

PREA Facility Audit Report: Final

Name of Facility: Morgan County Correctional Complex

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 03/30/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Debra D. Dawson	Date of Signature: 03/30/2024

AUDITOR INFORMATION	
Auditor name:	Dawson, Debra
Email:	dddawsonprofessionalaudits@gmail.com
Start Date of On-Site Audit:	02/21/2024
End Date of On-Site Audit:	02/23/2024

FACILITY INFORMATION	
Facility name:	Morgan County Correctional Complex
Facility physical address:	541 Wayne Cotton Morgan Drive, Wartburg, Tennessee - 37887
Facility mailing address:	PO Box 2000, Wartburg , Tennessee - 37887

Primary Contact

Name:	Sonya Newport
Email Address:	Sonya.Newport@tn.gov
Telephone Number:	423-346-1314

Warden/Jail Administrator/Sheriff/Director	
Name:	Mike Parris
Email Address:	Mike.W.Parris@tn.gov
Telephone Number:	423-346-1311

Facility PREA Compliance Manager	
Name:	Sonya Newport
Email Address:	sonya.newport@tn.gov
Telephone Number:	O: 423-346-1314

Facility Health Service Administrator On-site	
Name:	Bowman Wright
Email Address:	BWright@Teamcenturion.com
Telephone Number:	423-346-1482

Facility Characteristics	
Designed facility capacity:	2294
Current population of facility:	1917
Average daily population for the past 12 months:	1825
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males

Age range of population:	19-82
Facility security levels/inmate custody levels:	Minimum Trustee to Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	587
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	126
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	315

AGENCY INFORMATION

Name of agency:	Tennessee Department of Correction
Governing authority or parent agency (if applicable):	
Physical Address:	320 Sixth Avenue North, Nashville, Tennessee - 37243
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Blake Pollock	Email Address:	Blake.H.Pollock@tn.gov
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Facility AUDIT FINDINGS

Summary of Audit Findings

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.

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.

Number of standards exceeded:

1

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Number of standards met:

44

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-02-21
2. End date of the onsite portion of the audit:	2024-02-23

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 and Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	2294
15. Average daily population for the past 12 months:	1825
16. Number of inmate/resident/detainee housing units:	44
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1955
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	20
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	886
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	475
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	18
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	5
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	3

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>11</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>56</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>826 inmates were identified as a mental health care level 2 or above while meeting psychritirc disability. 475 inmates were identified as low vision/blind that included those who were issued eye glasses; 18 inmates were identified as deaf/hard of hearing that were given/provided the opportunity to have hearing aids;</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>564</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>315</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>123</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>24</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Requested inmate rosters that identified the age, race, housing assignment, gender status and arrival</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	21
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	2

63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	4
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4

<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The review of the investigative casefiles and interviews with inmates identified in sexual abuse investigations revealed those placed in segregated housing was due to the introduction of contraband and/or other prohibited acts.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>18</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>22</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	4
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Interview with mental health staff employed as contract staff

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

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

Yes

No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
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Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	1	0	1	0
Staff-on-inmate sexual abuse	10	0	10	0
Total	11	0	11	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	2	0
Staff-on-inmate sexual harassment	8	0	8	0
Total	10	0	10	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	1	0
Staff-on-inmate sexual abuse	1	2	2	5
Total	1	2	3	5

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	00

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	1	1	0
Staff-on-inmate sexual harassment	0	3	4	1
Total	0	4	4	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	11
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<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>7</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>5</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There were zero sexual abuse and/or sexual harassment allegations submitted for criminal investigation
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

Standards
<p>Auditor Overall Determination Definitions</p> <ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
<p>Auditor Discussion Instructions</p> <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
	<p>Auditor Overall Determination: Exceeds Standard</p>
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. Morgan County Correctional Complex (MCCX) Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and Sexual Abuse Response Teams (SART) 3. MCCX 502.06. 2-1 PREA Allegations, Investigations, and Sexual Abuse Response Teams (SART) 4. TDOC Index 502.06 PREA Implementation, Education and Compliance 5. MCCX Organizational Chart 6. TDOC Inspector General Organizational Chart 7. Interviews with:

a. TDOC State-wide PREA Coordinator

b. MCCX 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 all 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 PREA Implementation, Education and Compliance, the agency also developed TDOC Index 502.06.2 PREA Allegations, Investigations, and SART Sexual Abuse Response Teams (SART). 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 MCCX Index 502.06.2-1 was established for standardized procedures to request, approve and govern the actions, reporting procedures, and authority of MCCX regarding PREA investigations and the role of the Sexual Assault Response Team (SART). The MCCX SART is a coordinated response team comprised of medical and mental health practitioners, facility investigators, and facility security leadership.

TDOC 502.06 indicates each PREA Site Coordinator and/or PREA Compliance Manager shall ensure unannounced PREA-free walk (inspection) is conducted monthly in accordance with 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 unannounced PREA-free walk (inspections) was presented for each month during the 12-month review period. The monthly inspections documented areas visited during the PREA-free walk, PREA educational discussions with staff, the review of PREA investigations, applicable incident reviews and findings, and completed retaliation monitoring, and document their review of standards 115.11 through 115.86 throughout the various monthly PREA-free walk inspections.

115.11(b) The agency has designated a TDOC State-wide PREA Coordinator with the Office of the Inspector General, the duties of overseeing the agency's efforts regarding maintaining compliance with the DOJ PREA standards in all its facilities. The agency's organizational chart shows the Director 2/ TDOC State-wide PREA Coordinator reports directly to the TDOC Deputy Inspector General. An interview with the TDOC State-wide PREA Coordinator confirmed he has the time to manage all PREA related responsibilities as PREA oversight is the primary focus of his job position. He coordinates the agency's effort to comply with the PREA standards in multiple ways that begin with providing training to staff on the implementation of the PREA standards in everyday work practices. He ensures all onsite PREA Compliance Managers and PREA Coordinators receive timely updates from the Department of Justice and the PREA Resource Center. Visits are scheduled at each facility to conduct walkthroughs and to assess the facility's overall PREA compliance. If any issues arise that may jeopardize a facility's compliance with the PREA standards, he immediately contacts the facility to discuss any obstacles they are facing that are creating concerns. Procedures are implemented to ensure that the facility complies with the PREA standards.

115.11(c) The Associate Warden of Treatment (T) at each TDOC facility also serves as the facility PREA Coordinator and reports directly to the Warden. The MCCX organizational chart identifies the MCCX PREA Compliance Manager (PCM) as a position who reports to the MCCX Warden. The MCCX PCM indicated the duties of the facility's PCM were a part of her normal duties. She ensures compliance with each standard, while utilizing the compliance instrument tool during monthly PREA free walks, testing the knowledge of staff regarding their understanding of PREA and their responsibility in respond to sexual abuse and sexual harassment, attending monthly meeting and discussing any concerns with meeting compliance with Associate Warden Treatment/Facility PREA Coordinator and Warden while applying corrective measures.

Based on the review of agency policies, organization charts, responsibilities of the SART that includes monthly PREA walk-throughs that identifies areas of concerns with the safety of staff and inmate in the prevention of sexual abuse and sexual harassment while applying corrective measures, interviews, and observation during the site visit, MCCX exceeds in meeting the mandate of the standard provisions.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

- 1. MCCX Completed Pre-Audit Questionnaire (PAQ)
- 2. TDOC Index 502.06 PREA Implementation, Education and Compliance
- 3. Contract for Confinement of Inmates with Core Civic
- 4. Interview with the following:
 - a. Agency Contract Administrator

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. The TDOC has entered into four (4) contracts for the confinement of inmates with a private agency (Core Civic). A copy of an agreement with the Tennessee Department of Corrections and Core Civic was provided for review. The contract outlines PREA Reporting information, definitions, prohibited acts, and other PREA-related requirements. The contract states 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 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. 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. An annual assessment of the PREA practices at each facility is monitored to ensure they are implementing the PREA standards properly. He also has access to all contract facilities' PREA allegation documentation, which allows him to ensure investigations are conducted promptly. Each of the four (4) contract facilities have completed its annual assessment and has corrected any issues found during the evaluation. 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 and one of the four has been completed during the current year cycle.

The TDOC contract facilities' most recent PREA audits were identified on the TDOC's website as the following: Hardeman County Correctional Facility on August 9, 2023; South Central Correctional Center on December 26, 2021; Whiteville Correctional

	<p>Facility on June 5, 2023; Trousdale Turner Correctional Center most recent posted PREA audit is noted as August 11, 2021.</p> <p>Based on the review of the agency’s website, contracts, PREA audit reports and staff interview, the facility has demonstrated compliance with all provisions of this standard.</p>
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115.13	Supervision and monitoring
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	<p>Auditor Overall Determination: Meets Standard</p>
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	<p>Auditor Discussion</p>
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	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education and Compliance 3. TDOC Index 506.22 Security Staff Assignments 4. MCCX Annual Staffing Review 5. Master Post Assignment Schedule 6. Post Assignment Rosters 7. Logbooks Documenting Unannounced Rounds. 8. Security Staff Daily Assignment Rosters 9. Observation while on-site 10. Interviews with: <ol style="list-style-type: none"> a. Warden b. MCCX PREA Compliance Manager c. Intermediate or Higher-Level Staff d. TDOC State-wide PREA Coordinator <p>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 MCCX 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</p>
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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 2294 inmates. Per the PAQ, the average daily number of inmates at MCCX during the review period was 1825. The facility's inmate count on the first day of the site visit was 1955.

Per the MCCX Warden, the facility does conduct an annual review and comply with the developed 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 developed the most recent Staffing Plan after the substantial modifications completion in 2009 that included additional housing for a sufficient increase in inmate population. Daily security rosters are developed by the Lieutenant and are monitored for compliance by the Major, Associate Warden of Security, and himself for each of the security shifts. Compliance is also monitored through daily rounds and video monitoring. He added that every effort is made to be consistent in the daily operations of the facility with inmate programs and activities to include during staff shortages and inclement weather. Staff reassignments and overtime are authorized as needed to ensure compliance. Video monitoring is a major component of the staffing plan and as the facility was previously granted funding for an upgrade of video monitoring equipment to include additional cameras, the project begun in February 2024. He and other management staff were involved in the determination of camera placement and the need for additional cameras. The project is scheduled for completion in 18 months (mid 2025).

Throughout the on-site tour, the Auditor noted the staffing level was adequate and prevalent throughout all areas where inmates are authorized by security and non-security staff. Areas of observation included housing units, program areas, work assignments, medical, education, recreation, warehouse, inmate movement, and food service during each shift. Various security staff were assigned overtime on each shift to ensure compliance with the staffing plan. Interviews with the inmate population indicated no concerns with insufficient staff coverage to include in housing, programs and/or work assignment areas.

115.13(b) TDOC Index 506.22 states when it becomes necessary for a shift commander to make temporary variations, they shall 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. The submission of a

Master Post Assignment Schedule, CR-3914 for 2023-2024 was submitted by the MCCX Warden to the Assistant Commissioner of Prisons identifying changes to critical and non-critical posts for review and approval on April 18, 2023.

The Warden indicated compliance with the Staffing Plan is monitored by himself, the Major, and Associate Warden of Security. At the exhaustion of reassigned staff from non-critical post, overtime is authorized to provide coverage on all critical post assignments.

The facility staffing plan is developed with adequate operational staffing levels in mind and a daily staff roster is reviewed to ensure adequate staff in accordance with the Master Post Assignment Roster and staffing plan. The daily rosters identify positions and the staffing requirements that require shift commanders to reconcile staffing deployment in accordance with the position requirements outlined in the staffing plan. Security staff are assigned eight (8) hour shifts as the following: 5:45 a.m. – 2:00 pm.; 1:45 p.m. – 10:00 p.m.; 9:45 p.m. – 6:00 a.m. and 8: 00 a.m. – 4:00 p.m. The Auditor selected a random sample of security daily rosters for each month during the review period. The review confirmed there were no deviations noted from the Master Post Assignment Roster and daily security rosters.

115.13(c) TDOC Index 502.06 states 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 MCCX Staffing Plan confirmed it was developed in accordance with all provisions of the standard.

