex at Site 1, Site 2, and Unit 28 accessible to inmates, staff, contractors and volunteers. The memorandum provided the contact information to the PREA Facility Victim Advocate via an information request or the included phone extension.

An interview with BCCX Facility Victim Advocate stated he is also assigned a mental health case manager. He continued in stating, although he has made himself available for the inmate population and his contract information is posted on bulletin boards throughout BCCX that accessible to the inmates, staff, contractors and volunteers, he has not been requested to provide services as an advocate.

Interviews with four (4) inmates who reported sexual abuse acknowledged their

awareness of the advocacy services as posted in their housing unit and throughout the facility in addition being asked if they would like to speak with an advocate. However, no one reported requesting the service at the time of reporting. However, all acknowledged they were aware of the services provided by Avalon as the information is posted throughout. Additionally, one (1) stated they attend one on one sessions regularly and one (1) acknowledged attending group sessions.

115.53 (c) The agency has established a Memorandum of Understanding (MOU) with The Avalon Center. Documentation of the MOU was provided for review. The MOU was signed by the previous Avalon Program Director on April 11, 2015, and by a previous TDOC Commissioner on April 17, 2015.

The lead auditor conducted an interview with the supervisory staff with the Avalon Center prior to the site observation who confirmed the Avalon Center operates under the Memorandum of Understanding with BCCX and other TDOC facilities. The supervisor further stated in addition to offering third party reporting opportunities for the inmate population, the Avalon Center offers victim advocacy services to include sponsoring weekly in-person support groups at BCCX for the female population. There has not been a request for such services for the male population. However, she did recall an inmate who was offered victim advocate services during a forensic examination at the Cumberland Medical Center during the review period. However, she could not recall if he accepted the advocate service. However, they would report to the outside hospital to include Cumberland Medical Center for any occurrence of sexual assault. Depending on the comfort level of the victim, the Advocate may remain in the examination room with the victim or remain in the waiting area throughout the examination. Their goal is providing assistance to the victims. Although her agency offers emotional and therapeutic support, they have seen a large reduction in the request for services from BCCX to include those via phone. However, the Avalon Center does provide Support Group sessions for the female population that is held weekly. Additionally, one-one sessions are also scheduled for those who request such services. Documentation of The Avalon Support Group weekly class schedule to provide in- person advocacy service within the facility to the female inmate population was presented for review.

Interviews with the female inmate population acknowledged they were aware of the weekly scheduled Support Group services provided by Avalon Center that is posted throughout Unit 28 in all housing units, program areas, operational areas to include visiting room, food service, education, library, medical and mental health, and unit management office. The Avalon Support Group sessions were identified as attended by several of the female inmate population to include regular sessions and individual sessions upon request.

Per an interview with the Avalon Center supervisory staff, the Support Group services were confirmed as provided to the female population as there has not been a request for the program for the male population. Additionally, the Avalon Center has seen a decline in the request for services by the BCCX population.

Based on the review of agency policies, facility's Inmate Rules and Regulation Handbook, confirmation of MOU with The Avalon Center (Crisis Center), designated

	facility victim advocate, on-site services provided by The Avalon Center, availability of resources to the inmate population to receive services, site observation, and interviews, facility does meet all standard provisions.
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 21-21-2024)</li> <li>4. PREA Refresher Cards</li> <li>5. Site Observation</li> <li>6. Interviews with: <ol style="list-style-type: none"> <li>a. BCCX Warden</li> <li>b. Regional Director of Centurion</li> <li>c. Behavioral Health Administrator</li> <li>d. BCCX Medical Practitioners</li> <li>e. TDOC Statewide PREA Coordinator</li> <li>f. Randon Staff</li> </ol> </li> </ol> <p>115.61(a) TDOC Index 502.06.2 and TDOC Index 502.06 states, "All staff are required to report immediately to their supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of TDOC, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Staff carry a PREA Refresher card that includes staff duty to report any knowledge, suspicion, or information of an incident of sexual abuse or sexual harassment, neglect</p>

of violation of responsibilities by staff that may have contributed to an incident or retaliation, retaliation against an inmate or staff member who report an incident.

Interviews with randomly selected security, non-security indicated they are aware of their responsibility and duty to immediately report all knowledge of PREA allegations. Staff stated they would immediately report to the Shift Commander and/or the Institution Investigators by phone or during an in-person conversation and would document the information given in a written report. Informational sharing would be in a private setting.

115.61(b) TDOC Index 502.06.2 and TDOC Index 502.06 outline staff must not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Interviews with random security, non-security, and specialized staff confirmed their awareness of the extent in which information of sexual abuse and/or sexual harassment would only be shared with authorized staff necessary to make treatment, investigation and other security and management decisions. Staff stated they would only share the information with their direct supervisor, shift commander and investigative staff.

115.61(c) TDOC Index 502.06.2 and TDOC 502.06 notes the mandate of the provision. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse as outlined in this policy and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Additionally, interviews with both medical and mental health staff verified all inmates are required to sign a consent form during their initial assessment during the intake process and are reminded during each further treatment. Those on the mental health caseload sign a consent form annually. However, those inmates who are not on the mental health caseload and are not seen regularly and are not required to update their consent form annually. Each was aware of their duty to report and that the state of Tennessee is identified as a mandatory reporting state.

115.61(d) Per the TDOC Statewide PREA Coordinator, and BCCX Warden, the facility does not house youthful offenders under the age of 18, but at times may house vulnerable adults. However, TDOC has received guidance from the Tennessee Department of Human Services (DHS) Adult Protective Services, and the Department of Children's Services (DCS) that TDOC are responsible for completing investigations of to include those under the age of 18 years old and vulnerable adults. The facility provided an Inter-office Correspondence from the Office of General Counsel Department of Human Services, and the State of Tennessee Workflow to Protect Vulnerable Adults that states Adult Protective Service isn't required to investigate allegations of abuse, neglect or exploitation of persons in jails/correctional facilities.

BCCX does not house individuals under the age of 18 years. Additionally, there were zero reported allegations of sexual abuse involving inmates identified as vulnerable. Therefore, documentation of reports as such were not applicable for review.



	<p>115.61(e) TDOC 502.06.2 and TDOC 502.06 states, Facility staff shall report all allegations of sexual abuse and sexual harassment, including third-party, and anonymous reports, to the OIC Institution Investigator for an investigation. Per the BCCX Warden, regardless of how the allegation of sexual abuse or sexual harassment is reported, it is immediately referred for an investigation by the authorized BCCX Institution Investigators and/or OIC Special Agents.</p> <p>Based on the review of agency policies, PREA Refresher Cards, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (10-21-2024)</li> <li>4. Interviews with: <ol style="list-style-type: none"> <li>a. Agency Head Designee</li> <li>b. Warden</li> <li>c. Random staff</li> </ol> </li> </ol> <p>115.62 (a) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandate of the standard that states "If facility staff receives information that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate."</p> <p>The Warden indicated in circumstances where the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, methods to ensure safety would immediately be implemented to include monitoring and alternate housing that is available throughout the different sites throughout the Complex. An investigation will be completed by the BCCX Institution Investigators.</p> <p>An interview with the Agency Head Designee indicated TDOC has an immediate response system in place as sexual safety is taken seriously by the agency. The first</p>

	<p>step would be to separate the at-risk individual from the potential risk and protect them from harm. There are specific areas of the compound that are designated as protective custody (PC). A protective custody investigation will be initiated, and any issues identified. The offender will remain housed in PC until the risk is eliminated by a transfer of the potential threat or until the offender expresses that they are no longer fearful and want to return to the compound.</p> <p>The auditing team utilized a variety of scenarios during interviews with 20 random security and non-security staff. All staff indicated they would remove the inmate from the area of threat, secure and/or maintain a visual of the inmate while notifying the Shift Commander.</p> <p>Per the PAQ, there have been zero instances where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>Based on the review of agency policies, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. Interviews with: <ol style="list-style-type: none"> <li>a. Agency Head Designee</li> <li>b. Warden</li> </ol> </li> </ol> <p>115.63 (a) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandated of the standard. Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden/Superintendent of the facility that received the allegation notifies the Warden/Superintendent of the facility where the alleged abuse occurred in writing using an official letterhead and files a copy in the investigation file. The PAQ indicated the number of allegations the facility received that an inmate was abused while confined at another facility was zero.</p> <p>115.63 (b) (c) In accordance with TDOC Index 502.06.2 and TDOC 502.06, Such notification shall be provided as soon as possible, but no later than 72 hours after</p>

	<p>receiving the allegation. The facility shall document that it has provided such notification. The facility reported zero sexual abuse or sexual harassments allegations were reported to have occurred at another facility by an inmate upon their arrival at BCCX in an excess of the 12 -month review period. Documentation of notification in accordance with the standard provision was not applicable.</p> <p>115.63 (d) Per TDOC Index 502.06.2 and TDOC 502.06, The Warden/Superintendent who receive such notification shall ensure the allegation is investigated in accordance with TDOC policy.</p> <p>Per an interview with the TDOC Agency Head Designee, in such instances of a facility reporting and/or receiving an unreported allegation, the designated point of contact is the TDOC Statewide PREA Coordinator, who in turn will notify the Warden, the Facility's PREA Coordinator, and the Facility's Institutional Investigator. The agency does have examples of outside agency referrals as the referrals are routinely received from the various Rape Crisis Centers where the agency has established a MOU.</p> <p>Per an interview with the BCCX Warden, upon an inmate reporting sexual abuse or sexual harassment regardless of where or when the sexual abuse and/or sexual harassment occurred, an investigation would be initiated upon being reported.</p> <p>Documentation supports the BCCX Warden received a memorandum from the reporting TDOC Warden advising of the inmate's report of sexual abuse having previously occurred at BCCX. The allegation was reported on December 11, 2024, and forwarded to BCCX Warden on December 11, 2024. An investigation was initiated by the BCCX Institution Investigator on December 13, 2024, and concluded as unsubstantiated on December 17, 2024. Notification of the investigative findings was forwarded to the reporting TDOC facility on December 19, 2024.</p> <p>Based on the review of agency policies, documentation of notification and review of investigative case file, in addition to staff interviews, the facility does meet compliance of the standard.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART) (Effective 08-01-2020)</li> <li>3.TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> </ol>

4. BCCX PREA Response Card

5. PREA Investigation Casefiles

6. Interviews with:

a. Inmates Who Report Sexual Abuse

b. Random Staff Interviews

c. Security First Responder

d. Non-security First Responder

115.64 (a) (b) TDOC 502.06.2 and TDOC 502.06 outline the mandate of the standard provisions. If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any action that could destroy physical evidence and then immediately notify the shift command. The alleged victim and abuser shall be instructed not to wash their hands, shower, brush teeth, change clothes, urinate, defecate, drink, or eat. The shift commander who is notified of the allegation initiates the Sexual Abuse Incident Check Sheet, CR-3776. Security separates the alleged victim and abuser. Security preserves and protect any crime scene until appropriate steps can be taken to collect any evidence. Security staff notifies SART.

Staff are issued individual laminated cards to carry on their person. The card includes PREA Action Steps to follow when an inmate reports sexual abuse. The steps are as follows: 1) Ensure the alleged victim is safe and has no contact with the alleged aggressor. 2) Notify the Shift Commander immediately who notifies the Associate Warden(s); 3) Ensure the inmate does not remove clothing, shower, use restroom, brush teeth, eat or drink until examined by medical. Immediately 1) Escort alleged victim to medical for PREA exam. 2) Secure crime scene of alleged incident if occurred within the past 72 hours. 3) Once the inmate is safe, all pertinent information will be documented on the PREA Allegation Screen.

If the alleged abuse occurred within a 72-hour time period of reporting, the shift commander shall initiate the Sexual Abuse Incident Check Sheet, CR 3776 included in the TDOC Index 502.06.2. Security staff shall separate the alleged victim and abuser. Security shall preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The Shift Commander shall notify the Sexual Assault Response Team (SART)

The PAQ noted 15 sexual abuse allegations were reported during the 12-month review period. The PAQ noted of these 15 allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser as zero.