Per State-wide PREA Coordinator, he is consulted regarding any assessments of, or adjustments to, the staffing plan prior to implementation while the Staffing Plan is reviewed annually. A copy of the most recent MCCX Staffing Plan was submitted for review. The Staffing Plan was reviewed by the Associate Warden of Treatment/Facility PREA Coordinator on May 26, 2023, acknowledged by the Chief of Security, Associate Warden of Security, and Warden on May 31, 2023, with a final review by the TDOC State-wide PREA Coordinator on June 29, 2023. Per the MCCX PREA Compliance, although she does not sign the review of the annual staffing plan, she is included in the review process.

115.13(d) TDOC Index 502.06 indicates that 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. The Security Shift Corporal and above, Unit Managers, and Administrative Duty Officer shall conduct and document unannounced rounds. The unit logbook shall be annotated with Unannounced PREA Inspection/Security Check when signing into the unit. The Auditor selected a random sample of housing unit logbook entries from various housing units, shifts and weekdays throughout the 12-month review period for review. The review confirmed unannounced rounds were conducted at a minimum once during each shift by supervisory staff. Interviews with supervisory staff indicated unannounced rounds are alternated regularly that prevents staff and the inmate

	<p>population anticipation of their arrival. Staff identified as alerting others of advance arrival of supervisory staff rounds would receive counseling followed by possible disciplinary actions for the continuation of such. Inmates also would also receive disciplinary actions of alerting others of supervisory rounds being conducted.</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 supports compliance with the staffing planning, observation of staffing level during site visit, and interviews with staff and the inmates, MCCX does meet all provisions of the standard.</p>
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115.14	Youthful inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.14.2 Housing, Programming of Youth Inmates 3. Observation during onsite tour 4. MCCX Inmate Population Roster 5. Interview with the following: <ol style="list-style-type: none"> a. MCCX PREA Compliance Manager <p>TDOC 506.14.2 indicates for the purpose of the policy only, juvenile offenders are persons between the ages of 16 and 18 who are sentenced and committed to the TDOC by court having adult criminal jurisdiction. Only the following facilities provide housing for juvenile offenders, after classification: (males) Northwest Correctional Complex - Site #2 (NWCX), females Debra K. Johnson Rehabilitation Center, and Lois DeBerry Special Needs Facility (DSNF) for males with health or mental health concerns. Non-adjudicated juvenile offenders shall not be accepted into any TDOC facility per TCA 41-4-131. Per review of the PAQ, observation during site visit, MCCX inmate roster and interview with the MCCX PREA Compliance Manager, the facility houses inmates between the ages of 19 - 82 years old.</p> <p>Based on the review of the PAQ, policy, observation, interviews and analysis, the facility does not house inmates under the age of 19 years old and therefore, has demonstrated compliance with all provisions of this standard.</p>

115.15	Limits to cross-gender viewing and searches
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Auditor Overall Determination: Meets Standard

Auditor Discussion

115.15(a) TDOC Index 502.06 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. The MCCX 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 Auditor reviewed all areas where visual searches are authorized to be conducted and confirmed the identified areas within the intake areas, visiting rooms, and segregation unit, provided privacy to included solid doors and/or doors with small covered windows during search procedures. Opposite -gender supervisors are not required to supervise or observe strip searches. Per staff and inmates, all visual searches are conducted by male staff only. Per the three (3) transgenders, two had elected to be searched by female staff while one had not identified a preference.

115.15(b) MCCX is designated as a male only facility, therefore it does not house female inmates. This provision of the standard is not applicable.

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 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. MCCX does not house female inmates. This provision of the standard is not applicable.

115.15(d) MCCX 112.08-1, outlines provisions that provides inmates with bathroom facilities that states inmates will be able to shower, perform bodily function, and change clothing without nonmedical staff of the opposite gender viewing them, except in circumstances that require immediate action. The housing units were observed to have doors and shower curtains in place that allow inmates to use both the bathroom and shower facilities without being observed by staff of the opposite gender.

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

Observation during the site visit, confirmed inmates assigned within the medical department to include those with direct observation for mental health, medical and suicide prevention were monitored by male staff.

Interviews with the inmate population did not reveal any concerns and/or circumstances in which inmates experienced opposite gender staff viewing during the

inmate's use of the toilet, showering, or changing clothes.

A review of the MCCX Housing Unit Officer Post Assignment includes "When staff of the opposite gender enters an inmate housing unit, you 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." Signage is noted on each housing unit entry door and/or wall that opposite gender staff must announce themselves when entering. This practice was observed during the tour. Staff acknowledge receipt of PREA training that includes Opposite Gender must announce when entering a pod and indicated the proper announcement is made. Interviews with random and targeted group inmates indicated the opposite gender announcement is only sometimes made. This information was shared with MCCX Warden, MCCX Associate Warden (Treatment)/Facility PREA Coordinator and was discussed during various shift briefings for 100% implementation. Confirmation of discussions were submitted during the post audit. "Female on Duty" plaques were developed during the site visit for placement in housing units of those inmates identified as deaf and hard of hearing viewing as applicable.

115.15(e) MCCX Index 506.6-1 states staff will not search or physically examine a transgender or intersex inmate solely for the purpose of determine the inmates' genital status.

The Annual PREA Lesson Plan section "Searching Transgender/Transexual Offenders" includes "No inmate will be searched solely for the purpose of determining the inmate's gender.

TDOC Index 506.06 Searches regarding strip searches of transgender and intersex inmate's states, "A strip search of a transgender or intersex inmate may not be conducted for the sole purpose of determining the inmate's genital status." If an inmate's status is unknown, it may be determined by conversation with the inmate, a review of available medical records, or as part of a broader medical examination conducted in private by a licensed medical professional. Policy states 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 same gender to conduct the search. If the subject of the search, then objects based on gender, an officer of the person's apparently preferred gender shall conduct the search. All staff interviewed reported the facility prohibits staff from searching or physically examining transgender or intersex inmates for the sole purpose of determining genital status.

The facility reported three (3) transgenders, and each was interviewed during the site visit. Zero inmates were identified as intersex. Two transgenders had elected to be searched by female staff and one indicated she had not identified a preference. Neither transgender reported being searched solely for the purpose of identifying their genital status.

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. 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 security staff training at the academy. The training includes frisk search/pat searches, strip searches, searching residents identified as transgender, intersex, transsexual, body cavity searches, male and inmates/residents. All class participants are required to participate in a skill practice section while paired with a staff member of the same sex. Additionally, the Annual PREA training course includes training for Searching Transgender/Transexual Offenders that is mandated for all employees. MCCX houses male inmates only. Female staff are authorized to conduct frisk searches of the male inmates but are prohibited from conducting visual searches and/or body cavity searches of the male inmates and/or touching of the genital area of the male inmates. Strip searches are performed exclusively by staff of the same gender. However, policy allows inmates identified as transgender and/or intersex to identify the gender of staff they feel comfortable completing the pat-search and/or visual/strip search. The Pre-Audit Questionnaire noted that 100% of staff have received the appropriate training. Random staff interviews indicate they received training regarding cross gender, transgender, and intersex search procedures. Documentation of staff completion of Search Training was provided for 73 new hires and 78 staff annual refresher training through the Learning Management System (LMS) as requested by the Auditor.</p> <p>Based on the review of agency and facility policies, Search Lesson Plan, Annual PREA training lesson plan, confirmation of search training by new hires and during annual refresher training, specific duties outlined in housing unit 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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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ)

2. TDOC Index 502.06 PREA Implementation, Education, and Compliance
3. MCCX Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities
4. TDOC Index 103.10.1 Title VI – Limited English Proficiency (LEP)
5. Translation Services Contract
6. Observation During Site Visit
7. Interviews with:
 - a. Agency Head Designee
 - b. Random Staff
 - c. Inmate Population

115.16 (a) (b) TDOC Index 502.06 states staff shall 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. Agency policy also requires that, except under limited circumstances where a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of the first responder duties, or the investigation of an inmate's allegation; inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive for other inmates.

Per 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 an 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 understands (i.e. sign language for deaf inmates. For the LEP offenders, there are two state contractual agreements for service in addition to in-house staff translators available to translate in various languages.

The TDOC Plan for Providing Inmates with Limited English Proficiency Access to Programs and Activities as required by the Civil Rights of 1964 for the MCCX was presented for review. The Plan detail procedures available to determine and meet the needs of inmates upon arrival to ensure Limited Proficient inmates are provided

appropriate services and programs. Procedures are outlined for each of the following: Intake assessment; language assistance measures during orientation; classification assignment and hearing; medical /mental health services; disciplinary procedures; grievance procedures; education /programs; housing assignments; court appearances; parole hearings; program available at other TDOC facilities; inmate interpreters; PREA education; staff training; staff contacts; notice of available languages services; monitoring and updating. The Plan documents MCCX staff with bilingual abilities in Spanish who are assigned to provide translation services in the Spanish language. The facility's Plan includes a list of all inmates identified as LEP.

MCCX provides translation services to the inmate population through usage of the University of Tennessee Language Center, Bridges for the Deaf and Hard of Hearing, and the Contract Administration as identified in the MCCX LEP Plan.

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. The plan lists outside agencies that are available to provide a variety of services for inmates with a range of disabilities to include LEP. A list of bilingual staff is identified within the plan and updated as needed. The inmate will be offered a Language Identification Guide to make the determination. An interpreter will be provided through utilization of institution staff, volunteers, or contract interpreters to determine the extent of their proficiency. The staff member will document the provision of an interpreter by name on E-TOMIS Contact Notes (LCDG). At orientation inmates are provided a copy of the Inmate Orientation Handbook that covers the agency's zero-tolerance policy. Additionally, inmates also participate in a video that specifically covers PREA topics to include the agency's zero-tolerance policy; how to report sexual abuse and sexual harassment; agency policy regarding sexual abuse and sexual harassment; and inmate rights regarding sexual abuse, sexual harassment, and retaliation. The video presentation has audio and is also available in Spanish. Sign language services are available through Statewide Visual Communication Services. An Interagency agreement between the State of Tennessee Department of Corrections and University of Tennessee - Tennessee Language Center effective October 1, 2020, through October 1, 2025, to provide Live and Document Translation Services was presented for review.

Per the MCCX Inmate Rules and Regulations Handbook, Inmates with limited English who needs assistance are to contact the LEP Coordinator, or the principal for available interpreting services.

The facility provides Video-Remote Interpreting -Interpreter Services through LION BRIDGE for inmates identified as deaf. This service was utilized by the Auditor during

an interview with a deaf inmate.

115.16 (c) TDOC Index 502.06 states, "Inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates, except under limited circumstances where a delay in obtaining an effective non-inmate interpreter would compromise the inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegation. Contact Note LCDG shall be posted identifying the name of the assistor and their organization. The Auditor presented a variety of scenarios to 18 random staff during the interview process. Staff indicated they would not utilize an inmate to provide translation services for another when reporting an allegation of sexual abuse and/or sexual harassment. Staff were aware of the official staff members assigned to provide translation services as needed as they are also identified in the MCCX LEP Plan. The MCCX LEP Plan notes the vocational instructor and correctional officer who provide bi-lingual translation in the Spanish Language.

The Auditor conducted interviews with inmates identified with the following disabilities: one (1) Limited English Proficient; one (1) cognitive disability; one (1) deaf; one (1) hard of hearing; two (2) low vision; two (2) physical disability. Interviews with each of the identified inmates indicated they were given PREA education in a manner they could understand without difficulty. Each also confirmed their knowledge and understanding of methods to report sexual abuse and sexual harassment.

An interview was conducted with an LEP inmate whom first language was Spanish. The MCCX Vocational Instructor served as a translator during the interview while stating he often provides translation services for the inmate population. The LEP inmate indicated he was given written PREA educational material in the Spanish language and he is aware of the PREA posters and bulletins posted throughout the facility in his language that he can read and understand.

An interview was conducted with an inmate identified as deaf through usage of the Video-Remote Interpreting service. He acknowledged he was provided PREA education upon arrival, he has access to a video remote translation service in his housing unit, and he has no difficulty reading and understanding in written format with staff and other inmates. He also acknowledged he has access to the video relay service for deaf inmates within his assigned housing unit. As confirmed by the deaf inmate and the MCCX PREA Coordinator, the MCCX PREA Coordinator provided additional aid to him upon and since his arrival at MCCX while monitoring the accessible resources to him on a regular basis.

Based on the review of policies, LEP lesson plans, identified facility staff available for translation services, resources for inmates with various disabilities through the established contract agreements, observation during the site visit, and interviews with staff and inmates, the facility has demonstrated compliance with all the provisions of this standard.

115.17	Hiring and promotion decisions
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. MCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 301.04 Job Requirements
3. TDOC PREA Self Declaration Forms
4. Hiring and Promotional Records
5. Criminal History Background Records Check Documentation
6. Interview with:
 - a. Administrative (Human Resources) Staff

115.17(a) (b) (c) (d) 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 attempt to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse, or;) has been civilly or administratively, adjudicated to have engaged in activity described in (b) above. d) The department shall consider any incident of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The Department shall consider any incidents 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 standard provision.

Per the Human Resource Administrator, applicants are 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 scheduled annual background check. Volunteers are also required to submit PREA Self-Declaration of Sexual Abuse/Sexual Harassment, CR-3819. 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, staff utilize the NCIC program for all background investigations for all TDOC new hires prior to the offering of employment and annually during each staff member's birthday month. The initial background checks for contract workers are provided to the MCCX by their contracting agency. Contractors background checks are completed annually in July by MCCX human resource staff.

Contract workers' background investigations are initiated by their employment agency and conducted through the Tennessee Bureau of Investigation. Upon the completion of the background checks, the investigative findings to include in the summary page are forwarded to the facility's Human Resource Department. All staff to include contractors, are required to complete a PREA Self-Declaration form. This information is forwarded to the Human Resource department by the contracting agency prior to approval for employment at the facility. Annual background checks are completed on all contract staff annually in July by facility human resource staff.

Per the PAQ 202 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) contracts (Centurion and Aramark) for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

MCCX identified 315 volunteers who were approved to provide services for the inmate population. Volunteer background checks are completed by the Central Office and returned to the facility.

The Auditor requested a random selection of the following for confirmation of the standard provisions for the completion of background checks: ten (10) new hires; eight (8) contract workers; and ten (10) volunteers. The Auditor's 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 Auditor randomly selected eight (8) staff for completion of annual background checks for confirmation of their annual background checks in accordance

with the agency policy and the standard provision. Documentation supporting a criminal background investigation was completed through the NCIC for each within the 12-month review period although their employment had exceeded numerous years with the agency.

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 Auditor 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 ten (10) new hires; eight (8) contractor workers; ten (10) volunteers; eight (8) staff annual background checks; and four (4) staff selected for promotions. The review confirmed the agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates. Each of the reviewed files contained the submission of the completed PREA Self Declaration for Sexual Abuse /Sexual Harassment, CR-3819.

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 work history and document when the requested information was forwarded.

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, MCCX does meet all provisions of the standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index #108.01 Facility Construction, Renovation, and Physical Plant Maintenance 3. Interviews: <ol style="list-style-type: none"> a. MCCX Warden b.TDOC Agency Head Designee <p>115.18(a) (b) TDOC Index 108.01 states, “When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the Department shall consider the effect of the design, acquisition, expansion, or</p>

modification upon the Department’s ability to protect inmates from sexual abuse. when installing or updating a video monitoring system, electronic surveillance system, or tother 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.”

An interview with the Agency Head/Designee indicated all modifications require request and approval. Any request submitted must also account for any additional cameras or mirrors that will be necessary to add to the area to ensure sexual safety. 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.

The Warden explained when planning substantial modifications to facilities the agency considers PREA requirements in relation to the prevention of blind spots within the building and operational plans. There has not been any substantial expansion of the existing facility since 2009.

He added, the facility was previously granted funding for a major video monitoring upgrade that includes the additional installation of more than 200 cameras. The project began in February 2024 and is scheduled for completion in 18 months. Camera placement did include the consideration to enhance the safety of inmates from sexual abuse. The Auditor observed the beginning stage of the project during the site visit.

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

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. National Protocol for Sexual Assault Medical Forensic Examinations Adults/ Adolescents 3. TDOC Office of Investigation and Compliance Evidence Operational Protocol: 08 alleged Sexual Abuse 4. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy and Community Support for PREA Victims 5. TDOC Index 502.06.2 PREA Allegations, Investigation and Sexual Abuse Response

Team (SART)

6. MOU with The Avalon Center

7. Appointment of MCCX Victim Advocate and Confirmation of Training

8. Interviews with:

a. University of Tennessee Medical Center Charge Nurse

b. MCCX Facility Victim Advocate

c. The Avalon Center Domestic Violence Case Manager

d. Office of Investigations and Conduct Investigators

e. MCCX PREA Compliance Manager

115.21 (a) TDOC Index 502.06.2 state it is the policy of the TDOC to investigate all PREA sexual abuse and sexual harassment allegations in a timely, efficient, and confidential manner in accordance with federal guidelines (Title 28 CFR Part 115). The 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 promptly, thoroughly, and objectively, including third-party and anonymous reports. The Agency does employ investigators who have received special training in conducting sexual abuse investigations in confinement settings. The Office of Investigations and Conduct Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence. An OIC Institution Investigator is assigned to conduct administrative investigation at all TDOC facilities. The OIC Special Agent is authorized to conduct administrative and criminal investigations. Interviews with the Warden, OIC Special Agent and OIC Institution Investigator indicated both administrative and criminal investigations are conducted by TDOC OIC Investigators.

Operational Protocol #008 dated July 27, 2019, identifies the Notification and Response Procedure stating "It shall be the protocol of the Investigations Unit to appropriately respond to incidents and/or allegations of sexual abuse which occur on TDOC institutional property. When notification is made in a timely manner, Agents will respond as the situation mandates to the site of examination for the purpose of evidence collection and preservation. The Department's response to sexual assault follows the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," dated April 2013, or the most current version. (1) Upon notification of alleged sexual abuse within any TDOC institution, the institution shall immediately have the alleged victim examined by qualified medical personnel. After the initial examination and collection of clothing for potential evidence, the alleged victim will be transported to the nearest Emergency Room. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit provided by TBI. This kit will be retained by the ER staff until received by an IU Agent. (2) The

responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. (3) Upon evaluation of all information and evidence obtained, IU staff shall deliver evidence obtained from the investigation to the TBI Crime Laboratory for evaluation as possible evidence.

115.21(b) TDOC has developed an appropriate protocol that coordinates with the most recent edition of the "A National Protocol for Sexual Assault Medical Forensic Examination Adults/Adolescents Second Edition U.S. Department of Justice's Office on Violence Against Women" publication. The TDOC Operation Protocol was revised on July 27, 2019. The Notification and Response Procedure identifies the following: (1) It shall be the protocol of the Investigations Unit to appropriately respond to incidents and/or allegations of sexual abuse which occur on TDOC institutional property. When notification is made in a timely manner, Agents will respond as the situation mandates to the site of examination for the purpose of evidence collection and preservation. The Department's response to sexual assault follows the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," dated April 2013, or the most current version. (2) Upon notification of alleged sexual abuse within any TDOC institution, the institution shall immediately have the alleged victim examined by qualified medical personnel. After the initial examination and collection of clothing for potential evidence, the alleged victim will be transported to the nearest Emergency Room. The ER physician or SANE will perform an examination utilizing a sexual assault evidence kit provided by TBI. This kit will be retained by the ER staff until received by an IU Agent. (3) The responding Agent shall process the alleged crime scene if feasible, receive the evidence from the attending medical staff, conduct an interview with the alleged victim and suspect at the earliest convenience, and determine the appropriate action to best facilitate the investigation. (4) Upon evaluation of all information and evidence obtained, IU staff shall deliver evidence obtained from the investigation to the Tennessee Bureau of Investigations (TBI) Crime Laboratory for evaluation as possible evidence. (5) The Agent will present all evidence in the case to the appropriate District Attorney for review, adoption, and prosecution of any suspects.

115.21 (c) TDOC 502.06.3 indicate upon receiving a report of an alleged sexual abuse within the 72-hour time frame 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 of 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 MCCX PREA Compliance Manager, medical and mental health staff each confirmed MCCX is scheduled to utilize the University of Tennessee Medical Center in Knoxville, TN., for all forensic examinations. One inmate who reported sexual abuse was transported to the University of Tennessee Medical Center for a forensic medical examination. Per the MCCX PREA Compliance Manager and MCCX PREA Coordinator, results of the oral swabs testing remain pending.

An interview with the Emergency Room Charge Nurse at the University of Tennessee Medical Center, confirmed that although a SANE/SAFE Nurse is not assigned permanent shifts at the hospital, they are scheduled on-call 24-7 and are required to report within one hour of notification.

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 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 State-wide PREA Coordinator, the agency is in the process of revising the established MOU with The Avalon Center has the center is available to offer additional services since the establishment of the current MOU. The MCCX Behavioral Health Administrator is a Licensed Professional Counselor and serves as the facility's victim advocate.

Per the MCCX PREA Compliance Manager, in addition to victim advocate services available through The Avalon Center, the Behavioral Health Administrator has been appointed to serve as the MCCX PREA Victim Advocate. A memorandum drafted by the MCCX Warden identifying the appointment of the MCCX PREA Advocate was provided for review. The memorandum noted that in the event a victim advocate was not made available through the outside hospital, SANE Personnel, and the Avalon Center (which inmates may access by phone confidentially), the facility's victim advocate would fill the role of victim advocate when request by the inmate.

Per the Avalon Center Domestic Violence Case Manager, and Facility Victim Advocate,

victim advocate services have been requested from the inmate population via telephone. However, interviews with four (4) inmates identified as victims of sexual abuse indicated neither elected to seek victim advocate services.

115.21(e) TDOC Index 502.06.3 indicates a PREA victim advocate shall be made available to the alleged victim, when requested, to accompany and support the victim through the forensic medical examination and the investigation process. A designated staff member (Behavioral Health Administrator) has been appointed to serve as the facility's victim advocate. In addition to his license, certification, extension professional education in psychology, he has completed the review of the "Meeting the Needs of Prison Rape Victims, A technical Assistance Guide for Sexual Assault Counselors and Advocates." The educational material is designed for rape crisis counselors and advocates. Information identifying the facility's victim advocate is posted on all inmate bulletin boards and on departmental bulletin boards accessible to the staff and the inmate population.

The TDOC Office of Investigations and Conduct is responsible for conducting all administrative and criminal investigations of sexual abuse.

The MCCX PREA Compliance Manager identified the established MOU with The Avalon Center that outlines the available services to the inmate population. The contact information to The Avalon Center and Just Detention International is posted on bulletin boards accessible to all inmates and staff in addition to the inmate handbook. Additionally, the phone number *9555 is a direct line to the Avalon Center and is posted above the inmate telephones. The calls are identified as free and unmonitored. Per an interview with the Avalon Center Domestic Violence Case Manager, a victim advocate is available 24/7 daily to provide advocacy services to the victims within seven (7) counties throughout the state of Tennessee and services are available to inmates housed at the MCCX. Upon an inmate reporting to the hospital for a forensic examination, the Victim Advocate is required to respond within one hour of notification. Services are provided based on the request of the victim to include being present during the examination and/or remaining outside the examination room. The attending advocate offers emotional support while explaining the examination process. She indicated although the victim may continue with advocacy services upon departing the hospital, the inmates would receive continued services via telephone and/or via mail. However, continued in-person victim advocacy services are available upon the inmate's release within one of the seven (7) Tennessee counties. She also indicated the Avalon Center has received numerous calls from the MCCX from inmates for emotional support due to being victims of sexual abuse to include prior to incarceration and as a reporting avenue. She added, the information provided by the inmate/victim cannot be shared with others to include TDOC staff unless authorization is granted by the inmate.

Information identifying the facility's victim advocate was observed posted throughout the facility on all inmate and departmental bulletin boards accessible to the staff and the inmate population. An interview with the Facility Victim Advocate who is also the Behavioral Health Administrator, indicated he has regularly served in the role of a victim advocate. He meets with each inmate who reports sexual abuse and

encourages them to become regular patients on the mental health caseload if they are not currently. He conducts one-on-one counseling sessions with those who accept the services. Additionally, when the victim refuses to accept services, they are monitored for behavioral changes to include any display of trauma.