The PAQ noted number of allegations where staff were notified within a time that allowed for the collection of physical evidence as two (2). Per the review of the investigative case files, the circumstances of response did not include the

performance of acts of sexual abuse. The two (2) occurrences were noted due to the inmates reporting within a time period for transport to the Cumberland Medical Center for a medical consultation of a forensic examination.

Two (2) victims of sexual abuse were transported to the Cumberland Community Center after reporting the sexual abuse occurred within 72 hours of the report for the completion of forensic examinations. However, one (1) of the two (2) victims acknowledged consuming a meal prior to reporting and one (1) of the two (2) victims acknowledged showering the previous day prior to reporting. Staff documented securing the cells as a possible crime scene, and collection of all evidence to include clothing placed in a brown paper bag, logging the chain of evidence and the transport of each of the victims to the Cumberland Medical Center for a forensic examination by a qualified medical practitioner. One (1) of the two (2) victims refused the forensic examination during the initial examination.

An interview was conducted with a security staff supervisor who served as a first responder. The alleged victim reported unwanted touching that did not include penetration or touching of the genital area. The alleged victim and aggressor (staff member) were separated, and the staff member was reassigned to a different housing area from the victim.

Interviews with four (4) inmates who reported sexual abuse stated staff responded immediately upon reporting. Two (2) stated the allegation was reported through the PREA Tip line \*9222, and staff responded within minutes of the call. Two (2) victims stated they reported to security supervisors after removing themselves from the alleged aggressor. Each of the four (4) victims stated there was no physical evidence for collection.

115.64 (b) TDOC 502.06.2 and TDOC 502.06 outline the mandate of the standard provision. If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any action that could destroy physical evidence and then immediately notify the shift command.

The PAQ indicated off the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder as one (1).

The PAQ noted of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence as zero and of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff as one (1).

A mental health practitioner served as a non-security first responder. She stated the inmate reported an allegation of continuous unwanted touching by another inmate. The Shift Commander was immediately notified, and the alleged victim was advised to remain in her office pending their arrival.

Interview with random staff indicated all were aware of their responsibilities as a first

	<p>responder. Staff stated they would immediately separate the victim and aggressor, advise the victim not to wash their hands, shower, brush teeth, change clothes, urinate, defecate, drink or eat. The Shift Commander would immediately be notified. Staff reference the PREA Actions Steps card in their possession during the interview.</p> <p>Based on the review of agency policies, review of sexual abuse investigations, medical documentation, PREA Response Card, and interviews with security first responder and non-security first responder staff and the inmate population, BCCX does meet all provisions of the standard.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. BCCX Index 502.06.2-1 PREA Allegations, Investigations, SART (Effective 12/16/2020)</li> <li>3. BCCX Index 502.06-1 PREA Allegations, Investigations, SART (Effective 10/25/2024)</li> <li>4. SART Members Appointment Notice Postings</li> <li>5. Site Observation</li> <li>6. Interview: <ol style="list-style-type: none"> <li>a. Warden</li> </ol> </li> </ol> <p>115.65 (a) Per an interview with the BCCX Warden, he identified the BCCX 502.06.2 -1 and BCCX Index 502.06 -1 outlines the written institutional plans to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>A memorandum drafted by the BCCX Warden was observed posted on bulletin boards throughout the Complex in housing units, program and operational areas, identifying members of the Sexual Assault Response Team (SART) that was visually to all staff, inmates, contractors and volunteers.</p> <p>BCCX Index 502.06.2-1 and BCCX 502.06 -1 identifies the facility's procedures to follow upon notification of a reported PREA allegation. The policies outline the response procedures of accepting reports of sexual abuse being accepted by staff verbally, in writing, anonymously and from third parties. Procedures outlined include the following: 1) Separation of victim and abusers; 2) Victim instructed to not take any actions that could destroy physical evidence; 3) Notification to the Shift</p>

	<p>Commander; 4) Protection and preservation of crime scene; Notification to SART Team, PREA investigation conducted on the PERA Allegation System and report to the Central Communication Center within 24 hours; 5) Completion of Sexual Abuse Incident Sheet (CR-3776) when incident occurred within 72 hours; 6) Health Services staff assessment and stabilization of the alleged victim with a minimum intervention as necessary; 7) Ensure the victim does not shower, use the restroom, consume any fluids, removes and clothing; 8) Be protective, supportive and ensure the inmate is secure; 9) Maintain confidentiality; 10) The transport of victims of physical abuse/ penetration, to the outside hospital for evidence collection /treatment if occurred with 72 hours if over 72 hours have the victim may still be transported outside facility when the institution investigator deems appropriate; 11) Once the alleged victim is safe, document a full assessment in the inmate's medical chart; 12) Be sure to quote any statements made by the victim about the incident; 13) Submit a mental health referral.</p> <p>The coordinated response for follow-up care services includes the following: 1) The victim shall be offered medical and behavioral health treatment as needed 2) Victim shall be provided pregnancy tests and information about offered medical services; 3) Victim will also be offered tests and treatment for sexually transmitted diseases. 5) The BCCX PREA Victim Advocate is posted in every housing unit and is available to speak with the victim as needed. 6) Monitoring for retaliation of staff inmates who report sexual abuse and inmates who are victim of abuse will be conducted for at least 90 days following any report sexual abuse unless the report is unfounded.</p> <p>The facility provided TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024, and TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART) (Effective 08/01/2020) that were not relevant to the standard.</p> <p>Based on a review of the facility policies, site observation, interview and analysis, the facility has demonstrated compliance with this standard.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. Tennessee Code Annotated 50-1-207</li> <li>3. Interview with:</li> </ol>

	<p>a. Agency Head Designee</p> <p>115.66 (a)TCA Code 50-1-207 states “Prohibition against requiring any employer or employee to waive their rights under the National Labor Relations Act or require acceptance or agreement to any provisions that are mandatory or non-mandatory subject of a collective bargaining under Federal law.</p> <p>The Agency Head Designee reported TDOC does not have any collective bargaining agreements for this facility nor has the agency entered into any collective bargaining agreement since August 20, 2012. There is a historical agreement in one of the agency’s East Tennessee facilities, but it does not grant protection for staff during any allegation of misconduct.</p> <p>Based on a review of the Tennessee Code, interview and analysis, the facility has demonstrated compliance with this standard.</p>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (10-21-2024)</li> <li>4. BCCX SART Team Appointment Memo</li> <li>5. Retaliation Monitoring Documentation</li> <li>6. Interviews with: <ol style="list-style-type: none"> <li>a. Agency Head Designee</li> <li>b. BCCX Warden</li> <li>c. Staff Charged with Conducting Retaliation Monitoring</li> <li>d. Inmates Who Reported Sexual Abuse</li> </ol> </li> </ol> <p>115.67 (a) TDOC Index 502.06.2 and TDOC Index 502.06 note the mandate of the provision. Inmates and staff who are involved in reporting sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigation shall be protected from retaliation by other inmates or staff. Appointed members of the</p>



SART monitor staff and inmates for protection from retaliation utilizing PREA Retaliation Review (Inmate), CR-3963, for inmate and PREA Retaliation Review (Staff), CR-3982.

115.67 (b) TDOC Index 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard provision. Monitoring involves looking for any changes that may suggest possible retaliation by inmates or staff. SART members must act promptly to remedy any such retaliation. Monitoring continues beyond 90 days if the initial monitoring indicates continuing need. Areas to be monitored include but are not limited to the following: a) Inmate disciplinary reports; b) Inmate housing or programming changes; c) Negative performance reviews or reassignment of staff.

Per an interview with the Agency Head Designee, TDOC monitors victim and aggressors for retaliation relations on a 30-day, 60-day, and 90-day time frames, in addition, TDOC offers the victim the ability to transfer facilities. Should the victim decide to remain, the aggressor is transferred to another facility. At a minimum the victim and aggressor are listed as incompatible and prohibited from being housed together. Departmental monitoring shall involve looking for any changes that may suggest possible retaliation by inmates or staff. Institutional SART members shall act promptly to remedy any such retaliation.

Per an interview with the Warden, retaliation toward staff and/or inmates is prohibited and an investigation would be initiated for any staff and or inmate suspected of performing acts of retaliation. Measures taken to protect inmates include conducting individual face-to-face meetings with the victim at 30 days, 60 days and 90 days intervals. The BCCX Institution Investigators are members of the facility's SART and are assigned to conduct retaliation monitoring for both staff and the inmate population. In regard to the retaliation monitoring for the victim, areas reviewed would include unjustifiable changes in the inmate's housing, job, programming, unjustifiable disciplinary infractions, and grievances filed.

Staff would be monitored for unjustifiable changes from regular post assignments, sudden write-ups by supervisory staff, numerous denials of leave requests, changes in normal behavior/work ethics and interaction with other staff, and excess leave. An investigation would be initiated for any staff and/or inmate suspected of performing acts of retaliation and disciplinary actions would be applied in accordance with agency disciplinary policies for staff and inmates.

Interviews with four (4) inmates who reported sexual abuse indicated they felt protected enough against possible retaliation from staff and the inmate population after reporting the sexual abuse.

115.67 (c) (d) TDOC Index 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard provision. For at least 90 days following a report of sexual abuse, SART monitors the conduct and treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse. Retaliation monitoring occurs at 30 days, 60 days, and 90 days intervals. The monitoring begins 30 days after the allegation is made. Monitoring involves looking for any changes that may suggest possible retaliation by inmates or staff. SART members must act

promptly to remedy any such retaliation. Staff must act promptly to remedy any such retaliation and monitoring continues beyond 90 days if the initial monitoring indicates a continuing need.

The PREA Retaliation Review (Inmate), CR-3963 included staff's monitoring of the following: 1) Are the victim and the aggressor listed as incompatible? 2) Are the victim and the aggressor housed in separate housing areas? 3) Is the victim still receiving assistance from a victim advocate? 4) Is the victim still receiving assistance from medical? 5) Is the victim/aggressor still receiving assistance from mental health? 6) Is the victim/aggressor still receiving assistance from program staff? 7) Has the victim's custody level changed since the PREA violation? 8) Has the victim/aggressor received any disciplinary reports since the PREA violation? Additionally, victim assessments and interview are required during the monitoring meetings that includes (9) Has the inmate being monitored been negatively affected in any manner" If yes, How? 10) Has the inmate being monitored been subject to unprofessional comments and/or negative actions by other inmates, staff, supervisors, and/or administrative personnel as a result of the PREA Violations and if yes, How? SART members' response to comments and actions upon completion of the meetings are discussed and reviewed by numerous SART Members during the scheduled monthly SART meeting.

The facility provided documentation of completed 90-day retaliation monitoring the victims of the (5) sexual abuse investigations that was not concluded as Unfounded. The retaliation monitoring period was noted as performed at 30-day intervals. However, one was noted for 60 days monitoring as the 90-day period remained pending during the post audit phase. Neither victim was documented as requiring monitoring in an excess of 90 days. The monitoring staff documented personal interaction with the victims and statements made by the victims.

The PREA Retaliation Review (Staff), CR-3982, requires SART staff conducting the retaliation monitoring for staff identity and note responses for the following: 1) Has the person's days off changed in an unreasonable negative manner? 2) Has the person's shift changed in an unreasonable negative manner?; 3) Has the person's post assignment in an unreasonable negative manner?; 4) Has the person been informed of the employee assistance program?; Has the person received an unreasonable evaluation?; 5) Has the person been declined for special assignments/promotion/academy?; 6) Has the person received any type of disciplinary action deemed to be unreasonable?; 7) Has the person's vacation time been cancelled or changed by his/her supervisor?; 8) Has the person had any other unexplained actions taken against him/her? Additionally, a victim assessment and interview with the staff member are required, that includes: 1) Has the person being monitored been negatively affected in any manner? If Yes, How? 2) Has the person being monitored been subjected to unprofessional comments and/or negative action by other inmates, staff, supervisors, and/or administrative personnel as a result of the PREA violation? If yes, How? 3) SART members response to comments and actions upon completion of the individual meetings are discussed and reviewed by numerous SART Members during the scheduled monthly SART meeting.