The Auditor conducted interviews with four (4) inmates who reported and/or who were identified in reported sexual abuse investigations to include alleged sexual penetration with staff. Each acknowledged their awareness of victim advocates services through observation on PREA posters and on the bulletin boards and meetings with the Behavioral Health, however all stated they elected to not utilize victim advocate services.

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.

115.21. (h) The Auditor confirmed through the review of The Avalon Center agency's website at www.avaloncentertn.org the history of the agency and the available services offered to victims of sexual abuse. The designated staff member who serves as the facility victim advocate is a Licensed Professional Counselor with certification as a Mental Health Services Provider. Additionally, he completed the victim advocate training presented by the Pennsylvania Coalition Against Rape (PCAR). Confirmation of the appropriate victim advocate training exceeds the requirements to serve as a facility victim advocate.

Based on the review of policies, established MOU with appropriate available services, designated facility victim advocate and confirmation of appropriate training, PREA investigative case files, and interviews, the facility has demonstrated compliance with all the provisions of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review): <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigation and SART 3. PREA Allegation Report 4. PREA Investigative Case Files 5. Interviews with:

a. OIC Institution Investigator and Special Agent

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. The facility shall coordinate actions taken in response to an incident of alleged sexual abuse or harassment among staff first responders and Sexual Assault Response Team (SART), which includes medical and behavioral health practitioners, institutional investigator, and facility leadership. These investigations shall be conducted within 72 hours of receiving the allegation. Interviews with the OIC Institution Investigator and OIC Special Agent indicated normally the initial investigation begins on the date of the reported allegation.

Pursuant to TDOC Index #502.06.02 and interviews with the Warden, OIC Institution Investigator and OIC Special Agent confirmed all allegations of sexual abuse and/or sexual harassment are investigated by investigators assigned to the OIC of Investigations and Conduct within the Tennessee Department of The OIC Institution Investigators are authorized to conduct administrative investigation only. Upon the determination of the possible criminal acts committed, the OIC 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.

Twenty-one (21) PREA allegations were reported throughout the 12-month review period of November 1, 2022, through October 30, 2023. The reported allegations were identified as the following: ten (10) staff on inmate sexual abuse; eight (8) staff on inmate sexual harassment; one (1) inmate on inmate sexual abuse; two (2) inmates on inmate sexual harassment. The Auditor elected 16 investigations for

	<p>review that included eleven sexual abuse investigative case files. Investigators assigned to the Office of Investigations and Conduct completed the investigations. One (1) staff member on inmate sexual abuse allegation remained pending. One (1) staff on inmate sexual abuse allegation was referred for criminal prosecution however, it was declined by the District Attorneys' Office.</p> <p>The Auditor reviewed the TDOC website at www.TennesseeDepartmentofCorrections.com. 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.</p> <p>115.22(c) (d) (e) TDOC is responsible for conducting all sexual abuse and sexual harassment investigations. Therefore, this provision is not applicable.</p> <p>Based on the review of policies, investigative case files, PREA Allegation Log, interviews, TDOC website, and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 110.05 In-Service Training 3. TDOC Index 502.06 PREA Implementation, Education, and Compliance 4. Tennessee Correctional Academy Program Curriculum/ PREA Inmate Sexual Abuse/ Assault 5. Employee PREA Training Acknowledgement Forms 6. PREA Training Attendance Rosters 7. Observation During Site Visit 8. Additional Refresher PREA Training 9. Interviews with:

a. Random and Specialized Staff

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 State-wide PREA Coordinator and TDOC General Counsel. The TDOC Correction Academy Program Curriculum Lesson Title PREA Inmate Sexual Abuse/Assault a 2-hour Pre-Service and/ In-Service annual training course is used for training and covers 10 topics specified in this provision. 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 Tullahoma 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 to Prison Rape Elimination Act (PREA) (2 hour)." In-service annual PREA training is conducted during the classroom sessions and on-line 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, the training is required to be completed during the classroom session. 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.

Interviews with 18 random in addition to specialized staff indicated PREA training is required to be completed during new hire orientation and annually during in-service in addition to their awareness of the PREA posters and bulletins throughout the Complex. 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." Training is designed for officers to be able to function in both female and male facilities. MCCX houses male residents only; however, staff may transfer to any facility in the system.

115.31(c) The Department shall provide each employee with refresher training annually to ensure that all employees know the Department's current sexual abuse and sexual harassment policies and procedures. All staff are required to complete PREA training annually during in-service training in classroom sessions and on-line 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, the training is 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 Auditor also 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 Action Steps for Allegations" that include the immediate responsibilities of a first responder. 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 signatures noting "I acknowledge that I have received training on the PREA and understand the training" on the TDOC Employee PREA Training Acknowledgement Form. Five hundred eighty-seven staff were identified as employed at the facility during the review period. Confirmation of PREA training was submitted for an excess of 170 TDOC employees through signatures on the Employee PREA Training Acknowledgement CR-3965 forms in addition to training course attendance rosters. Staff acknowledged their receipt of the training in addition to their understanding of the training. The completion of the training is monitored and maintained in the employee's training file in addition to electronically stored in the Collaboration Training database by the Training Specialist.

The Auditor utilized a variety of scenarios during the interview process with random and specialized staff. The Auditor identified additional in-person PREA training would be beneficial to a variety of staff based on their responses to the presented scenarios. Refresher training was provided by MCCX supervisory staff and by the TDOC State-wide PREA Coordinator during the post audit phase. Staff rosters were provided that confirmed staff receipt of refresher PREA training during the post audit phase.

Based on the review of policies, training lesson plans, training records, refresher training, interviews and analysis, the facility has demonstrated compliance of this standard. The facility provides employees PREA training during new hire orientation and refresher PREA training annually rather than the standard provision requirement of every two years. As recommended by the Auditor during the site visit, additional refresher training was provided by MCCX supervisory staff and by the TDOC State-wide PREA Coordinator during the post audit phase. PREA education is also located on bulletin boards and throughout the complex, and staff are issued PREA refresher cards that are required to maintain in their possession as a reference in response to PREA allegations. Therefore, the facility does meet the standard provisions.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. MCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 110.01 Pre-Service (Basic) Training and Employee Orientation
3. TDOC Index 502.06 PREA Implementation, Education, and Compliance
4. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement
5. TDOC Website
6. PREA Training Records and Rosters
7. PREA Cards
8. Observation During Site Visit/ PREA Posters
9. Interviews with:
 - a. Religious Services Volunteer
 - d. Various Contract staff

115.32 (a) (b) (c) Pursuant to TDOC #502.06 Each facility shall ensure that all volunteers and contractors who have contact with inmate have been trained on their responsibilities under TDOC's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Volunteers shall receive their PREA Training in accordance with Policy #115.01. Training acknowledgement for volunteers and contractors shall be documented through signature, on CR-3965, noting that they understand the training received.

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

TDOC Index 502.06 states that employees of privately managed facilities shall receive PREA training as part of the pre-service and in-service training requirements established by the contractor and approved by TDOC. The Director of Contracts Administration shall ensure that all new TDOC contracts or contract renewals include language requiring compliance with the PREA standards.

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://apps.tn.gov.vser-app/institution>. TDOC volunteers were required to complete PREA training on-line (one and two) prior to approval for entry in addition to other mandatory courses. An applicant's request to serve as a volunteer background check is not initiated until all required training to

	<p>include PREA has been completed. The facility reported 315 volunteers. Upon approval and authorization to enter the facility, additional comprehensive PREA training during orientation. Refresher PREA training is presented by the Religious Services Chaplain. The Auditor randomly selected 15 volunteers for confirmation of PREA training.</p> <p>Contract employees attend the Non-Academy Pre-service Orientation training for new employees and annual in-service training with TDOC staff on Day 1 CORE Training. The facility's Training Specialist is responsible for monitoring and maintaining the training records. The facility reported 126 contract employees that includes medical, mental health and food service staff. The Auditor randomly selected 15 contractors for confirmation of PREA training. The acknowledgement of volunteers and contract employees' completion of PREA training is documented through their signature on their Employee PREA Training Acknowledgement, CR-3965 and attendance rosters notating they have received and understand the training. Mental health and medical staff are also required to complete specialized PREA training which is identified in standard 115.35.</p> <p>Although the vendors scheduled or extensive projects do not have direct contact with the inmate population, they also are required to complete the PREA training and acknowledge receipt of the training via signature on the Employee PREA Training Acknowledgement, CR-396.</p> <p>The Auditor also observed continuous PREA education posted throughout the facility on bulletin boards and walls accessible to staff and inmates. All contractors and volunteers are issued and carry PREA education refresher cards titled "PREA Action Steps for Allegations" that include the immediate responsibilities of a first responder.</p> <p>The Auditor conducted interviews with four (4) contract staff that included medical, mental health and food service and one (1) religious service volunteer. Each confirmed 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 such reports.</p> <p>Based on the review of agency policies, PREA training lesson plans, documentation of PREA training records, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard</p>
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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	1. MCCX Completed Pre-Audit Questionnaire (PAQ)

2. TDOC Index 502.06 PREA Implementation, Education, and Compliance

3. PREA Informational Postings (English and Spanish)

4. MCCX Rules and Regulations Handbook (English and Spanish)

5. Orientation Packets

7. Contracts for Translation Services

8. Inmate TDOC Orientation Acknowledgement Forms

9. Observation During Site Visit

9. Interviews with:

a. MCCX Intake Counselor

b. Inmate Population

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

Per the PAQ 2957 inmates were admitted to the facility during the review period. This number includes those inmates designated, those held for temporary hold pending transfer to other TDOC facilities within two to five days of arrival, and/or court appearances. The PAQ identified 1600 inmates who remained at the facility beyond 30 days of their arrival. The Auditor's request of six (6) inmates for each month for during the 12-month review period confirmed the 73 inmates acknowledged receiving PREA education upon their arrival. An interview conducted with Intake Staff indicated all inmates are issued a facility Rules and Regulations Handbook, receive an orientation packet that includes PREA information on various ways to report PREA allegations, observation of the PREA video, " PREA: What You Need to Know" doing the orientation (intake) screening process and staff discussion of available ways to report both internally and externally. The PREA video is presented through the National PREA Resource Center and is available as PREA Adult Comprehensive ASL, PREA Adult Comprehensive Captioned English, and PREA Adult Comprehensive Captioned Spanish. The PREA education given to the inmates provides information on the agency's zero tolerance policy for sexual abuse or sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, the inmate's right to be free from sexual abuse and sexual harassment, the inmate's right to be free from retaliation for reporting such incidents and information regarding the agency policies and procedures for responding to reports of PREA allegations. Inmates identified as LEP to include deaf are identified during Classification. Inmates are directed to a "I Speak" identification poster that allows them to identify their language, disabilities, including inmates who have intellectual disabilities, limited

reading skill, or who are blind or have low vision. Specialized procedures are then followed to ensure effective communication occurs with every inmate regardless of disability. If an interpreter is needed, staff personnel or one of the approved outside agencies to include University of Tennessee Language Center, Bridges for the Deaf and Hard of Hearing, and the Contract Administration may be contacted to provide such services as identified in the MCCX LEP Plan. A contact note will be entered when this service is provided. The Auditor attended the intake process of 17 arriving inmate during the site visit and confirmed the procedures were completed.

Per the MCCX Inmate Rules and Regulations Handbook, Inmates with limited English who needs assistance are to contact the LEP Coordinator/Principal for available interpreting services.

The MCCX Principal prepares monthly reports of arrival and designated inmates who require LEP assistance for submission. Documentation of the interpreting services provided for each LEP inmate to include deaf are tracked and maintained through quarterly reports and was submitted for review.

The facility provides Video-Remote Interpreting -Interpreter Services through LION BRIDGE for inmates identified as deaf. This service was utilized by the Auditor during an interview with a deaf inmate.

The MCCX Inmate Rules and Regulations Handbook includes PREA education on pages 21 - 22 and includes the agency's zero tolerance for incidences of sexual abuse and sexual harassment within MCCX; ways to report both internally and externally; identifies the MCCX Inmate PREA Victim Advocate; contact information for the Avalon Center at 196 10th Street Crossville, TN., in addition to via *9555 for confidential reporting via unrecorded calls; and staff misconduct in regards to staff and inmate behavior of a sexual nature.