There were zero instances where staff were identified to be monitored for retaliation beyond the 12-month review period.

The PAQ noted the number of times an incident of retaliation occurred in the past 12 months as zero.

Interviews with the BCCX Institution Investigators confirmed they are assigned to conduct retaliation monitoring. Inmates who report sexual abuse and/or sexual harassment, and those who have assisted with an investigation are monitored when the investigations are determined as substantiated and/or unsubstantiated. The victim and aggressor are normally separated at the initiation of the reported allegation through placement in different housing units to include the aggressor's placement in segregation as applicable. Those monitored for retaliation would be monitored at 30 days, 60-day and 90-days, and longer if needed. The monitoring sessions are conducted during private one-on-one conversations with the victim. Staff also noted they regularly conduct rounds throughout the Complex and they are very well known by the inmate population while they are accessible and approachable while allowing the inmate population to discuss any concerns, they may have to include retaliation by staff and/or the inmate population. Areas reviewed during the retaliation monitoring period include the review for unjustifiable changes in the victim housing, work assignment, programming, write-ups, and noticeable changes in their behavior and interaction with others. Upon identifying the victim is experiencing retaliation from others whether staff or inmates, an investigation would be initiated.

Staff members would be monitored at 30 days, 60 days, and 90 days. Monitoring for retaliation is performed during the initiation of individual private meetings with the staff member. Concerns regarding changes in the staff members' assignments, scheduled days and hours of work, negative work performances resulting in unjustifiable write-up, discipline counseling, unreasonable denial of requested leave, denial of reasonable training and promotional opportunities, and unreasonable evaluation ratings. The monitoring period would exceed 90 days if there were any concerns of possible retaliation towards the staff member.

Per an interview with the BCCX Warden, the following measures would be monitored to ensure an inmate who report sexual abuse and or assist in an investigation is not retaliated against by the monitoring the individual for unwarranted discipline, sudden changes in housing assignment, excessive cell searches, unjustifiable job changes, negative interaction with staff and/or other inmates, decrease in interaction with staff and/or other inmates, removal and/or denial of programs activities. An investigation would be initiated into any staff and/or inmate suspected of performing acts of retaliation towards others and the appropriate discipline would be imposed. Different housing could be arranged as needed.

In regard to staff, measures taken to protect staff from retaliation include monitoring for unjustifiable discipline, unjustifiable and/or repeated denial for leave, continuous variation of post assignments to include more difficult post assignments, sudden change in evaluation assessments, reduction of interaction with staff and/or the inmate population. An investigation would be initiated into any staff and/or inmate

	<p>suspected of performing acts of retaliation towards others and the appropriate discipline would be imposed. Staff could be assigned to an area where they feel more comfortable.</p> <p>The facility reported the number of times an incident of retaliation occurred in the past 12 months as zero.</p> <p>115.67 (e) TDOC Index 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard provision. The facility employs multiple protection measures, such as housing changes or transfers for inmate victim or abusers, removal of alleged staff or inmate abusers from contact with victims, or emotional support services for inmate or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.</p> <p>Per the Agency Head Designee, retaliation for cooperation is not tolerated in TDOC, If the individual is an offender they would be granted protective custody status until the aggressor was removed from compound and the retaliation could be addressed. If the individual is a staff member, steps are instituted to ensure that retaliation is recognized and addressed appropriately such as termination of an aggressor, staff transfer of retaliator, or re-assignment of retaliator.</p> <p>Per an interview with the Warden, upon a suspicion of retaliation by either staff or inmate, an investigation would be conducted and separation between the individuals would be initiated immediately. The affected staff fearing retaliation may be assigned to an area where they feel more comfortable and the staff performing the prohibited acts would be recommended for termination. An investigation would also be initiated for any inmate performing actions of retaliation toward other inmates and the aggressor would be placed in segregation pending the investigative findings followed by applicable disciplinary actions to include transfer.</p> <p>115.67 (f) TDOC Index 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard provision that states the Department's obligation to monitor is terminated if the result of an investigation determines that the allegation is unfounded.</p> <p>Although the Department's obligation to monitor is terminated if the result of an investigation determines that the allegation is unfounded, the facility completes the 30-day, 60-day, and 90-day monitoring regardless of the investigative findings to include unfounded.</p> <p>Based on the review of the agency's policy, completed retaliation monitoring, and interviews with staff who conduct retaliation monitoring and inmates who reported sexual abuse, the facility does meet compliance with all standard provisions.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Evidence Reviewed (documents, interviews, site review):

1. BCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART)
3. TDOC Index 502.06 Prison Rape Elimination Act (PREA)
4. Segregation Unit Records
5. Record of Staff Visits to Restricted Units
6. Interviews with:
  - a. Warden
  - b. Staff Who Supervise Segregation

115.68 (a) TDOC Index 502.06 and TDOC 502.06.2 outlines the mandate of the standard and indicates any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241, shall clearly indicate the basis of concern for the inmate's safety and the reason why no alternative means of separation can be arranged. Inmates at high risk for sexual victimization may be placed in restrictive housing only after an assessment of all available alternatives has been made, and only until an alternate means of separation from likely alleged abuser(s) can be arranged.

Inmates at high risk for sexual victimization may be placed in segregation/restrictive housing only after an assessment of all available alternatives has been made, and then only until an alternative means of separation from likely alleged abuser(s) can be arranged. This housing assignment must not exceed a period of 30 days unless extenuating circumstances prevent the inmate from being housed in an alternative method. SART will document such circumstances during the monthly SART meeting.

Inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If an inmate's access to programs, privileges, education, or work opportunities is restricted, the facility documents what opportunities have been limited, the duration of the limitations, and the reasons for such limitations using Contact Notes LCDG in OMS.

If an extension is necessary, the SART member(s) shall clearly document such in the PREA Allegation System application: 1) basis for concern for the inmates' history; 2) the reason why no alternative means of separation can be arranged; 3) the need for emotional support services for inmates or staff who fear retaliation for reporting sexual abuse, or sexual harassment, or for cooperation with investigations. Every 30 days, the facility staff shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

The PAQ identified the number of inmates who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero.

Per the PAQ, the number of inmates who alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was identified as zero. The PAQ also noted a review of case files of inmates who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months as zero.

Additionally, the number of case files that include a statement of the basis for facility's concern for the inmate's safety, and the reason or reasons why alternative means of separation could not be arranged as zero.

The PAQ identified the number of inmates who alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero.

Per an interview with the BCCX Warden, the agency and facility policies prohibit placing inmates at high risk of sexual victimization or have alleged sexual abuse in involuntary housing without consideration of alternate available housing that could provide separation from an identified possible threat. Alternative housing is available throughout the complex to prevent interaction and meets the need of separation as applicable. Additionally, the identified aggressor would be placed in involuntary segregation pending an investigation and/or transferred to another TDOC facility.

Per an interview with staff who supervise segregation, staff who supervise segregation also indicated inmates who report sexual abuse and/or those inmates who are at a high risk of being sexual abused are never placed in segregation. All inmates in segregation are allowed access to educational programs, chaplain services, legal and leisure library material, visitation, legal aid to include attorney accessibility, showers, meals, hair care services, personal grooming, recreation, mail services, and limited telephone access. If an inmate has been sanctioned for phone usage restrictions, they may be approved to completed phone calls by the Unit Manager or Warden. Phone accessibility to report PREA allegations would be given upon request. Confirmation of the services provided was supported through documentation review of Record of Staff Visits to Restricted Units, and Segregation Unit Records.

The review of the sexual abuse investigative cases confirmed zero inmates who reported sexual abuse and/or identified at a high risk of being sexual abused were placed in segregation based solely on the standard provision. Therefore, no documentation of segregation housing pursuant to the standard was initiated.

Based on the review of agency policy, PAQ, interviews with the Warden and staff who supervise segregation, segregation unit records, PREA investigative case files, and analysis, the facility has demonstrated compliance with this standard.

115.71	Criminal and administrative agency investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. PREA Investigative Case Files</li> <li>5. Interviews with: <ol style="list-style-type: none"> <li>a. OIC Special Agent</li> <li>b. BCCX Institution Investigators</li> </ol> </li> </ol> <p>115.71(a) TDOC 502.06.2 and TDOC 502.06 states it is the policy of TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines (Title 28 (CFR Part 115). Staff shall accept reports made verbally, in writing, anonymously, and from third parties. Allegations shall be documented within 24 hours of becoming known to facility staff in the PREA Allegation System (PAS). These investigations shall be conducted within 72 hours of receiving the allegation. SART team members/ investigators who have received special training in conducting sexual abuse investigations in confinement settings shall investigate all allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p>The facility reported 24 allegations of sexual abuse and/or sexual harassment during the 12 -month review period. Each of the 24 investigations were completed as an administrative investigation. Zero were identified to include criminal activity.</p> <p>Interviews with both the OIC Special Agent and BCCX Investigators indicated normally, the initiation of the investigation is required within 24 hours upon being reported and must be uploaded in the PREA Allegation System and are normally completed within three (3) – seven (7) days of being reported. However, some investigations can take longer due to limited information provided, such as those reported anonymously or by a third party. However, allegations to include those reported via the PREA Hotline, directly to staff, through the grievance procedures, third-party (Avalon Center) and those reported from another TDOC facility after an inmate’s departure are investigated in the same manner. Often times, those reported anonymously often lack detailed information and may require additional time to</p>

complete.

115.71(b) TDOC 502.06.2 states, "Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations." A Sexual Abuse Response Team (SART member who has received special training in conducting sexual abuse investigations in confinement settings shall investigate.

Interviews with the BCCX Institution Investigators and the TDOC OIC Special Agent confirmed each have received specialized training to conduct sexual abuse investigations pursuant to standard 115.34.

The BCCX Institution Investigators are members of the SART and assigned to conduct administrative investigations of alleged sexual abuse and sexual harassment. Training certifications for the completion for the BCCX Institution Investigators was identified as the following: National Institute of Corrections: PREA: Conducting Sexual Abuse Investigations in a Confinement Setting was provided.

The TDOC OIC Special Agents are sworn law enforcement officers and are authorized to conduct both administrative and criminal investigations. Certificated of completed training for the assigned OIC Special Agent included the following: Certificate of Law Enforcement Officer Training School for Basic Criminal Investigations; Training completion presented by the Federal Bureau of Investigations (FBI); FBI Managing Investigations of Death and Sexual Offense Using Investigative Psychology; and NIC Course PREA: Your role in responding to sexual abuse; and NIC PREA Conducting Sexual Abuse Investigations in a Confinement Setting.

The review of the selected 19 investigative case files was completed as administrative investigations were completed by the BCCX Institution Investigators.

115.71(c) TDOC Index 502.06.2 indicates that OIC Special Agents shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Interview with the OIC Special Agent and BCCX Facility Investigator identified the applicable following procedures when an investigation is initiated. The Shift Commander immediately contacts the BCCX Institution Investigators, and the initiation of each investigation is required to be uploaded in the PREA Allegation System within 24 hours upon being reported regardless of when by the institution investigators. The OIC Special Agents are contacted immediately when circumstances may be pursuant to criminal findings. The first step is ensuring staff initiate first responder duties by separating the victim and the aggressor and securing the crime scene area. If applicable the victim would be transported to the outside hospital for a forensic examination and clothing would be collected, with a chain of custody report. Lab work is transported to the Tennessee Bureau of Investigations for testing DNA sampling and completion of chain of custody. Review available video of the identified area, also review video to observe if staff's actions and/or failure to follow policy contributed to the assault, review inmate phone records to include those of other



inmates, take photographs of affected cell/area and available evidence, photographs of victim and aggressor to include noted injuries, complete recordings of all interviews to include victim, aggressor and witnesses, and note medical evaluations to include forensic examinations results as applicable. All would be included in the investigative report and utilized in the determination of the investigative finding.