The inmate orientation packets include various methods to report PREA allegations through the PREA TIP LINE *9222, any staff, family member, and/or anonymously in addition to The Avalon Center at *9555. The orientation packet direct inmates to refer to the MCCX Rules and Regulation for the mailing address to The Avalon Center.

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 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.

In addition to designated staff to provide translation services for inmates identified as LEP, the agency has established contracts with the University of Tennessee Language Center, and Bridges for the Deaf and Hard of Hearing.

Interviews with inmates identified as LEP, deaf, hard of hearing, physical disabled, and low vision indicated they were able to understand the PREA educational material given to them during orientation through staff discussion, orientation packet, within the facility's handbook and posted throughout the facility. A staff translator was utilized to assist an inmate identified as LEP during the interview process. The LEP (Spanish) inmate indicated he was provided written material in his first language Spanish. The Associate Warden Treatment/MCCX PREA Coordinator was identified as aiding the deaf inmate upon his arrival at MCCX and during the interview process.

The Auditor randomly selected six (6) inmates for each month during the 12-month review period for confirmation of PREA training upon their arrival at MCCX. The review revealed all selected inmates acknowledged orientation included the PREA video, receipt of the inmate handbook, that included the agency's zero tolerance of sexual abuse and how to report PREA allegations. The copy of the inmates' completed PREA education is securely maintained in each inmate's file maintained in the unit management office area. Confidential inmate information is maintained in the secured Records Office.

115.33 (e) PREA information was observed to be continuously and readily available to the inmate population throughout the facility. PREA signage containing hotline contact information and sexual abuse information was noted as being posted throughout the institution. Signage was observed to be available in English and Spanish to include in large font. Inmates are also provided orientation packets and facility's inmate handbook that contain PREA educational material for reference.

The Auditor conducted interviews with 45 inmates to include random and targeted inmates acknowledge receiving PREA education upon their arrival via the facility orientation packet, and staff discussion during the intake process on the day of their arrival during intake and orientation in addition to continuous PREA education posted throughout the Complex in housing units, program areas and work assignments areas. All inmates indicated staff to include the MCCX Associate Warden/Facility PREA Coordinator and Unit Management staff constantly make announcements to the inmate population on how to report PREA allegations during each visit to the housing units which are made numerous times weekly. In addition to the staff verbally explaining, inmates are advised to refer to the information on the PREA posters and notices on the bulletin boards as needed. The inmates also confirmed signage on the walls above the inmate telephones that provides toll free telephone numbers to report PREA allegations.

Based on the review of policies, observation of the intake process that include inmates were presented with various methods of PREA education, inmates acknowledgement of received PREA training through their signature and interviews, MCCX Rules and Regulations Inmate Handbook, orientation packet, observation of

	<p>PREA educational posting throughout the Complex during site visit, inmate interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 107.01 Office of Investigation and Compliance Unit Authority, Responsibility, Personnel Selection and Training 3. Documentation of Specialized Training for Agency Investigators 4. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent <p>115.34 (a) TDOC 107.01 states: All newly selected OIC Special Agents will attend and successfully complete at a minimum, an accredited law enforcement academy (e.g., Tennessee Correction Academy, and the Tennessee Bureau of Investigation, Memphis Police Academy which is a 16-week training course, Walter State Community College, etc.) An interview was conducted with the OIC Special Agent acknowledged her completion of investigative training provided by Tennessee Police Academy, Tennessee Bureau of Investigation that exceeds the standard requirement in addition to the online PREA training courses through the National Correction Institution (NIC) titled: "Conducting Sexual Abuse Investigations in a Confinement Setting." "Conducting Sexual Abuse Investigations in a Confinement Setting Advanced." The OIC Special Agents are authorized to conduct both administrative and potential criminal investigations.</p> <p>The OIC Institution Investigators are authorized to conduct administrative investigations only. However, they provide aid to the OIC Special Agents during criminal investigations. Certificates of completion of specialized investigative training were submitted the OIC Institution Investigators for the following courses: "Conducting Sexual Abuse Investigations in a Confinement Setting." completed through the National Correction Institution (NIC).</p> <p>The Auditor's review of 16 sexual abuse and sexual harassment investigative cases files confirmed the investigations were completed by OIC Investigators who have received specialized investigative training. Specifically, the review indicated administrative investigations were completed by the facility's OIC Institution Investigators and an OIC Special Agent.</p>

	<p>115.34 (b) An interview with the OIC Special Agent indicated the specialized training for the OIC Special Agents is mandatory and is through the Tennessee Police Training Academy, Tennessee Bureau of Investigations, and the Tennessee Law Enforcement Academy. The lesson plan is intended for use with Department personnel assigned to investigate an allegation of misconduct that involves a sex related offense. This training gives participants information they will need to conduct criminal and administrative investigations compliant with the Prison Rape Elimination Act standards. Training includes the definition, purpose, history of PREA, definitions, first responder duties, medical examinations, comprehensive investigations, evidence collection, interviewing the victim, suspect and witnesses, Miranda rights, Garrity rights, and handling false accusations. A copy of completion for the OIC Special Agent was presented for review. The OIC Institution Investigator also identified the inclusion of this provision is included in the “Conducting Sexual Abuse Investigations in a Confinement Setting” training presented through the NIC.</p> <p>115.34 (c) The Department shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The Auditor reviewed training certification of completion for the following courses of the OIC Institution Investigators identified as the following courses: “Conducting Sexual Abuse Investigations in a Confinement Setting;” Information covered during investigator training included but was not limited to evidence collection, interviews, documentation, and evidentiary standards.</p> <p>115.34 (d) The TDOC OIC Special Agents are required to complete a variety of investigative training that enhance their investigative skills to conduct administrative and criminal investigations with outside law enforcement training agencies in addition to NIC courses for the completion of both administrative and criminal investigations. The OIC Institution Investigators are required at a minimum to complete the NIC “PREA: Conducting Sexual Abuse Investigations in a Confinement Setting” training course. Confirmation of completed training was submitted.</p> <p>Based on the review of training lesson plans, training records, interviews, and analysis, the facility has demonstrated compliance with all the provisions of the standard. Investigative training is completed through the Tennessee Bureau of Investigations, Tennessee Police Academy, and NIC on-line courses.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Reviewed (documents, interviews, site review):
	1. MCCX Completed Pre-Audit Questionnaire (PAQ)
	2. TDOC Index 502.06 PREA Implementation, Education and Compliance

3. TDOC Index 502.06.3 Medical, Mental Health, Victim Advocacy, and Community Support Services for PREA Victims

4. PREA Resource Center Lesson Plan – Specialized Training for Medical/Mental Health Care Standards

5. Medical and Mental Health Staff Training Documentation

6. Interview with:

a. Health Services Administrator and Behavioral Health Administrator

115.35(a) TDOC Index 502.06 states all full and part-time medical and mental health care practitioners who work regularly in the facility shall be trained in: how to prevent, detect, and respond to acts of sexual abuse or sexual harassment. Medical and mental health staff 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 preserved 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 both the MCCX Behavioral Health Administrator (BHA) and the MCCX Health Services Administrator (HSA) confirmed all medical and mental health staff are required to complete PREA Specialized training for Medical and Mental Health upon new hire. The Behavioral Health Administrator and Health Services Administrator present the course to departmental staff. Medical and mental health staff utilized the Instructor's Curriculum Guide and Lesson Plans December 2013 Specialized Training PREA Medical, and Mental Care Standards presented by the National PREA Resource Center that meets the standard provisions. A copy of the lesson plan was presented for review by the Auditor. This lesson plan covers four (4) modules identified as the following: Module 1- Detecting 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. The staff are given a posttest at the completion of the specialized PREA training. The PAQ noted 112 medical and mental health care practitioners who work regularly at this facility received the training required by agency policy and 100 % as completed the specialized training pursuant to the standard.

115.35(b) The agency nor the facility conducts forensic medical exams. All forensic examinations are performed off-site at a local medical facility, University of Tennessee Medical Center.

115.35(c) (d) The Auditor reviewed training records supporting both medical and mental health care practitioners employed by the agency received Specialized PREA

	<p>training for medical and mental health in addition to PREA training pursuant to standard 115.32. Interviews with both the Behavioral Health Administrator and Health Services Administrator indicated departmental staff are required to complete standard PREA training with their contracting agency Centurion and their assigned TDOC facility upon hiring and annually. The staff are also 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 on-line in which all medical and mental health staff are required to pass the posttest upon completion. Confirmation of PREA training pursuant to standard 115.32 and the Specialized PREA training for both medical and mental health in accordance with the standard was provided for review.</p> <p>Based on the review the Specialized Training PREA Medical, and Mental Care Standards presented by the National PREA Resource Center, and confirmation specialized training and PREA training pursuant to standard 115.32, MCCX does meet all provisions of the standard.</p>
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115.41 Screening for risk of victimization and abusiveness	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. PREA Screening System Application 4. Completed Risk Screenings 5. Observation of Intake Risk Screening Process 6. Interviews with: <ol style="list-style-type: none"> a. Staff Responsible for Risk Screening b. Random and Targeted Inmates d. TDOC State-wide PREA Coordinator <p>115.41(a) (b) TDOC Index 502.06.1 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the TDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. The agency uses the PREA Screening System Application located on the TDOC intranet to assess an inmate’s risk of sexual victimization and risk of sexually abusing other inmates.</p>

TDOC Index 502.06.1 establishes policy and assigns responsibilities for screening individuals housed in a correctional facility under the authority of the TDOC to assess the risk of the individual being sexually abused or being sexually abusive towards other inmates. Per an interview with the Chief Counselor, Counselors conduct the intake (risk screening) and orientation process on the day of the inmate's arrival which is scheduled twice weekly. Staff utilize the PREA Screening System Application within the Distributed Application located on the TDOC intranet to assess an inmate's risk of sexual victimization and risk of sexually abusing another inmate. The PAQ identified the arrival of 2370 inmates who stayed beyond 72 hours. The Auditor randomly selected 54 inmates who arrived throughout the 12-month review period for confirmation of timely completed risk assessment screenings. The review confirmed 100% of the inmates were documented as screened on the day of the inmate's arrival at MCCX.

The Auditor observed the intake process of an incoming bus during the site visit that included risk screening by an Intake Counselor in a separate area from other inmates through utilization of printed copy of the agency PREA Screening form. The Auditor requested the Chief Counselor to complete a mock intake PREA risk screening with the Auditor. The Chief Counselor accessed the questionnaire from the PREA Management System to read each question while noting a response for upload in the Distribution Application and confirmed an understanding of each. Based on selected responses to the questionnaire, the history and/or risk of sexual aggressiveness and/or sexual victimization was determined. He demonstrated the housing assignment is based on the response of the risk screening that prevents those inmates identified as incompatible cell assignment together. In such an attempt to house such inmates together, the system creates an automatic activation of "Alert" and prevents the assignment. The screening process also included verification to check if the potential cellmate is currently being monitored as an aggressor or victim. When identified as having a prior history of sexual victimization, a mental health referral is initiated, and the inmates are normally seen within three to four days. He also stated staff are required to conduct an updated PREA risk screening in the same manner for all inmates who depart the facility for an outside medical trip and/or court appearance, etc., with a stay greater than 24 hours within 72 hours of their return.

115.41(c) (d) TDOC Index 502.06.1 requires authorized users to utilize the PREA Screening System Application located on the TDOC intranet. User security access to this system is authorized by the Associate Warden of Treatment. The PREA Screening System Application form is the agency-approved standardized screening instrument. Copies of the Tennessee Inmate Management Information System (E-TOMIS system) PREA Screening form were provided within the PAQ in addition to those of confirmation of the randomly selected 54 inmates' 30-day reassessments. The PREA Screening form assigns a numerical point value to questions regarding risk of victimization and risk of abusiveness categories. The form considers 12 separate inmate risk of victimization factors and risk of abusiveness factors. Each risk factor is assigned a numerical point value based on the information obtained from an interview with the inmate and information from the inmate record. 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 Auditor reviewed the screening instrument and instructions and found that it addresses the criteria required by all standard provisions. Specifically, the screening application considers factors that identify an inmate as being aggressor, victim, both, and/or neither. Questions include: Whether the inmate is a former victim of institutional (prison or jail) sexual abuse; Whether the inmate has mental, physical, or development disability; The age of the inmate (24 or younger or elderly, 60 or older); The physical build of the inmate (5'5" and/or less than 150 pounds); Whether the inmate has previously been incarcerated; Whether the inmate criminal history is exclusively non-violent; Whether the inmate has prior convictions for sex offenses against an adult or child; Whether the inmate is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming; Whether the inmate has previously experienced sexual victimization; Whether the inmate is detained solely for civil immigration purpose; Prior acts of sexual abuse; Prior acts of violent offenses; and history of prior institution violence. The PREA Screening System Application factors considered in the risk of abusiveness category include prior acts of sexual abuse, prior convictions for violent offenses and a history of prior institutional violence or sexual abuse. The instrument also considers a history of violent crimes including pending and current charges and a history of domestic violence including pending and current charges.

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. This procedure was confirmed through the review of the 54 inmate risk screening forms, observation during the PREA risk screening of arriving inmates and mock exercise with the Chief Counselor during the site visit.

115.41(f) 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 indicated that MCCX admitted 1600 inmates whose stay was 30 days or more. The review of the randomly selected 54 PREA Screening Application forms confirmed a reassessment of the inmates' PREA risk screening was completed for 100% of all inmates within 30 days of the arrival. The Chief Counselor indicated within 30 days of an inmate's arrival; the inmate's assigned Counselor conducts the reassessments. Staff indicated the reassessments are required to be completed between 15 - 30 days after the inmate's arrival. A tracking log is maintained throughout each month and emails are forwarded to the assigned staff of approaching reassessment. Additionally, the tracking log documents the submitted mental health referrals and date the inmates are seen by mental health. Interviews conducted with inmates who arrived at the facility within the 12-month review period in addition to several others, 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. The review of the submitted 54 inmates 30-day reassessment confirmed the 30-day

reassessment were completed not later than 30 days after the inmate's arrival.

115.41(g) TDOC Index 502.06.1 requires unit management staff to re-assess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or potential for abusiveness. 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. The PREA Screening System Application is utilized to conduct all re-assessments. The Chief Counselor indicated an additional assessment would be 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. He also stated he receives notification of substantiated sexual abuse investigations by the MCCX PREA Compliance Manager and at that time inmates identified as an aggressor and/or victim are reassessed and identified as such. Six (6) sexual abuse investigations were determined as substantiated during the review period. One inmate was released from TDOC custody prior to the initiation of the investigation. The remaining five (5) inmates were reclassified as victims. The aggressor of each case was identified as staff members. Additionally, inmates who departed the facility in an excess of 24 hours, staff conduct a reassessment upon their return. Interviews with the inmate population indicated the majority acknowledged they were asked the questions from the risk assessment at a minimum of twice within weeks of arrival.

115.41(h) TDOC Index 502.06.1 states that inmates will not be disciplined for refusing to answer or disclosing complete information in response to screening questions. Staff responsibility for conducting risk screening indicated inmates are not disciplined for refusing to respond or for not disclosing complete information and there have not been any circumstances in which an inmate refused to cooperate and provide responses. During interviews with the inmate population, none reported being advised of receiving discipline if they refused to answer PREA risk screening questions.

115.41(i) TDOC Index 502.06.1 indicates that screening information is strictly need-to-know. Access to the PREA Screening System Application is controlled through authorized user security access. Unit Management staff will ensure screening information is entered within the PREA Screening System Application, E-TOMIS. Per the State-wide PREA Coordinator, access to 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, vetted and granted based on the job responsibility of the individual for whom the request is submitted. Per the Chief Counselor, and MCCX PREA Compliance, only authorized staff with approved credentials have access to conduct the risk screening by accessing the Distribution Application is limited to Counselors, the MCCX PREA Coordinator/Associate Warden Treatment and the MCCX PREA Compliance Manager.

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

	<p>the provisions within the standard, documentation of timely completed 72 hour and 30 days assessments, Observation of the intake process to include risk screening process, interviews with staff and the inmate population, it is determined MCCX does meet all standard provisions.</p>
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115.42	Use of screening information
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.1 PREA Screening, Classification, and Monitoring 3. TDOC Index 113.37 Gender Dysphoria 4. TDOC Index 112.08 Personal Hygiene Resources for Inmates 5. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. MCCX PREA Compliance Manager c. Chief Counselor <p>115.42(a) TDOC Index 502.06.1 states, “Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and identifies as a sexual aggressor or prior sexual victims are under the supervision the unit management/Associate Warden/Deputy Superintendent/Designee. Housing, cell assignments, work, education, and program assignments shall be made with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. The facility does not house victims and abusers together. Staff who perform screening reported inmates at risk of victimization are separated from inmates at risk of abusiveness based on the risk assessment score. Those who are at risk of victimization cannot be housed with those who are at risk of abusiveness. When the count room officer attempts to assign inmates who are incompatible such their risk screening results, they receive notification that they are incompatible and the E-TOMIS system will not allow the inmates to assigned to cell assignment together. The Auditor observed the inmates were identified wearing color coded arm bands that identify their housing assignments.</p> <p>The Auditor requested the bed assignment of inmates identified as victims, at risk of</p>

a victim, and those inmates identified as an aggressor and/or at risk of being an aggressor and confirmed the inmates identified as incompatible were not housed together.

Per an interview with the TDOC State-wide PREA Coordinator and MCCX PREA Compliance Manager, MCCX is not subject to a consent decree, legal settlement or legal judgment requiring dedicated unit, or wing for lesbian, gay, bisexual, transgender, or intersex inmates. TDOC and MCCX refer to the TDOC 113.37, when determining facilities and housing for inmates identified as such that includes the consideration of the inmate's health and safety in addition to whether the placement would present management or security problems. The placement and programming assignments for inmates identified as transgender and intersex are conducted bi-annually to reassess and review any threats to their safety experienced by the inmate. These inmates are allowed to express any concerns they may have regarding their own view of safety in regard to placement and programming.

115.42(b) TDOC Index 502.06.1 Decisions concerning individual housing assignments and group activities for inmates who enter TDOC and are identified as Sexual Aggressors or Sexual Victims are the responsibility of the unit management team. This information is strictly need-to-know and housing, cell assignments, work, education and program assignments shall be made with a goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually aggressive. If behavioral health intervention is indicated, a referral shall be made in accordance with Policy #113.82, utilizing Institutional Health Services Referral, CR-3431. No inmate will be double celled until the required screening has been completed. Inmates who are deemed sexual aggressors or sexual victims will be appropriately housed until assessed by behavioral health professionals or classification. Once an inmate is identified as a Sexual Aggressor or Sexual Victim at any time during his/her incarceration, the inmate shall be evaluated for appropriate housing and programs. Additionally, inmates who have been identified as aggressors, victims, or at-risk of victimization or aggressive behaviors will be monitored quarterly on the ETOMIS screen LIBC, PREA monitoring for a minimum of one calendar year. At the end of the one (1) calendar year, if there is continued concern or need to continue monitoring, the monitoring will continue as needed.

115.42(c) TDOC Index 502.06.1 states decisions to assign a transgender or intersex inmate to a facility for male or female inmates and in other housing and programming assignments are made on a case-by-case basis. TDOC Index 113.37 states Facility and housing assignments shall be made on a case-by-case basis and documented on pages 1 and 2 of the PREA Housing and Program Review, CR-4086, considering the patient's health and safety, as well as potential management and security concerns. An inmates' own views regarding safety shall be solicited and considered. Inmates who have completed surgical sexual reassignment therapy prior to incarceration shall be placed in a correctional facility as determined by the Gender Dysphoria, Transgender, Transsexual, Intersex, and Gender Non-Conforming Accommodation Review Committee. For the purposes for facility placement, self-inflicted genital mutilation does not constitute surgical sexual reassignment therapy and does not qualify an inmate for placement in a facility for opposite-gender inmates.

Copies of Monthly Facility Team Meeting Minutes were submitted that documented transgender's accommodation request, bi-annual assessments, and applicable status changes. Each of the three (3) transgender inmates were assigned within restrictive housing as one was on MAX custody due to assaulting another with a weapon. One (1) requested protective custody due to monetary debt owed to other inmates. One (1) transgender requested placement in protective custody due to involvement with two (2) separate disruptive group inmate (gangs). The circumstances of their housing were confirmed by the inmates during the interview process.

Interviews with the transgender inmates and two inmates who identified themselves as gay confirmed neither were placed in designated housing based on their status as such.

115.42(d) (e) TDOC Index 502.06.1 indicates that placement for inmates identified as transgender or intersex shall be considered on a case-by-case basis. These identified inmates shall be reclassified every six months by the assigned counselor to review any threats to safety experienced by the inmate. The inmate's own views with respect to his safety shall be given serious consideration. Confirmation of the three (3) transgender's bi-annual assessments were submitted for review. Zero inmates were identified as intersex designated to MCCX within the 12-month audit period and on-site visit.

Per an interview with the Chief Counselor each inmate identified as transgender and/or intersex would be reassessed bi-annually, and each would be allowed to provide input of their own views regarding their safety. Documentation supported each of the three transgenders were reassessed bi-annually since their arrival at MCCX. Additionally, the assessments noted input from the transgenders regarding their safety concerns. Two transgenders requested placement in protective custody for reasons other than being identified as transgender. The facility reported zero intersex inmates during the review period and/or site visit.

115.42(f) TDOC Index 502.06.1 indicates that a transgender or intersex inmate's own view with respect to personal safety shall be seriously considered. Staff interviews indicated they were unaware of an inmate identified as intersex ever being designated at MCCX. However, inmates identified as intersex and/or transgender are allowed to shower separately from other inmates. Two inmates identified as transgender were placed in protective custody at their request and one (1) inmate identified as transgender was assigned to Maximum Custody Security segregation due to disruptive assaultive behavior on another inmate. Each of these inmates were assigned to cells with an installed shower. Per MCCX index 112.08 Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Per staff interviews, inmates identified as transgender, and intersex are given the opportunity to shower separately from the general population inmates during the institution count time. Interviews with two inmates identified as transgender indicated while in the general population, they were allowed to shower separately from other inmates and currently have showers within their cells. There were zero inmates designated at MCCX identified as intersex.

	<p>115.42(g) TDOC Index 113.37 Gender Dysphoria states, “Lesbian, gay, bisexual, transgender, or intersex inmates may not be placed in dedicated facilities, units, or wings solely based on such identification or status. There was one inmate identified as transgender and one inmate who was identified as bi-sexual. There were zero inmates who identified themselves as intersex and/or gay. MCCX is a male facility and does not house female inmate (lesbian). Per an interview with the TDOC State-wide PREA Coordinator, every offender that 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. Per the MCCX 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. A review of the housing assignment of the three (3) transgender inmates confirmed the two (2) transgenders currently in protective custody were previously assigned in separate housing within the general population, The transgender on MAX custody is housed based on his security status.</p> <p>Based on the review of policies, Facility Teams Meeting/Gender Accommodations Meeting Minutes, bi-annual assessments, roster of inmates’ 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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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Interviews with: <ol style="list-style-type: none"> a. Warden b. Staff Who Supervise Segregation <p>115.43(a) TDOC Index 502.06.2 states any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements set forth in this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241 shall clearly indicate the basis of concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. Inmates at high risk for sexual victimization may be</p>

placed in restrictive housing only after an assessment of all available alternatives has been made, and only until an alternative means of separation from likely alleged abuser(s) can be arranged. The housing assignment shall not ordinarily exceed a period of 30 days. The PAQ noted that zero inmates were held in involuntary segregated housing during the 12-month review period due to being at risk of sexual victimization and was confirmed during the review of ten (10) sexual abuse investigations and six (sexual harassment investigative case files. The Warden indicated the agency does prohibit placing inmates at high risk of sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, and the aggressor would be placed involuntary segregation. However, an inmate identified as such may request placement in protective custody status.