Nineteen of the reported 24 investigative case files were reviewed for timeliness, promptness, thoroughness and objectivity of the investigations. The review included four (4) sexual harassment and 15 sexual abuse investigations and confirmed all investigations were initiated on the day of the reported and/or notification of the allegation.

Nineteen of the reported 24 investigative case files were reviewed for timeliness, promptness, thoroughness and objectivity of the investigations. The review of the investigative case files confirmed all investigations were initiated on the day of the reported allegation. Fourteen investigative findings were concluded within five days of the reported allegations. One (1) sexual abuse investigation was concluded on the tenth day after reported. One (1) sexual abuse investigation was concluded six months after reported due to the pending forensic examination results.

Fourteen (14) of the 19 investigations were concluded within five (5) days of the reported allegations. However, one (1) of the 14 was reopened 76 days later for the completion of an interview with the previously identified aggressor that had not obtained.

One (1) of the 19 investigations was completed within 10 days of being reported.

Three (3) of the 19 investigations were concluded within 17 days of being reported.

One (1) of the 19 investigations was completed approximately six months after reporting due to pending results of the forensic examination.

Two (2) sexual abuse of the 15 sexual abuse investigations noted the investigations were discontinued due to the inmates stating they no longer wanted to file PREA.

Two (2) of the 15 sexual abuse investigations did not document an attempt to identify and/or interview individuals reported by the victim as witnesses and/or the aggressors upon the victim stating they no longer wanted to file PREA.

The remaining investigative case files were identified as thoroughly and objectively completed that included audio recorded statements, notes completed by the investigative staff, photographs, documented review of video, applicable inmate phone calls, medical and mental health treatment, applicable evidence reviewed and collected, policy violations, detailed summary of events and the investigative findings based on the preponderance of the evidence collected.

Per interviews with investigative staff, an inmate's prior reports and complaints of sexual abuse involving the suspected perpetrator would already be known as the facility monitors all inmates identified as having a history as a potential aggressor and/or as an aggressor.

115.71 (d) TDOC Index 502.06 states that when the quality of evidence appears to support an administrative investigation, the Investigative Unit Special Agent conducts compelled interviews. When the quality of evidence appears to support criminal prosecution, the Investigative Unit Special Agent conducts a non-custodial interview or an interview under Miranda.

An interview with the OIC Special Agent indicated that when evidence supports criminal charges, meetings are scheduled with the OIC Special Agents and the State District Attorney General regarding possible prosecution. The two (2) agencies have established a good working relationship that allows open communication regarding and conducting compelled interviews. He added two (2) investigative agents are involved in conducting investigations regarding staff.

The one (1) substantiated staff on inmate sexual abuse case did not include criminal activity for prosecution.

115.71(e) TDOC Index 502.06.2 and TDOC 502.06 outlines the mandate of the standard provision as the credibility of a victim, suspect, or witness, is assessed on an individual basis, and must be determined by the person's status as inmate or staff. Inmates who allege sexual abuse are not required to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation.

Per an interview with the OIC Special Agent, the credibility of an alleged victim, suspect, or witness is not a determining factor of the investigative finding. The investigative findings are based on factual evidence and never based on the status of an individual to include staff or inmate. An inmate alleging sexual abuse would never be requested to submit to a polygraph and/or any other truth-telling device.

Interviews with the BCCX Institution Investigators indicated the investigative findings are based on individual case by case findings and not on the status of the individual status of inmate or staff. Inmates are not requested to submit to a truth-telling device.

Interviews with four (4) inmates who reported sexual abuse indicated neither were asked to submit to a polygraph or other truth telling devices upon reporting the allegation.

The review of the 19 PREA investigative case files supported there was no indication that an alleged victim was requested to participate in polygraphy or another truth-telling device. Interviews with four (4) inmates who reported an allegation of sexual abuse acknowledged they were not required to submit to a polygraph or other truth telling device.

115.71(f) TDOC Index 502.06.2 and TDCO 502.06 outlines the mandate of the standard provision. Administrative investigations include an effort to determine whether staff actions or failures to act facilitated the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings.

Interviews with the OIC Special Agent and BCCX Investigators indicated a separate investigative report is completed when staff actions or failure to perform their assigned duties are determined to have facilitated and/or contributed to sexual abuse. Identified policy violations are documented and forwarded to Warden for appropriate disciplinary actions.

Documentation of PREA case files, medical, mental health and inmate risk screening is stored electronically. Accessibility is given to authorized staff only within the specific department upon approval and the issuing of credentials for login accessibility. Hard copies of inmate medical and mental health records are maintained in the medical records office accessible to medical and mental health staff only. Inmate records are stored in secured cabinets in the records office that is manned by assigned staff and in the unit management office. Hard copies of PREA file cases are stored in secured file cabinets within the investigator's office accessible only to the assigned investigators.

115.71(g) TDOC 502.06.2 and TDOC 502.06 states that criminal investigations are documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence.

The review of the investigative casefiles and the PREA Allegation System Report, confirmed the facility reported (1) substantiated sexual abuse and one (1) substantiated sexual harassment investigative findings throughout the review period. Neither of the investigations determined criminal activities were involved and both were concluded as administrative investigations.

Interviews with the OIC Special Agent indicated the criminal investigations include all information gathered of the allegation occurrence to include the description of all physical evidence, documentary evidence, statements and interviews with the victim, aggressor, witness, to include photos, phone records, written correspondence, and applicable medical results such as forensic results, that support criminal charges.

115.71(h) TDOC Index 502.06.2 and TDOC 502.06 states, "Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. Per an interview with the OIC Special Agent, and BCCX Institution Investigators although one (1) staff on inmate sexual abuse allegation was concluded as substantiated, criminal charges were not identified.

Per the PAQ, the number of substantiated allegations of conduct that appear to be criminal that were referred to for prosecution since the last PREA audit was zero.

115.71(i) TDOC Index 502.06.2 and TDOC 502.06 state that such investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five (5) additional years. This practice was confirmed by the BCCX Institution Investigators and OIC Special Agent. Administrative investigative case files are maintained in the PREA Allegation System (PAS) at the facility level and criminal investigations are maintained at the Office of Investigations and Conduct.

115.71(j) TDOC Index 502.06.2 and TDOC 502.6 state the departure of the alleged abuser or victim from employment or control of the facility or Department does not provide a basis for terminating an investigation.

Interviews with both the OIC Institution Investigator and OIC Special Agent confirmed although staff may resign during an investigation, the investigation continues to include the arrest and prosecution of staff when applicable. The OIC Special Agents have arrest authority throughout the state of Tennessee and will visit the home of a staff member as needed. Per the OIC Special Agent, if an allegation is reported after an inmate's release from TDOC, the Special Agent would follow through with the assistance from the inmate's probation officer. If the allegation involves a staff member who have resigned, two (2) Special Agents would report to their home if they fail to cooperate. If the staff member resides outside of the state of Tennessee, the assigned OIC Special Agent would request assistance from the law enforcement office within the respective state. The investigation would only discontinue due to the confirmed death of the victim or aggressor prior to conducting the interview.

115.71 (k)(l) The Office of Investigations and Conduct is part of the Tennessee Department of Corrections and conducts its own criminal as well as administrative investigations into cases of sexual abuse and sexual harassment. This information was confirmed during interviews with BCCX Warden, TDOC Statewide PREA Coordinator, OIC Special Agent, BCCX Institutional Investigators, and BCCX PREA Compliance in addition to the review of the 19 investigative case files. Therefore, provisions (k) and (l) are not applicable.

Based on the review of policy, 19 investigative case files, interviews and analysis, the facility did not meet the requirement of provisions (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports during the review period. Additionally, based on the findings, the facility did not meet compliance with provision (c): Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

The discrepancies in meeting the compliance of both provisions were identified during the pre-audit phase. Upon identification of non-compliance, the facility immediately implemented corrective action measures in an effort to meet the requirement of standard provisions (c).

Upon the facility's release of the OAS to the auditing team, it was discovered that numerous standard provisions were blank and did not contain the documentation submitted by the BCCX PREA Compliance Manager. This documentation was previously confirmed as submitted during a TEAM review between the BCCX PREA Compliance Manager and the auditing team. Notification of the technical issue with the OAS was reported by the TDOC Statewide PREA Coordinator to the PREA Resource Center (PRC). At the request of the TDOC Statewide PREA Coordinator and consent of

	<p>the lead auditor, approval was granted by the PRC for the removal of the current BCCX OAS audit and creation of a new OAS audit. As such, the audit review was extended beyond the original schedule of completion to include the submission of the report within 45 days after the site visit. As corrective measures for compliance with provisions a and c were implemented, the facility was successful in demonstrating compliance with provisions (a) and (c) within the four-month period.</p> <p>The facility reported four (4) sexual abuse allegations and five (5) sexual harassment allegations prior to the submission of the report. The auditing team selected each of the nine (9) investigative case files for compliance of (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports; and (c): Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. The review of the investigations confirmed all investigations were prompt, thorough and included an objective investigative summary. Each investigation included a timeline review of applicable video footage, interviews of each victim, identified aggressors and/or an attempt to identify unknown aggressors, and identified witnesses to include additional possible witnesses within the areas. The reports were made by the alleged victims and zero identified possible physical evidence for collection.</p> <p>The investigative findings were based on the collective findings of evidence and not on an individual's status. Seven (7) of the nine investigative findings were concluded within seven days of the reported allegation. One (1) of the nine (9) was completed on the 10th day of reporting and one (1) was completed 22 days after reporting.</p> <p>Based on the review of the investigative casefiles that supports the practice and procedure of conducting sexual abuse and sexual harassment investigations to include provisions a and c, BCCX does meet compliance with all standard provisions a – l.</p>
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115.72	Evidentiary standard for administrative investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response</li> </ol>

Team (SART) (Effective 08/01/2020)

3. TDOC 502.06 Prison Rape Elimination Act (PREA (Effective 10/21/2024)

4. Administrative PREA Investigative Case Files

5. Interviews with:

a. BCCX Institution Investigators and OIC Special Agent

115.72 (a) TDOC Index 502.06.2 states, "The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated."

The facility reported 24 PREA allegations that included 15 sexual abuse allegations and nine (9) sexual harassment allegations. The auditing team reviewed 15 sexual abuse investigations and four (4) sexual harassment investigations. The auditing review noted the following discrepancies:

Two (2) of the 15 sexual abuse investigations noted the investigations were discontinued due to the victims stating they no longer wanted to file PREA.

Two (2) of the 15 sexual abuse investigative reports did not document an attempt to identify and/or interview individuals reported by the victim as witnesses and/or the aggressors upon the victim stating they no longer wanted to file PREA.

One (1) of the 15 sexual abuse investigative findings was documented as concluded prior to conducting an interview with the aggressor. The investigation was reopened 76 days later in which an interview was conducted with the aggressor.

Based on the review of policy, 19 investigative case files, interviews and analysis, the facility did not meet the requirement of standard 115.71 provisions (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports during the review period. Additionally, based on the findings, the facility did not meet compliance with standard 115.71 provision (c): Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrators.

The discrepancies in meeting the compliance of standard 115.71 (a) and (c) provisions of were identified during the pre-audit phase. Upon identification of non-compliance, the facility immediately implemented corrective action measures in an effort to meet the requirement of standard provisions.