115.43(b) TDOC Index 502.06.2 states that inmates placed in restrictive housing for this purpose shall have access to programs, education, and work opportunities to the extent possible. If inmate access to programs, privileges, education, or work opportunities is restricted, the facility shall document what opportunities have been limited, the duration of the limitation, and the reasons for such limitations. This shall be documented in LCDG Contact Notes. An interview with staff who supervise inmates in segregated housing indicated all inmates are granted access to programs, education, and various other services such as phone calls, recreation, haircuts, shaves, visitation, legal aid, religious services material, medical and mental health during placement in segregation with limitations due to security restrictions. Per the review of ten (10) sexual abuse investigative case files, zero inmates who reported sexual abuse were identified as placed in segregation based solely on their reported sexual abuse and/or sexual harassment allegation. Additionally, there were zero inmates in segregation in relation to the standard provisions during the site.

115.43(c) 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. Per interviews with the Warden and staff who supervise segregation, involuntary segregated housing is not used for inmates at high risk for sexual victimization as the aggressor would be placed in segregation. Reviews are conducted on all inmates who are placed in involuntary segregation for longer than 30 days.

115.43(d) The Auditor's review of the 16 sexual abuse and sexual harassment investigative cases identified there were zero instances of inmates at risk of sexual victimization who were held in involuntary segregated housing during the 12-month review period. As stated by the Warden and staff who supervise segregation, the agency and facility does not place inmates identified as per the standard in segregation. The identified aggressor would be placed in involuntary segregation.

115.43(e) TDOC Index 502.06.2 states every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population. Interviews with staff assigned to supervise segregation and the OIC Institution Investigator indicated the alleged victim would remain on the compound and the alleged abuser would be placed in segregated housing pending an investigation. There were no inmates placed in involuntary segregation based on

	<p>being identified at a high risk of victimization.</p> <p>Based on the review of agency policy, PAQ, PREA investigative case files, interviews with Warden and staff who supervise segregation, the facility has demonstrated compliance with all the provisions of this standard.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Inmate Sexual Abuse/Assault Lesson Plan 4. MOU Between TDOC and The Avalon Center 5. TDOC Index 501.01 Inmate Grievance Procedures 6. PREA Notices with Tip Line Numbers 7. Warden’s Memorandums 8. Observation During Site Visit 9. PREA Posters “NO MEANS No” 10. Completed Calls via Inmate Telephone System 11. MCCX Inmate Rules and Regulations Handbook 12. Interviews with: <ol style="list-style-type: none"> a. Random staff b. Inmate Population to Include Formal and Informal <p>115.51(a) TDOC Index 502.06.2 states the Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment. These include but are not limited to: (a) written communication (includes electronic documents); (b) Reporting directly to staff (Verbally); (c) Third-party reporting; or (d) Facility PREA Tip Line. The MCCX Inmate Rules and Regulations Handbook includes internal reporting methods as reporting directly to staff, and through utilization of the grievance procedure, and through the MCCX PREA Tip Line *9222 while noting the call is confidential and anonymous.</p>

The PREA Inmate Sexual Abuse/Assault Lesson Plan includes a training section regarding the reporting of PREA allegations. Available options for inmates include Internal reporting directly to staff; facility PREA Tip Line (*9222); Third-party reporting (*9555); and written communication (Inmate Grievance). Staff may report privately to the Central Office PREA Tip Line (615-253-8178).

A memorandum drafted by the MCCX Warden to "All MCCX Staff, Contract Staff and Inmates is posted on bulletin boards throughout Complex that is accessible to all staff, and inmate population. The memorandum is printed on bright yellow paper that has an eye-catching effect on the observer. This memorandum is also visible to visitors upon entering the facility entrances and visiting rooms. The memorandum identifies Internal/External PREA Reporting. The noted methods include a) Reporting directly to staff member(s); b) PREA Tip lines *9222 and *9555 which both are identified as confidential calls and will not be recorded.

PREA posters "NO Means NO" were observed posted throughout the Complex in all inmate housing units, inmate and staff work areas, education building/classrooms, medical, food service, religious services, warehouse, front lobby, mental health, intake, visitation, hallways, etc. The posters note the inmates Right to Report; How to Report; and Victim Support Services.

The Auditor observed the available toll-free calls *9222 internal and *9555 external method of reporting posted near and/or directly over the inmate telephones throughout the Complex.

Inmates' interviews confirmed they were aware of various reporting options available. They indicated signage on walls for calling the PREA Hotline *9222 for internal reporting as their most common response and or directly to staff.

TDOC index 501.01 states an inmate may submit a grievance alleging sexual abuse at any time. Grievance boxes (mailboxes) are located within each housing unit and/or housing unit cores throughout the Complex. Only authorized staff have access to secure mailboxes for collection. An interview conducted with the Grievance Chairperson indicated the grievances are logged upon collection and those reporting PREA allegations are forwarded to the MCCX PREA Coordinator and OIC Facility Investigator for an investigation. The review of the PREA investigative case files indicated one (1) inmate submitted a grievance that included sexual abuse; however, an investigation of the allegations was previously completed by the OIC Institution Investigator. The grievance was submitted in an effort to request a transfer to specific TDOC facilities.

In addition, the Grievance boxes and general mailboxes are accessible to the inmate population in all housing units through the Complex. Per an interview with the Grievance Corporal, he collects grievances from the designated grievance boxes Monday through Friday except for holidays. As observed during the site visit, grievance boxes are located in designated areas throughout the Complex. PREA related grievances are required to be forwarded to the MCCX Associate Warden Treatment/MCCX PREA Coordinator who forwards to the MCCX Facility Investigator. The mailboxes are available for the inmate population to report both internally and

externally to include anonymous reporting. The facility provides inmates with paper noted as "Inmate Request" 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 the availability to purchase writing instruments to include note pads, ink pens, pencils and postal stamps from the inmate commissary that allow them to communicate in writing both internally and externally with others.

The Auditor utilized the inmates' housing unit telephone system to confirm their accessibility to the toll-free hotline number *9222 as an internal method to report PREA allegations. The Auditor identified herself and left a message for the OIC Facility Investigator to contact the MCCX Associate Warden Treatment/MCCX PREA Coordinator who was touring with the Auditor. The OIC Facility Investigator returned the Auditor's call within 20 minutes of the request.

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 indicated the signage on walls for calling the PREA Hotline as their most common response. Inmates were also aware of the grievance process to report.

115.51(b) TDOC Index 502.06.2 The Department shall provide at least one way for inmates to report abuse or harassment to an outside governmental entity that is not affiliated with the agency or that is operationally independent from agency leadership. TDOC has a MOU with The Avalon Center to serve an entity that allows residents to report immediately reports of sexual abuse and sexual harassment to agency officials. The information for contacting The Avalon Center (Sexual Assault Center) is noted in the inmate's handbook and posted throughout the Complex on inmate housing unit bulletin boards, in work areas, programs areas, visitation, food service, and facility entrance area that is accessible for viewing by all inmates, staff and visitors. The information is noted as "The Avalon Center 196 10th Street Crossville, TN 38555."

A memorandum drafted by the MCCX Warden to "All MCCX Staff, Contract Staff and Inmates" is posted on bulletin boards throughout the Complex that is accessible to all staff, and inmate population. The memorandum is printed on bright yellow paper that has an eye-catching effect on the observer. This memorandum is also visible to visitors upon entering the facility entrances and visiting rooms. The memorandum notes "Victims of sexual abuse/sexual harassment may also report the incident to an Outside Resource by writing the Avalon Center 196 10th Street Crossville, TN 38555 and/or the Just Detention International C/O Cynthia Totten, Esq. CA Attorney Reg. #199266 at 3325 Wilshire Blvd., Suite 340 Los Angeles, CA 90010. The Avalon Center 196 10th Street Crossville, TN 38555."

The Avalon Center can be reached directly by the inmate and staff within the facility by dialing *9555 which is a confidential call and will not be recorded. The *9555 outside resource phone number is posted over the inmate telephones within all

housing units.

The Auditor utilized the inmate telephone system to confirm the inmates' accessibility to report to The Avalon Center via dialing *9555. An immediate transmission of the availability for inmates to make a report was confirmed. MCCX does not house inmates detained solely for civil immigration purposes.

The Auditor observed the PREA Audit Notice previously forwarded to the facility was posted throughout the facility. The notice was identified as posted on December 20, 2023, well in excess of the six-week requirement period. The Auditor received one (1) letter from the inmate population requesting an interview. The inmate was interviewed during the random inmate selection. Inmates acknowledged their awareness of the posting.

115.51 (c) TDOC Index 502.06.2 indicates all staff are required to report immediately to their supervisor any knowledge, suspicion, or information regarding and incident of sexual abuse or sexual 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. Additionally, the policy states staff shall 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). Facilities shall call the TDOC Central Communication Center within 24 hours to report the allegations.

Interviews conducted with 18 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 always prior to departing from their assigned shift.

All staff are issued and carry a PREA Action Steps for Allegations Card that includes first responder steps and reporting methods to be taken upon becoming knowledgeable of sexual abuse and/or sexual harassment incidents. This information serves as an available reference guide to staff.

The Auditor conducted 45 formal and 13 informal inmate interviews. All inmates were able to identify the two (2) PREA Hotline numbers as *9222 for internal reporting and *9555 for external reporting. Each identified the hotline numbers as posted throughout the facility on posters, bulletin boards and over the inmate's telephone. The inmates also acknowledged their awareness that they could report sexual abuse or sexual harassment either verbally, in writing, anonymously or via third parties.

115.51(d) TDOC Index 502.06.2 indicates that staff may privately report sexual abuse and sexual harassment of inmates to the Central Office PREA Tip Line (615-253-8178). The PREA Inmate Sexual Abuse/Assault Lesson Plan includes a training section regarding the reporting of PREA allegations that includes staff may report privately to the Central Office PREA Tip Line (615-253-8178). Interviews with random staff indicated they were knowledgeable in how to privately report sexual

	<p>abuse or sexual harassment. Most staff cited the PREA Hotline to include the Central Office and/or through an in-person conversation with their supervisor, higher ranking staff and/or the OIC Institution Investigator as their primary methods of making a private report of sexual abuse or sexual harassment.</p> <p>Based on the review of agency policy, established MOU for external reporting, testing of available internal and external reporting methods accessible to the inmate population, resources available to the inmates, TDOC website, investigative case files, observation during the site visit, interviews and analysis, the facility has demonstrated compliance with all the provisions of the standard.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 501.01 Inmate Grievance Procedures 3. PREA Investigative Case Files 4. TDOC Agency Website 5. Observation During Site Visit 6. Interviews with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator b. Inmate Population c. OIC Facility Investigator d. MCCX Grievance Chairperson <p>115.52(a) (b) (c) TDOC Index 501.01 identifies grievance as a written complaint concerning the substance or application of a written or unwritten policy of practice, any single behavior or action toward an inmate by staff or other inmates or any condition or incident within the Department or institution which personal affects the inmate complainant and outlines procedures of the grievance process. The TDOC shall ensure that every inmate has the right to utilize the grievance procedures without fear of reprisal. All grievances shall be considered in a fair and impartial manner and resolved at the lowest possible level in the grievance procedures. An inmate may submit a grievance alleging sexual abuse at any time. Applicable time limits shall apply to any portion of a grievance that does not allege an incident of</p>

sexual abuse. Inmate shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance shall not be referred to a staff member who is the subject of the complaint.

Per interviews with the MCCX PREA Compliance Manager and MCCX Grievance Officer, all grievances alleging PREA allegations will be immediately forwarded to the MCCX Associate Warden of Treatment/MCCX PREA Coordinator and OIC Institution Investigator for completion of an immediate investigation. All correspondence with the inmate regarding the PREA allegation will be conducted with the OIC Institution Investigator. Per the OIC Institution Investigator, the allegation is required to be logged in the PREA Allegation System (PAS) within 24 hours of receiving the allegation. The inmate would be notified of the investigative findings by the OIC Investigator.