Upon the facility's release of the OAS to the auditing team, it was discovered that numerous standard provisions were blank and did not contain the documentation submitted by the BCCX PREA Compliance Manager. This documentation was

	<p>previously confirmed as submitted during a TEAM review between the BCCX PREA Compliance Manager and the auditing team. Notification of the technical issue with the OAS was reported by the TDOC Statewide PREA Coordinator to the PREA Resource Center (PRC). At the request of the TDOC Statewide PREA Coordinator and consent of the lead auditor, approval was granted by the PREA Resource Center (PRC) for the removal of the current BCCX OAS audit and creation of a new OAS audit. As such, the audit review was extended beyond the original schedule of completion to include the submission of the report within 45 days after the site visit. As corrective measures for compliance with provisions a and c were implemented, the facility was successful in demonstrating compliance with provisions (a) and (c) within the four-month period.</p> <p>The facility reported four (4) sexual abuse allegations and five (5) sexual harassment allegations during the extended audit phase. The auditing team selected each of the nine (9) investigative case files for compliance that confirmed compliance with all provisions of standard 115.71 and standard 115.72 that the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated that the investigative findings were determined based on the preponderance of evidence or lower proof of when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Therefore, based on the auditing team review of the investigative casefiles, review of agency policy and interviews with agency investigators who acknowledges the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated, BCCX does meet the standard.</p>
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115.73	Reporting to inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Assault Response Team (SART) (Effective 08/02/2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/24/2024)</li> <li>4 TDOC PREA Status Notification CR-3984</li> <li>5. Interviews with: <ol style="list-style-type: none"> <li>a. BCCX Institution Investigators and OIC Special Agent</li> </ol> </li> </ol>

b. Warden

c. Inmates Who Reported Sexual Abuse

115.73(a) TDOC Index 502.06.2 and TDOC Index 502-06 states following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The TDOC PREA Inmate PREA Allegation Status Notification form is utilized to document an inmate's notification of the investigative findings.

Interviews with the Office of Investigations and Conduct (OIC) Special Agent, and BCCX Institution Investigators confirmed at the conclusion of each PREA investigation, the victim is notified of the investigative findings by the BCCX Institution Investigators. The victims are notified verbally and are asked to acknowledge by their signature on the Inmate PREA Allegation Status Notification, CR-3984. Upon a victim's refusal to sign the notification form, their refusal is witnessed by a second staff member. This procedure was reiterated by the BCCX Warden.

The PAQ identified the number of criminal and/or administrative investigations of inmate sexual abuse allegations completed by the agency/facility in the past 12 months as 15. Zero criminal investigations were conducted during the review period.

The auditing team selected each of the 15 notifications of investigative findings for sexual abuse investigations for review. The TDOC PREA Inmate PREA Allegation Status Notification forms were provided for each of the investigative findings to include substantiated, unsubstantiated and/or unfounded in accordance with the standard provisions. The review identified 12 reported victims acknowledged by signature notification of the investigative findings. The remaining three (3) notifications were documented by two staff as confirming the inmates' refusal/failure to sign receipt of the notification.

Interviews with four (4) inmates who reported sexual abuse indicated they were informed of the investigative findings by the BCCX investigative staff.

115.73 (b) The TDOC employs investigators assigned to the Office of Investigations and Conduct identified as OIC Special Agents and OIC Facility Investigators who are authorized to conduct both administrative and criminal investigations. Therefore, this provision is not applicable.

115.73(c) TDOC Index 502.06.2 and TDOC 502.06 states that following an inmate's allegation that a staff member has committed sexual abuse, the Department shall subsequently inform the inmate in writing whenever: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the staff member has been indicted on a charge related to sexual abuse within the facility; and the staff member has been convicted on a charge related to sexual abuse within the facility. The facility reported four (4) staff on inmate sexual abuse allegations during the review period. The four (4) investigations were determined as the following: one (1) substantiated; zero (0) unsubstantiated, (3)



	<p>unfounded. The review of the investigative case files indicated each of the four (4) victims were advised of the investigative findings. The victim of the substantiated staff on inmate sexual abuse investigation acknowledged by their signature notification that the "Employee is no longer employed at the facility." No criminal activity was identified during the investigation. Therefore, further notification was not required.</p> <p>The victim of the staff on inmate substantiated sexual abuse was unavailable for interview due to a previous transfer from BCCX.</p> <p>115.73(d) TDOC Index 502.06.2 indicates that following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing: whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded; Whenever the facility learns that an alleged abuser has been indicted on a charge related to sexual abuse within the facility; When the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p>The facility reported zero substantiated inmate on inmate sexual abuse investigative findings and one (1) substantiated inmate on inmate sexual harassment investigative finding during the review period. The substantiated sexual harassment investigative findings did not include criminal activity.</p> <p>115.73 (e) TDOC Index 502.06.2 states that all notifications shall be made in writing using Inmate PREA Allegation Status Notification, CR-3984, and the inmate shall acknowledge by signature that he/she has received such notification. The notification shall become part of the allegation file. If the inmate refuses to sign the acknowledgement, an additional staff member shall sign and date acknowledging the inmate refusal.</p> <p>The PAQ noted the number of notifications to inmates that were provided pursuant to this standard as 15.</p> <p>Based on the review of agency policy, documentation of inmates' notification of the investigative findings, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response</li> </ol>

	<p>Team (SART) (Effective 08/01/2020)</p> <p>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/24/2024)</p> <p>4. TDOC Employee Code of Conduct</p> <p>5. Confirmation of Termination</p> <p>115.76 (a) (b) (c) (d) TDOC Employee Code of Conduct states “An employee may not engage in, or allow another person to engage in, sexual activity with an inmate, probationer, or parolee, (hereby referred to as offenders). An employee may not encourage, threaten, or force an offender to have sexual relations with them or anyone else. There is no such thing as consensual sex between staff and offenders. The violation of this rule will result in disciplinary action up to and including termination and criminal prosecution.</p> <p>TDOC Index 502.06.2 and TDOC Index 502.06 outlines the mandate of the standard. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or PREA policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. Sanctions shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of the Department’s sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.</p> <p>The PAQ noted in the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies as one (1) that consisted of a sexual abuse finding.</p> <p>The auditing team’s review of the case file supported the sexual abuse investigation was initiated on June 6, 2024, and concluded as substantiated on June 6, 2024. The staff’s member termination letter was dated June 6, 2024. The investigation did not conclude criminal activity.</p> <p>Based on the review of agency policies, PREA investigative case file, and staff’s termination letter, the facility is compliant with all provisions of this standard.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Evidence Reviewed (documents, interviews, site review):

<p>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</p> <p>2. TDOC Code of Conduct</p> <p>3.TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08/01/2020)</p> <p>4. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10/24/2024)</p> <p>5. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement (Effective 2/15/2023)</p> <p>6. Interview with:</p> <p>a. Warden</p> <p>115.77(a), (b) TDOC Employee Code of Conduct states “An employee may not engage in, or allow another person to engage in, sexual activity with an inmate, probationer, or parolee, (hereby referred to as offenders). An employee may not encourage, threaten, or force an offender to have sexual relations with them or anyone else. There is no such thing as consensual sex between staff and offenders. The violation of this rule will result in disciplinary action up to and including termination and criminal prosecution.</p> <p>TDOC Index 502.06.2 and TDOC 502.06 mandate any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies and if found to have engaged in sexual abuse or sexual harassment of an inmate shall be prohibited from further contact with any inmate.</p> <p>TDOC Index 115.01 states that if after investigation it is necessary to limit the services of a volunteer, the approving authority shall notify the volunteer in writing of such action. The approving authority may restrict a volunteer to entering only the assigned TDOC location which shall be designated as the volunteer’s primary site. The approving authority may terminate the services of a volunteer, and such termination shall apply to all institutions.</p> <p>Per interview with the Warden, upon a volunteer and/or contract worker identified as an aggressor in a sexual harassment and/or sexual abuse allegation, an investigation would be immediately initiated and the contractor or volunteer would be prohibited from entry into the facility preventing all contact with the inmate population pending the investigative findings. In circumstances of a substantiated investigative findings, they would be permanently removed from entry. Central Office would be notified of the volunteer removal. Additionally, notification would immediately be made to the contracting agency regarding the contractor’s removal. The contracting agency would be responsible for reporting to the applicable contractors to their licensing bodies. Criminal charges would be initiated as applicable for both contractors and volunteers.</p> <p>The facility reported zero allegations of sexual abuse and/or sexual harassment</p>
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	<p>against contractors and/or volunteers. Therefore, none was required to be reported to law enforcement agencies or their relevant licensing bodies.</p> <p>Based on the review of agency policies, PREA case files, and interview, the facility is compliant with all provisions of this standard.</p>
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1.BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2.TDOC Index 502.06 PREA</li> <li>3.TDOC Index 502.05 Definitions of Disciplinary Offenses</li> <li>4. PREA Investigative Case Files</li> <li>5. Interview with: <ol style="list-style-type: none"> <li>a. Warden</li> <li>b. Behavioral Health Administrator</li> </ol> </li> </ol> <p>115.78 (a) TDOC Index 502.06 states, “Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. The facility reported in the past 12 months the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility as zero (0). This was confirmed during the auditing team’s review of the PREA Allegation Report that includes investigative findings and the review of 15 sexual abuse investigative case files.</p> <p>The facility did report one substantiated inmate on inmate sexual harassment investigative finding during the 12-month review period.</p> <p>115.78 (b) TDOC Index 502.05 provides the definition of disciplinary offenses to include acts committed within the intent of the PREA standards in addition to allowable imposed sanctions. Disciplinary actions for the following are included: 1) Indecent Exposure (Class A; Rape (Class A); Sexual Battery (Class A); Sexual Harassment (Class B); Sexual Misconduct (Class B or C).</p> <p>115.78 (c) TDOC Index 502.06. states that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar</p>

histories.

The Warden confirmed an inmate's mental health is considered when imposing disciplinary sanctions that includes the input from mental health staff. Additionally, imposed disciplinary sanctions are proportionate to the nature and circumstances of the abuse committed and the inmates' disciplinary histories and similar imposed sanctions of others.

Documentation review of the PREA Allegation Report and review of inmate-on-inmate sexual abuse and sexual harassment investigations, confirmed one (1) inmate on inmate sexual harassment allegation was concluded as substantiated during an administrative investigation. The aggressor received a disciplinary sanction of 30-day visitation suspension.

115.78(d) TDOC Index 502.06. states, If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Per an interview with the Behavioral Health Administrator, the facility does not offer any sexual treatment programs but does offer one-on-one mental health treatment sessions for both the male and female inmate population. Male identified as sex offenders may be referred to a Sexual Offender Treatment Program at the TDOC DeBerry Special Needs Facility, however they have the option to decline as they are not required to participate.

The female population to include aggressors and victims, are offered individual therapy, and counseling sessions. Additionally, the Avalon Center schedule weekly Sexual Assault Program Support Group meetings identified as "Survivors of Sexual Abuse" for the female population. All available services are optional.

115.78(e) TDOC Index 502.06 states an inmate may be disciplined for sexual contact with staff only upon finding that the staff member did not consent to such contact." The auditing team review of the one (1) substantiated staff on inmate sexual abuse investigations revealed disciplinary sanctions were not imposed on the victim.

115.78(f) TDOC Index 502.06 states, For the purpose of disciplinary action, a report sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation. The auditing team's review of the 12 sexual abuse investigations, identified one (1) inmate received a disciplinary sanction for filing a false sexual abuse allegation. The investigative staff concluded the unfounded finding based on the review of video monitoring.

115.78 (g) TDOC Index 502.06.2 states, "Any prohibition on inmate-on-inmate sexual activity shall not consider consensual sexual activity to constitute sexual abuse."

Based on a review of agency policies, PREA investigative case files, imposed

	disciplinary sanction, and interviews, the facility is compliant with all provisions of the standard.
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08/01/2020)</li> <li>3. TDOC 113.84 Clinical Assessments, Mental Health Appraisals, and Psychological Testing (Effective 01-15-2021)</li> <li>4. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10/21/2024)</li> <li>5. PREA Mental Health Referrals</li> <li>6. Site Observation</li> <li>7. Interviews with: <ol style="list-style-type: none"> <li>a. Chief Counselor</li> <li>b. Intake Counselors</li> <li>c. Behavioral Health Administrator</li> <li>d. Inmates Who Disclosed Prior Victimization During PREA Screening</li> </ol> </li> </ol> <p>115.81 (a) (b) (c) The TDOC Index 502.06, TDOC Index 113.84, TDOC Index 502.6.3 policies outline the mandate of the standard provisions. TDOC Index 502.06.3 and TDOC 502.06 states that, "If the screening process indicates that an inmate has experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a referral to a medical and/or behavioral health provider within 14 days of the screening.</p> <p>TDOC Index 113.84 states that each mental health appraisal conducted as part of the initial classification or reclassification process shall be documented on Mental Health Intake Appraisal, CR-3772. The PAQ indicated that 100% of inmates that reported prior sexual victimization were offered a follow-up meeting with a mental health</p>

provider.

The facility reported 100 % of inmates who reported prior sexual abuse and 100 % of inmates who have perpetrated sexual abuse were offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.

Per an interview with the Chief Counselor, and intake Counselors during the 72-hour risk screening process, the inmate's response to certain questions regarding their history of sexual victimization and that as an aggressor automatically creates a mental health referral. The inmates are often seen on the day of the referral and/or within seven (7) days of the inmate's arrival. This procedure was confirmed by the Behavioral Health Administrative.

The auditing team reviewed 138 TDOC Institutional Health Services Referrals (CR-3431) that documented the inmate's referral to mental health based on the risk screening assessment. The TDOC Institutional Health Services Referrals (CR-3431) documented the date of referral, date received by mental health and the date the inmate was evaluated by a mental health partitioner.

The auditing team randomly selected inmates through rosters identifying their risk screening score for confirmation of timely mental health referrals and completed evaluations for 81 - previously perpetrated sexual abuse and 56 - who disclosed prior sexual victimization. The review confirmed that all inmates were assessed by mental health on the day of receipt and/or within 11 days of the initial mental health referrals submitted by counselors. Thirty-four of the 56 inmates who disclosed prior sexual victimization accepted mental health counseling. Forty-two of the 81 inmates identified as previously perpetrated sexual abuse accepted sexual abuse counseling.

Interviews were conducted with four (4) inmates who reported prior sexual abuse during risk screening. These individuals identified meeting with mental health staff within the following: one (1) on the day of arrival; one (1) within 3 - 4 days; one (1) within one week; one (1) within two weeks.

115.81(d) TDOC Index 502.06.3, TDOC 502.06 indicates that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and behavioral health practitioners and other staff, as necessary, to make informed treatment plans and security and management decisions, including housing, bed, work, education, and programs assignments, or as otherwise required by Federal, State, or local law.

Per an interview with the Chief Counselor, the specific details related to sexual victimization or abusiveness risk screening are maintained in the Distribute App program with limited access to authorized staff only. Authorized staff (Counselors) are granted access based on their duties and through approval by the Associate Warden of Treatment with final approval by Central Office. All information pertaining to the sexual victimization or abusiveness that occurred within an institutional setting is also maintained in the Distributed App program. Staff have access for the identification of victims and abusers as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program

	<p>assignments. Inmates identified a victim, or an aggressor are never housed together.</p> <p>The auditing team were granted access to review the Distribute App that confirmed the electronic storage of inmate risk screening accessible to authorized staff through their personal login identification. Medical and mental health documentation is stored within secured medical files maintained in the medical department records office accessible to designated staff assigned to the area, the Health Services Administrative, Behavioral Health Administrative, and Charge Nurse on duty. Additionally medical and mental health records are also stored electronically with accessibility to authorized staff only by secured logins.</p> <p>115.81(e) TDOC Index 502.06.3 and TDOC Index 502.06 states Medical and Behavioral Health providers shall obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in the institutional setting. Additionally, interviews with both medical and mental health staff verified all inmates are required to sign a consent form during their initial assessment during the intake process and are reminded during each further treatment. All inmates sign a consent form when they are initially seen through intake. Those on the mental health caseload sign a consent form annually. However, those inmates who are not on the mental health caseload and are not seen regularly and are not required to update their consent form. The facility does not house individuals under the age of 18, therefore a separate consent form is not applicable. Each was aware of their duty as an employee with the TDOC, their professional license and that the state of Tennessee is identified as a mandatory reporting state.</p> <p>Based on a review of agency policies, mental health referrals, site observation, confirmation of secure electronic storage, secure room storage areas, and timely completion of submitted mental health referral, interviews and analysis, the facility is compliant with all provisions of the standard.</p>
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115.82	Access to emergency medical and mental health services
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (Effective 10-21-2021)</li> <li>4. TDOC Index 113.30 Access to Health Care (Effective</li> <li>5. TDOC 113.42 Communicable Disease (Effective 01/18/2024)</li> </ol>



6. Interviews with:

- a. Regional Director of Centurion
- b. Behavioral Health Administrator
- c. Director of Nurses
- d. Random Staff
- e. Inmates Who Reported Sexual Abuse

115.82(a) TDOC Index 502.06 states victims of sexual abuse must receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and behavioral health providers, according to their professional judgment.

In accordance with TDOC Index 113.30, Inmates within the physical custody of the TDOC shall have timely access to the appropriate level of health care on a 24-hour a day basis. Health services shall be provided with respect to the inmate's autonomy and privacy, and without discrimination.

Interviews with the Regional Director of Centurion and Director of Nurses confirmed victims of sexual abuse receive timely, unimpeded access to emergency medical treatment. All victims are seen immediately upon being notified as medical staff are on duty 24/7 and are available to the inmate population. If the inmate alleges sexual abuse, medical staff will only provide emergency care without disturbing any physical evidence. Medical staff would follow the recommendations made by the SANE/SAFE and/or attending doctor at the local hospital and continued services would be based on their professional judgment and scope of practice.

An interview with the Behavioral Health Administrator indicated the victim is seen as soon as possible after a reported sexual abuse allegation for crisis intervention services. Behavioral Health staff are normally scheduled 6:00 a.m. – 5:30 p.m., Monday – Friday. However, mental health staff would report to the facility during non-duty hours as needed. Victims of sexual abuse are normally seen within seven days, but it often depends on the varies of the situation when the victim would be seen. The nature of the services provided is based on the staff's professional judgement in determining a treatment plan.

The auditing team requested documentation of the timeliness of emergency medical treatment and crisis intervention services provided for 11 inmates who reported sexual abuse as recognized by the definition of the PREA standards.

The auditing team requested documentation to support inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Documentation of medical and mental health assessments were requested by the auditing team for 11 reporting victims of sexual abuse. The review identified the

following: medical assessments was not provided for four (4) of the 11 victims; Four (4) of the eleven were assessed on the day of reporting the allegation; One (1) was assessed the following day; One (1) was assessed seven (7) days after reporting; (1) was assessed five (5) months after the reported sexual abuse

The review confirmation of mental health evaluations for the 11 reporting victims identified the following: Five (5) were completed within seven (7) days; one (1) was completed within 12 days; one (1) was completed with 16 days; one (1) was completed within 22 days; one (1) was completed at four (4) months; one (1) was completed at five months; one (1) documentation was not provided.

Two (2) inmates reported sexual abuse within 72 hours that allowed the completion of a forensic examination during the review period. The victims were transported to the Cumberland Medical Center for forensic medical examinations by qualified medical practitioners. One (1) victim elected to not continue with the forensic examination after allowing a physical examination that identified no external injuries. The second victim elected to complete the completed forensic examination.

Documentation supports both inmates were assessed by institution medical on the day of the reported allegation.

Documentation of mental health evaluations indicated one victim was assessed on day three (3) after reporting. The second victim was identified on the mental health caseload and was evaluated on the day of reporting in addition to regular follow-up services.

Upon the facility's release of the OAS to the auditing team, it was discovered that numerous standard provisions were blank and did not contain the documentation submitted by the BCCX PREA Compliance Manager. This documentation was previously confirmed as submitted during a TEAM review between the BCCX PREA Compliance Manager and the auditing team. Notification of the technical issue with the OAS was reported by the TDOC Statewide PREA Coordinator to the PREA Resource Center (PRC). At the request of the TDOC Statewide PREA Coordinator and consent of the lead auditor, approval was granted by the PRC for the removal of the current BCCX OAS audit and creation of a new OAS audit. As such, the audit review was extended beyond the original schedule of completion to include the submission of the report within 45 days after the site visit. As corrective measures for compliance were implemented and placed into practice, the facility demonstrated success in meeting compliance of the standard during the extended audit phase.

Specially, the facility reported four (4) sexual abuse allegations and five (5) sexual harassment allegations prior to the submission of the report. Each of the four (4) inmates were assessed by medical on the day of reporting. The attending Shift Commander documented The TDOC Sexual Abuse Incident Check Sheet PREA 2003 noting the date and time, of the completed health services assessment for each inmate who reported sexual abuse. A review of their completed medical assessment confirmed all were documented by medical staff as completed on the day of the reported sexual abuse.

Additionally medical referrals were submitted for each of the four (4) inmates who reported sexual abuse on the day of the reported sexual abuse. The victims were documented as evaluated by mental health staff as the following: two (2) were assessed within four (4) days; one (1) was assessed within eight (8) days and one (1) was assessed within 11 days of reporting. Therefore, the facility has demonstrated the practice and procedures to meet compliance of the standard provision.

The auditing team conducted interviews with four (4) inmates who reported sexual abuse for confirmation of the timeliness of emergency medical treatment and crisis intervention services. Each of the inmates were identified as clients assigned to the mental health caseload. meetings are held.

One (1) victim reported sexual abuse to a mental health practitioner during a weekly session. However, they were not assessed by the medical staff.

One (1) victim reported they were not assessed by medical and attended a session with a mental health practitioner several months later.

One (1) victim stated they were evaluated by medical staff on the date of reporting the allegation and was seen by mental health within 7 days of reporting.

One (1) victim stated they were assessed by medical staff on the day of reporting sexual abuse and attended a session with a mental health practitioner within two weeks of reporting.

115.82 (b) TDOC Index 502.06.3 states, "If no qualified medical staff are on duty at the time of a report of a recent abuse is made, a correctional officer trained to render first aid may help as needed". Medical staff are on duty 24/7 daily at BCCX and medical services are provided as needed.

Interviews with random and specialized staff confirmed they were aware that medical staff would be notified of reported PREA allegations by the Shift Commander. Their description of actions taken included notifying their immediate supervisor, and/or the Shift Commander who would ensure proper protocol of notifying the medical staff, and the inmate would be escorted to the medical department.

Medical staff are scheduled 24/7 to provide medical services. However, the Shift Commander completes the TDOC Sexual Abuse Incident Check Sheet PREA of 2003, (CR 3776) for each reported sexual abuse while documenting the date and time of all notifications to include those to medical and mental health. This form is included in the investigative packet.

115.82 (c) TDOC Index 502.06.3 and 502.06 indicates that inmate victims of sexual abuse, while incarcerated, shall be offered tests for sexually transmitted infections and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care and as medically appropriate. Victims of sexual abuse that include vaginal penetration while incarcerated, are offered pregnancy tests and timely information about and access to all pregnancy-related medical services that are lawful in the community.

	<p>Per TDOC Index 113.42 in the event of positive STD results, measures must be taken to ensure the confidentiality of the information during the course of examination, treatment, follow-up, and surveillance. Inmates within the physical custody of the TDOC who are reported as contacts to the infected case (as determined by the health department investigator/interviewer) will be located and provided confidential examination, and treatment, as appropriate.</p> <p>BCCX is composed of three (3) three separate Sites 1, 2, and Unit 28. Site 1 and Site 2 are designated for the male inmate population. Unit 28 is designated for the female inmate population.</p> <p>Interviews were conducted with four inmates (4) who reported sexual abuse that include two (2) male and two (2) females. Zero inmates interviewed reported sexual abuse in nature that required testing for emergency medical treatment and/or testing for sexually transmitted infections prophylaxis as the reporting inmates were previously transferred prior to the site observation.</p> <p>Interviews with the two (2) females who reported sexual abuse indicated the reported sexual abuse did not warrant access to emergency contraception.</p> <p>The review of the 15 sexual abuse investigative case files confirmed that one (1) inmate who reported sexual abuse and received a forensic examination and was offered testing for HIV, STD and Hepatitis testing and follow-up. Documentation of the services provided was submitted for review.</p> <p>Interviews with the Regional Director of Centurion, and Director of Nurses, all victims of sexual abuse would be offered testing for sexually transmitted infections to include HIV, STD and Hepatitis in addition to follow up testing through lab work and medication as needed. The process would be initiated at the outside hospital if the victim is transported for a forensic examination and all follow-ups' services would continue at the facility by BCCX medical staff. The female inmate population would also be offered timely information about and timely access to emergency contraception.</p> <p>115.82 (d) TDOC Index 502.06.3 indicates that treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with the investigation. Interviews with the Regional Director of Centurion, Director of Nurses and Behavioral Health Administrator confirmed the inmate population does not incur any financial obligations for the treatment of services to include those provided within the facility and/or an outside medical facility to include the Cumberland Medical Center.</p> <p>Based on the view of agency policies, review of documented medical and mental health services, the facility implementation and practices in applying corrective measures to meet compliance during the audit phase, BCCX does meet all provisions of the standard.</p>
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	and abusers
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.03 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims (Effective 08-01-2020)</li> <li>3. TDOC 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. TDOC Index #113.30 Access To Health Care (Effective 1, 2022)</li> <li>5. National PREA Resource Center Specialized Training: PREA Medical and Mental Care Standards</li> <li>6. TDOC Index #113.42 Communicable Diseases (Effective 01-18-2024)</li> <li>7. Medical/Mental Health Logs</li> <li>8. Interviews with: <ol style="list-style-type: none"> <li>a. Regional Director of Centurion</li> <li>b. Director of Nurses</li> <li>c. Behavioral Health Administrator</li> <li>d. Inmates who reported sexual abuse</li> </ol> </li> </ol> <p>115.83(a) TDOC Index 502.06.3 and TDOC 502.06 outline the mandate of the standard provision. The facility offers medical and behavioral health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any confinement setting. The policies outline services required in the event of sexual abuse.</p> <p>TDOC Index #113.30 states Inmates within the physical custody of TDOC shall have timely access to the appropriate level of health care on a 24-hour a day basis. Health services shall be provided with respect to the inmate’s autonomy and privacy, and without discrimination. The Health Administrator shall generate institutional written procedures to ensure the routine and emergency health care services are accessible to all inmates in a timely manner.</p> <p>Medical and mental health staff completed the Specialized Training: PREA Medical and Mental Care Standard Course Training presented through the National PREA Resource Center that provides aid in responding to sexual abuse victims. The Specialized Training PREA Medical and Mental Car Standard Instructor’s Curriculum Guide and Lesson Plans covers four (4) modules identified as the following: Module 1- Detecting</p>

and Assessing Signs of Sexual Abuse and Sexual Harassment; Module 2 - Reporting; Module 3 - Effective and Professional Responses; Module 4 - The Medical Forensic Examination and Evidence Preservation.

115.83 (b) TDOC Index 502.06.3 and TDOC 506.2 dictates the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. TDOC facilities offer follow-up services within the correctional facilities.

Per interviews with both the mental health and medical practitioners, victims of sexual abuse would be offered follow-up services throughout their assignment at the facility and transfer to other TDOC facilities. Upon an inmate's release from TDOC custody into the community, Case Managers within each department arrange for continued treatment services within the inmate's release area. The Case Managers maintain a list of agencies and available services within each county throughout the state of Tennessee to arrange the appropriate treatment services and the inmates are seen within 24 hours of release from TDOC custody.

Interviews with four (4) inmates who reported sexual abuse indicated each were previously assigned to the mental health caseload where regular meetings are held. The reported sexual abuse did not include actions that met the requirement of follow-up medical services.

The auditor's review of sexual abuse investigative cases supported one (1) inmate who reported sexual abuse received follow-up services and treatment plan for sexually transmitted diseases. Documentation of offered mental health services was also provided. Arrangements for follow-up services upon release from TDOC custody to the local community were not applicable.

115.83 (c) TDOC 502.06.3 and TDOC 502.6 indicates the facility shall provide such victims with medical and behavioral health services consistent with the community level of care. Interviews with medical and mental health practitioners indicated the level of care provided to the inmate population is nothing less than that of an equal level of care to those individuals within the community.

115.83 (d) (e) TDOC 502.06 and TDOC 502.06.3 notes victim of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests and timely information about and access to all pregnancy-related medical services that are lawful in the community.

BCCX does house a female inmate population. However, the review of the sexual abuse investigative case files confirmed there were no reported allegations of sexually abusive vaginal penetration. Therefore, there were zero circumstances in which the offer of a pregnancy test and/or required access to pregnancy-related medical services was applicable.

Interviews with medical practitioners indicated pregnancy tests would be offered and upon receiving positive results, the victim would be transferred to the TDOC Debra K.

Johnson Rehabilitation Center where a full time OBGYN is on-site. The victims would be informed of their accessibility to all lawful pregnancy-related medical services as in accordance with the community.

115.83 (f) TDOC 502.06.3 and TDOC 502.6 states that inmate victims of sexual abuse, while incarcerated, shall be offered tests for sexually transmitted infections and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care.

Per TDOC Index 113.42 in the event of positive STD results, measures must be taken to ensure the confidentiality of the information during the course of examination, treatment, follow-up, and surveillance. Inmates within the physical custody of the TDOC who are reported as contacts to the infected case (as determined by the health department investigator/interviewer) will be located and provided confidential examination, and treatment, as appropriate.

Prophylaxis treatment with immune serum globulin (IG) must be made available or acute Hepatitis A contacts as clinically indicated and prescribed by the physician. A written order for contact precautions is required whenever patient care requires body-to-body or surfaces to-body contact (e.g., turning or bathing a patient, diapering, or caring for incontinent patients).

One (1) victim received a forensic medical examination during the review period. The examination was completed at the Cumberland Medical Center and the victim accepted testing for sexually transmitted infections and sexually transmitted infections prophylaxis during the visit. Documentation of testing and treatment for sexually transmitted infections administered to the victim was presented for review that include continued treatment. The services were initiated during the inmate's visit to the Cumberland Medical Center and continued care was provided at BCCX.

115.83 (g) TDOC Index 502.06.3 and TDOC 502.6 states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Per the medical and mental health practitioners, the victim would not suffer any financial cost for treatment services.

Interviews with four (4) victims of sexual abuse indicated at no time where they requested to provide payment for the medical and or mental health services received. However, none received services outside of the BCCX facility.

115.83(h) TDOC Index 502.06.3 and TDOC Index 502.06 state all facilities shall attempt to conduct a behavioral health evaluation of all known inmate-on-inmate abusers within 14 days of learning of such abuse history. They shall be offered treatment when deemed appropriate by behavioral health providers.

One (1) staff on inmate sexual abuse investigation was concluded as substantiated. There were zero inmate on inmate substantiated sexual abuse investigative findings during the review period. Therefore, an evaluation of the abuser was not applicable. Per the mental health practitioners, an inmate identified as the abuser has an option

	<p>of accepting participation in a sex offender program.</p> <p>Based on the review of policies, investigative case files, medical and mental health documentation, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06.2 PREA Allegations, Investigations, Sexual Assault Response Team (SART) (Effective 08-01-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. BCCX Sexual Abuse Incident Review Summaries</li> <li>5. Interviews with: <ol style="list-style-type: none"> <li>a. Warden</li> <li>b. BCCX PREA Compliance Manager</li> <li>c. Incident Review Team Member</li> </ol> </li> </ol> <p>115.86 (a) (b) (c) TDOC 502.06.2 and TDOC 502.06 outlines the mandate of the standard. The facility conducts a Sexual Abuse Incident Review Report, CR-3985, at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. Such reviews occur within 30 days of the conclusion of the investigation. The review team includes the Warden/Superintendent/designee, Associate Warden of Treatment/Deputy Superintendent/Assistant Warden at privately managed facilities, facility and OIC Institution Investigator, line supervisor, and medical/mental health professionals. These individuals are members of the Sexual Assault Response Team (SART) whom duties include but not limited to meeting monthly to discuss and review substantiated and unsubstantiated sexual abuse cases.</p> <p>The PAQ noted 10 criminal and/or administrative investigations of alleged sexual abuse completed during the 12-month review period that were followed by a sexual abuse incident review within 30 days, excluding only unfounded incidents. This number was later identified correctly as 5. However, an additional incident review was completed for a substantiated sexual harassment allegation and submitted for review. Therefore, the facility conducted five (5) sexual abuse incident reviews. One</p>



(1) sexual abuse allegation was concluded as substantiated and four (4) were concluded as unsubstantiated.

The incident reviews were documented as completed by members of the Sexual Assault Response Team (SART) that included to the following positions: BCCX PREA Compliance Manager, BCCX Institution Investigator; Mental Health Professional; Medical Professional, and BCCX PREA Coordinator/Associate Warden, SART members and Warden.

Per an interview with eh BCCX Warden, the facility's Incident Review Team is composed of members of the facility's Sexual Abuse Response Team (SART)) who meets monthly to discuss and review all reported sexual abuse and sexual harassment allegations within 30 days of the completed investigations with the exception of those identified as unfounded. SART does consist of supervisory staff as outlined within the standard.

115.86 (d) (e) TDOC 502.06.2 and TDOC 502.06 require the review team a) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; b) Consider whether the incident or allegation was motivated by race, ethnicity, gender identity, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or other group dynamics at the facility; c) Examine the area within the facility or facility grounds where the incident allegedly occurred to assess whether in the area may enable abuse; d) Assess the adequacy of staffing levels in that area during different shifts; e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; f) Prepare a report of its findings, including but not limited to, determinations made in accordance with the policies and any recommendations for improvement and submit such report to the Warden/ Superintendent.

The auditing team requested documentation of the incident reviews for all sexual abuse investigations with the finding of substantiated and/or unsubstantiated. One sexual abuse investigation was concluded as substantiated and four (4) were concluded as unsubstantiated. The review confirmed all were completed within 28 days of the investigation's conclusions.

The BCCX PREA Compliance Manager is also a member of the SART. She indicated SART meetings are held monthly where the members review and discuss in detail the circumstances of the investigations while identifying any areas of concern that could have contributed to the occurrence to include the following: possible blind spots and physical barriers, inaccurate staffing level, a need for change in policy or procedures, need for additional staff training, any possible circumstances that could have contributed to the assault to include the victim's status or perceived status as gay, transgender, intersex, based on their race and/or any gang affiliation. The Associate Wardens of Security and Treatment are included in the review and recommendation for approval that are forwarded to the Warden.

The BCCX Warden confirmed SART members are assigned to conduct the incident reviews during the scheduled monthly meetings. The SART is composed of the PREA

	<p>Compliance Manager, Institution Investigators, medical and mental health professionals, line staff supervisors, and Associate Wardens/BCCX PREA Coordinator. The incident reviews provide an opportunity to identify corrective measures needed to prevent further incidents of sexual assaults while identifying if there are better procedures that could have been done to include the need for a change in policy. The SART identifies whether additional cameras and/or mirrors are needed to eliminate blind spots, if physical barriers contributed to the assault, any concerns with the staffing level within the area during all shifts to include at the time of the occurrence, whether staff were performing their duties as assigned, and whether there is a need for additional staff training and/or a change in agency or facility policy and if the sexual assault 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. The final goal of the incident review is to identify if there is something that the agency could have done better to prevent further sexual assaults. The facility has 819 cameras that are monitored by TDOC staff to include the cameras funded by and are installed in TRICOR.</p> <p>The auditing team reviewed the sexual abuse Incident Review reports for the substantiated and unsubstantiated investigative findings that confirmed the SART members documented their assessment review of the area in the facility where the incident occurred to assess whether physical barriers to the area that may have enable abuse, video monitoring capabilities and/or need of, adequacy of staffing levels in that area during the time of the alleged assault and different shift, whether the allegations or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse, and/or consider the area of the occurrence; and the motivation consideration for the occurrence to include whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBT identification, status or perceived status, or gang affiliation, or was motivated or caused by other group dynamics of the facility may have enabled the abuse.</p> <p>Based on the review of the agency's policy, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
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115.87	Data collection
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 Prison Rape Elimination Action (PREA) Implementation, Education, Compliance (Effective 08-02-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> </ol>

4. 2023 Annual SSV PREA Report

5. Department of Justice Requested Submission Correspondence

6. Interview:

a. TDOC Statewide PREA Coordinator

115.87(a) (b) (c) (d) (e) (f) TDOC Index 502.06 policies outlines the mandate of the standard provisions.

115.87 (a) Staff shall collect accurate uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. The review of the agency policy confirms the definitions are included. TDOC shall aggregate the incident-based sexual abuse data at least annually. Per an interview with the Statewide PREA Coordinator, data is collected by the Decision Support: Research and Planning Development Department using the Department of Justice annual reporting format and the set definitions identified in TDOC Index #502.06.

115.87(b) TDOC shall aggregate the incident-based sexual abuse data at least annually. The Statewide PREA Coordinator shall ensure that data collected is securely retained. The Statewide PREA Coordinator shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.

115.87(c) The Statewide PREA Coordinator provided a copy of their most recent SSV report that demonstrated that the data collected by the facility is at least sufficient to answer all questions on the survey conducted by the Department of Justice, the Survey of Sexual Violence.

115.87(d) TDOC shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews.

115.87(e) The Statewide PREA Coordinator shall ensure that data collected is securely retained. TDOC shall make all aggregated sexual abuse data, from TDOC facilities and private facilities with which it contracts, readily available to the public at least annually through the TDOC website. The submitted SSV-2 report included substantiated sexual abuse allegations within the private contracted facilities.

115.87(f) Policies indicate that a report prepared by the TDOC Statewide PREA Coordinator shall be prepared utilizing the Department of Justice annual format. The facility provided a copy of 2023 SSV-2. Per the TDOC Statewide PREA Coordinator, the most recent SSV-2, which was for calendar year 2023. Due to difficulty in accessing the SVV program, TDOC was granted access on December 27, 2024, for the upload of the SSV-2 documentation. This information was confirmed through email correspondence between the TDOC Deputy Inspector General and the Survey of Sexual Victimization, Project Manager.

Based on the review of policies, SSV-2 Report, agency website, email correspondence, interviews and analysis, the facility is compliant with all provisions of this standard.

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> <li>1. BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 Prison Rape Elimination Action (PREA) Implementation, Education, Compliance (Effective 08-02-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. TDOC Agency Website</li> <li>5. Fiscal Year 2023 - 2024 Annual PREA Report</li> <li>6. Interviews with: <ol style="list-style-type: none"> <li>a. TDOC Statewide PREA Coordinator</li> <li>b. Agency Head Designee</li> <li>c. BCCX PREA Compliance Manger</li> </ol> </li> </ol> <p>115.88 (a) (b) (c) (d) The TDOC Index 502.06 policies address the requirement of this standard. The Directive indicates that TDOC staff shall aggregate incident-based sexual abuse data annually. Maintain review and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews. Ensure that all aggregated sexual abuse data is included in an annual report that includes an assessment of the Department's sexual abuse prevention, detection, and response policies, practices, and training; If applicable, identifies Department-wide problem areas or problems within specific correctional facilities; Is used to facilitate corrective action at the Department and correctional facility levels; compares the current calendar year's data and activities with that available from previous years; Assesses the Department's progress in addressing sexual abuse; and is approved by the Commissioner and made readily available to the public through the Department's website. Personal identifiers shall be removed prior to the data being made publicly available.</p> <p>Per an interview with the Agency Head Designee, the agency does use the incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training. As incidents are reported and investigated, trends are identified (i.e. regarding the time, location, staff involved etc.). As the trends are identified, processes and policies are refined to ensure the adequate addressing of any issues found. If there is a deficiency noted that can be corrected with additional training, it is arranged. If there is an issue that needs to be clarified, a memorandum of instruction is issued. The retaliation monitoring that staff conduct for victims and staff reporters was born out of trends observed. The Annual</p>

	<p>PREA Report is prepared by the TDOC Statewide PREA Coordinator and submitted through the Director of Compliance for the Commissioner’s review and approval. Once approved, the report is posted on the TDOC website.</p> <p>Per the BCCX PREA Compliance Manager, the agency does review data collected and aggregated pursuant to 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detections, and response policies, and training. As the facility PREA Compliance Manager she is responsible for gathering and submitting accurate information to the TDOC Statewide PREA Coordinator.</p> <p>TDOC Statewide PREA Coordinator confirmed the agency reviewed data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. When the data shows that corrective action measures are needed, immediate actions are taken to ensure PREA compliance, and the safety of staff and inmates. She completes an Annual Report that is submitted to the Commissioner for review. Once the Commissioner reviews and approves the report, it is posted on the agency’s public website. Typically, the agency’s Annual Reports does not contain sensitive information that needs to be redacted, as such information is excluded and would not be included in the report.</p> <p>The auditing team reviewed the agency’s website and verified that the TDOC Annual PREA Reported for FY 2023 – 2024 was published and made available to the public. The Annual Report included a comparison of fiscal years of 2022 -2023 and 2023 – 2024.</p> <p>Based on a review of policy, website, Annual Report, interviews and analysis, the agency is compliant with all provisions of this standard.</p>
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115.89	Data storage, publication, and destruction
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence Reviewed (documents, interviews, site observation)</p> <ol style="list-style-type: none"> <li>1.BCCX Completed Pre-Audit Questionnaire (PAQ)</li> <li>2. TDOC Index 502.06 Prison Rape Elimination Action (PREA) Implementation, Education, and Compliance (Effective 08-02-2020)</li> <li>3. TDOC Index 502.06 Prison Rape Elimination Act (PREA) (Effective 10-21-2024)</li> <li>4. TDOC agency website</li> <li>5. Interview with:</li> </ol>

a. TDOC Statewide PREA Coordinator

115.89 (a) (b) (c) (d) The TDOC Index 502.06 policies govern the mandate of the standard provisions.

The policies indicate the TDOC PREA Coordinator shall ensure that the data collected is securely retained. Per an interview with the TDOC Statewide PREA Coordinator, data is securely maintained for at least 10 years in a computerized system and accessible to authorized staff only.

The site observation and interviews with investigative staff confirmed the PREA investigative case files are stored electronically in the PREA Allegation System accessible only to agency investigators through password protection. Hardcopy files are secured in file cabinets within the investigative department with key entry accessibility limited to the assigned facility investigative staff.

Inmate medical and mental health files are maintained electronically with password protection. Individual hardcopy files that are secured in the medical records office with limited staff accessibility. The records office was observed manned by the medical records clerk.

The inmate risk screening documentation is only stored electronically and is accessible to designated staff based on their official role. All electronically stored data is password protected. Inmate individual files are secured in the record office that is manned by designated record office clerks.

115.89 (b) TDOC Index 502-06 states the TDOC Statewide PREA Coordinator ensures the data collected is securely retained. TDOC makes all alleged sexual abuse data, from TDOC facilities and private facilities with which it contracts, readily available to the public at least annually through the TDOC website.

The auditing team reviewed the TDOC website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html> and confirmed the publishing Annual Reports were accessible for viewing by the public.

115.89 (c) TDOC 502-06 states Personal identifiers are removed prior to the data being made publicly available. The TDOC Statewide PREA Coordinator maintains sexual abuse data collect for at least ten years after the initial collection unless federal, state or local law requires otherwise.

The auditing team reviewed the TDOC website at <https://www.tn.gov/correction/sp/prison-rape-elimination-act.html>, and confirmed personal identifiers were excluded from the reports.

115.89 (d) TDOC 502-06 states the TDOC Statewide PREA Coordinator maintains sexual abuse data collected for at least ten years after the date of the initial collection unless federal, state, or local law requires otherwise.

The following historical Annual PREA Reports were submitted for review: FY 13-14; FY 15-16; FY 17-18; FY 19-20; FY 22-23.

	Based on the review of TDOC policies, agency website, site observation and staff interview, the TDOC agency and facility is compliant with all provisions of this standard.
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>401. (a) This is the third year of the fourth audit cycle. The review of the TDOC agency website at <a href="https://www.tn.gov/correction/sp/prison-rape-elimination-act-.html">https://www.tn.gov/correction/sp/prison-rape-elimination-act-.html</a>, confirmed PREA Audit Final Reports were posted for each of the 11 correctional facilities under TDOC management throughout the third cycle and the second year of the fourth cycle.</p> <p>401. (b) The auditing team reviewed the TDOC website at <a href="https://www.tn.gov/correction/sp/prison-rape-elimination-act.html">https://www.tn.gov/correction/sp/prison-rape-elimination-act.html</a>, confirmed the agency ensured that at least one-third of agency facilities to include those operated by a private organization on behalf of the agency was audit each one year period. However, an Interim PREA Report was submitted for one (1) of the four (4) contract facilities. A copy of the report was shared with the auditing team for confirmation of completion.</p> <p>401. (h) The auditing team was provided with full access to all buildings and areas during the site observation. Areas observed during the site visit included but were not limited to the following throughout Site 1, Site 2 and Unit 28: all housing units, food service, medical, mental health, administrative offices, inmate program areas, maintenance, warehouse, mailroom, religious services, observation of inmate risk screening, inmate PREA orientation, visitation areas, and recreation.</p> <p>401 (i) The auditing team was provided with all requested documentation to include extensive files throughout the audit process to support a conclusion of compliance with PREA standards. The documentation review included sufficient sampling based on the size of the facility of case records, training records, investigative reports, medical and mental health documentation, housing assignment, and additional program information and documents.</p> <p>401.(m) The auditing team was provided with individual office space to conduct all inmate and staff interviews within private settings. Interviews were conducted with random and specialized staff in addition to random and target group inmates.</p> <p>401. (n) The PREA Audit Notice was provided to the facility by the Lead Auditor and noted as posted on January 8, 2025, an excess of six weeks prior to the site observation. The PREA Audit Notice was observed posted throughout the BCCX upon entering the front entrances at sites 1, 2, and Unit 28, to include visitation, recreation, food services, program areas, administration, segregation units, intake/</p>

	<p>diagnosis, mental health, medical, and all housing units accessible for viewing by inmates, staff, volunteers and contractors. Interviews with staff to include contractors and volunteers and the inmate population, acknowledged observance and awareness of the posting.</p> <p>An interview with staff assigned to the mailroom confirmed the inmates' outgoing mail is sealed by the inmates unless identified for monitoring due to security concerns per the Warden. Outgoing mail addressed to the PREA Auditors was treated as confidential mail and as legal mail. The auditing team received two written correspondences from the inmate population to participate in the interview process. These inmates were selected for interviews during random selection.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Per TDOC directives and standard requirements, TDOC ensures all final reports will be published on the agency's website accessible for viewing to the public. A review of the TDOC's website at <a href="http://www.tn.gov/correction/sp/prisonrape-elimination-act.html">www.tn.gov/correction/sp/prisonrape-elimination-act.html</a> contained the final 15 previous PREA reports completed for TDOC to include four (4) contract facilities during the previous cycles in accordance with PREA standards. One (1) PREA audit was documented as completed during the current cycle and was identified as posted. Per the TDOC Agency Deputy Inspector, and review, an interim report was submitted for one (1) contract facility was completed during the current cycle and pending. Therefore, the agency has demonstrated compliance with the standard.</p>



**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes



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

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

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

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

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

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

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d)</b>	<b>Inmate education</b>	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes



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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes



	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

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

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

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes



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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

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

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

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

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

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



<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

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

(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>