115.52(d) TDOC Index 501.01 states a final decision on the merits of any portion of a grievance alleging sexual abuse shall be issued by the Associate Warden of Treatment within 90 days of the initial filing of the grievance. Computation of the 90-day limit shall not include time used by inmates in preparing the grievance. The inmate shall be notified by the Associate Warden of Treatment if an extension is needed. At any level of the grievance if the inmate does not receive a response within the time allotted to reply, including any extension, the inmate may consider the absence of a response to be a denial at that level.

Per the PAQ, and review of the 16 investigative case files, one (1) inmate submitted a grievance that included circumstances of a substantiated staff on inmate sexual abuse investigation during the review period. The staff on inmate sexual abuse investigation was previously completed and the inmate acknowledged via his signature notification of the investigative findings. Specifically, the investigation was initiated on August 25, 2023, and completed on September 6, 2023. The victim submitted a grievance on September 7, 2023, that included various details of the staff on inmate sexual abuse occurrence which had previously been determined as substantiated. The grievance was submitted for the purpose of requesting a transfer to specific TDOC facilities due to gang related concerns at MCCX.

115.52(e) TDOC Index 501.01 states third parties shall be permitted to assist inmates in filing grievances related to allegations of sexual abuse and shall also be permitted to file such grievances on behalf of the inmate. If a third-party file such a grievance on behalf of an inmate, that inmate shall agree to have the grievance filed and document such on the Inmate Grievance form. The inmate shall be required to personally pursue any subsequent steps in the grievance process. The inmate may decline to have the grievance processed on his/her behalf and the decision shall be documented on the original Inmate Grievance.

Third party reporting methods were observed included in the inmates' handbook, posted in all housing units, visiting rooms, facility entrance areas, program, and work areas in large font in both English and Spanish while visible to staff, inmates, and

visitors. Additionally, the Auditor's Notice of the PREA Audit Site Visit was observed posted in all the aforementioned areas and confirmed as posted on December 20, 2023, through the submission of photographs to the Auditor. Interviews with staff and the inmate population confirmed the Auditor's Notice were posted several weeks prior to the Auditor's arrival.

The Auditor conducted a testing 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 was directed to leave a message with the reporting information and to provide her contact information for a return call. The Auditor received a call back from the TDOC State-wide PREA Coordinator within two hours indicating he had received the message to return my call. He stated he monitors the line for possible messages left by callers at a minimum twice daily. During the site visit, TDOC State-wide PREA Coordinator shared various messages he previously received from individuals who reported through the third-party reporting line at (615) 253-8178. He stated upon receiving the third-party reporting information, he immediately contacts the affected TDOC facility, and an investigation is initiated at the facility level.

115.52(f) TDOC Index 501.01 states after receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the grievance chairperson shall immediately forward the grievance to the Associate Warden of Treatment for any corrective action to be taken. The grievance chairperson will provide a response within 48 hours and a final decision within five calendar days. There were zero PREA allegations files 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 inmate filed the grievance in bad faith. An interview with OIC Institution Investigator explained although policy does allow disciplinary sanctions of inmates who file the grievance in bad faith, no inmates have received disciplinary actions for this action.

Based on the review of the review of the agency grievance policy that meets all provisions of the standard, grievance process noted in the Inmate Rules and Regulations Handbook, inmate's utilization of the grievance process to report one (1) previously reported PREA allegation, observation during the site visit, Grievance boxes available in all inmate housing units throughout the Complex for submission, and interviews with the inmate population, MCCX does meet all provisions of the standard.

115.53	Inmate access to outside confidential support services
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. MCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims
3. MOU with The Avalon
4. MCCX Rules and Regulations Handbook
5. Interviews with:
 - a. Inmates Who Reported Sexual Abuse
 - b. Formal and Informal Inmates
 - c. TDOC State-wide PREA Coordinator
 - d. Avalon Center Domestic Violence Case Manager
 - e. MCCX PREA Compliance Manager

115.53 (a) (b) (c) TDOC Index 502.06.3 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 monitor and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. A Notice was posted on all inmate housing unit bulletin boards that identified the Behavioral Health Administrator as the PREA Facility Victim Advocate.

(3) The TDOC shall attain 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.

TDOC has established a Memorandum of Understanding (MOU) with the Avalon Center on March 11, 2015. The MOU remains in effect and provides inmates with

access to outside victim advocates for emotional support services related to sexual abuse. Language in the MOU documents the involvement of trained sexual assault advocates as a component of the standard response to a report to sexual assault and/or a request for help from a survivor of sexual assault. The MOU also agree to maintain confidentiality of survivors of sexual violence who are incarcerated in the facility while maintaining available crisis counseling through organization's crisis hotline at any time and/or 24 hours a day and counseling may take place in person or by telephone.

The Inmate Rules and Regulations Handbook and notices posted on bulletin boards throughout the facility accessible to staff and the inmate population. The MOU Notice states to report incidents of Sexual Abuse to an outside agency or to obtain confidential victim advocacy services you may call The Avalon Center *9555 while noting the call is confidential and TDOC will not record this call. This contact information is posted in English and Spanish.

Each inmate upon arrival at MCCX is given a Rules and Regulations Handbook which outlines methods of reporting PREA allegations and staff responses to the report. The information is provided in English and Spanish. The handbook notes that inmates can "make a confidential report to outside agencies by writing to: Avalon Center 196 10th Street Crossville TN 38555 or through the inmate telephone system by calling *9555. This is a confidential call and will not be recorded. A Sexual Assault Victim Advocate will be available at all times by calling this number. Calls to this number cannot be monitored."

A MOU Notice was observed posted on bulletin boards throughout the Complex visible to all staff, contract workers, volunteers and the inmate population. The MOU Notice notes the TDOC has Zero Tolerance for sexual Abuse and to report incident of Sexual Abuse to an outside agency or to obtain confidential victim advocacy services the inmate may call Th Avalon Center at *9555, while noting the call is confidential and TDOC will not record the call. The MOU Notice was observed in English and Spanish.

MCCX does not house persons detained solely for civil immigration purposes.

General mailboxes are accessible to the inmate population in all housing units throughout the Complex. Mail is collected Monday through Friday. The mailboxes are available for the inmate population to report both internally and externally to include anonymously. The facility provides inmates with paper noted as "Inmate Request" 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. Inmates also can purchase note pads, pencils and ink pens to communicate in writing both internally and externally. An interview with staff assigned to the mailroom indicated all mail addressed to and from The Avalon Center would be treated in the same manner as legal mail and not reviewed by staff. The Auditor utilized the inmate's telephone to contact The Avalon Center by dialing *9555 and through conversation with the listener, confirmed the availability of services of victim advocacy services to the inmate population through written, verbal and in-person as applicable. During a separate private call with The Avalon Center Domestic Violence

Case Manager, the center has received numerous calls throughout the years requesting emotional support services from the inmate population at MCCX. In-person services are available during the forensic examination at the local outside hospital and upon an inmate's release to one of the seven counties throughout Tennessee where services are available. Staff are available to provide 24/7 emotional support via telephone and/or mail, as the staff does not enter the correctional facilities.

The Auditor observed telephones available for usage by the inmate population in all housing units throughout the Complex to include those inmates in segregation unit who 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 immediately be granted.

The Auditor conducted formal interviews with 45 inmates that included both random and targeted group inmates in addition to 13 informal interviews. All inmates were aware of services provided by The Avalon Center and identified the telephone as *9555, and it is posted on inmate telephone and/or walls near the phones in Spanish and English. They also acknowledged the phone number and mailing address for the Avalon Center is posted on all bulletin boards in English and Spanish. The inmates confirmed they were aware that the calls were free and confidential as it is posted on the PREA posters, over inmate telephones and in the inmate handbook. However, zero had attempted to initiate contact for services.

115.53 (b) TDOC 502.06.3 states staff 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. Inmate interviews to include random, targeted and those reported sexual abuse indicated they awareness that the calls are free and confidential as it is posted on the PREA posters, telephones and in the inmate handbook. However, zero inmates identified themselves to the Auditor as attempting to contact the Avalon Center for victim advocacy services.

Additionally, interviews were conducted with four (4) inmates who reported sexual abuse. The inmates stated they were aware of the available services; however, they have not elected to seek victim advocacy services.

115.53 (c) The agency maintains a copy of the MOU with the with The Avalon Center and presented a copy for review. The MOU was signed by the Avalon Center on March 11, 2015, and was identified as still in effect per interviews with the TDOC State-wide PREA Coordinator, MCCX PREA Compliance Manager and per services offered by the Avalon Center Domestic Violence Case Manager.

Based on the review of TDOC agency policy, inmate handbook, PREA postings, established MOU with The Avalon Center, testing of inmate for communicating with outside resource, observation during site visit, interviews, and analysis, the facility has demonstrated compliance with all the provisions of the standard.

115.54	Third-party reporting
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1062 374">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1214 875" style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 506.06.2 PREA Allegations, Investigations, and SART 3. MCCX Inmate Rules and Regulation Handbook 4. PREA Investigative Case Files 4. TDOC Agency Website 5. Interviews with: <ol data-bbox="256 842 552 875" style="list-style-type: none"> a. Inmate Population <p data-bbox="256 913 1485 1115">115.54(a) TDOC Index 502.06.2 states, The Department shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, 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. The identified methods include third-party reporting.</p> <p data-bbox="256 1153 1469 1355">The MCCX Inmate Rules and Regulations Handbook indicates If an inmate does not feel comfortable telling a staff member, they may call the MCCX TIP (*9222) as this call is confidential and anonymous. This information is also posted on all bulletin boards accessible to staff and the inmate population identifying the TDOC Tip Line by dialing *9222, in English and Spanish in addition to large font.</p> <p data-bbox="256 1393 1485 1718">Third party reporting methods were observed included in the inmates’ handbook, posted in all housing units, visiting rooms, facility entrance areas, program, and work areas in large font in both English and Spanish while visible to staff, inmates, and visitors. Additionally, the Auditor’s Notice of the PREA Audit Site Visit was observed posted in all the aforementioned areas and confirmed as posted on December 20, 2023, through the submission of photographs to the Auditor. Interviews with staff and the inmate population confirmed the Auditor’s Notice were posted several weeks prior to the Auditor’s arrival.</p> <p data-bbox="256 1756 1469 2083">A memorandum was drafted by the MCCX Warden to “ALL MCCX Staff, Contact Staff, and Inmates.” The memorandum notes victims of sexual abuse/sexual harassment may also report incident of sexual abuse/sexual harassment to an Outside Resource by writing to the following addresses through legal mail: The Avalon Center at 196 10th Street Crossville TN 38555 and Just Detention International C/O Cynthia Totten, Esq. CA Attorney Reg. #199266 3325 Wilshire Blvd., Suite 340 Los Angeles, CA 90010. The memorandum was observed posted on bulletin boards on noticeable neon yellow paper throughout the Complex in housing units, work areas, visiting rooms, program</p>

areas, and facility's entrance areas that are accessible to the inmates, staff, and visitors throughout the Complex. All information is available in English and Spanish to include large font.

The Auditor conducted an interview with The Avalon Center Domestic Violence Case Manager who acknowledged the inmate population has utilized the inmate phone system *9555 as a method to report sexual abuse and sexual harassment in addition to seeking emotional support. She added the information provided by the inmates can only be released to others with through authorization by the inmate.

The Auditor contacted Just Detention International via email regarding the receipt of any correspondence from the inmate population. However, the Auditor did not receive a reply.

The review of the 16 PREA investigative case files revealed six (6) inmates elected to report their allegation of sexual abuse and/or sexual harassment through third party. The reporting methods were included in the investigative summaries.

The PREA Audit Notice was observed posted throughout the facility in all housing units, program, front entrance, visitation, staff and inmate work assignment areas on walls and bulletin boards accessible to all staff, visitors and inmates. Inmates and staff acknowledged the PREA Audit Notice postings were posted several weeks (December 20, 2023) prior to the site visit.

The Auditor also reviewed the agency's website at <https://www.tn.gov/correction/state-prisons/prison-rape-elimination-act.html> that included third party reporting information accessible to the public. The agency's website states, "In addition to the facility PREA TIP lines, TDOC has established a TIP line for third-party reporting of sexual abuse and sexual assault at (615) 253-8178." The Auditor conducted a test call to the TDOC Tip Line (615) 253-8178 and confirmed the available resource to report via third-party. Specifically, the Auditor received a recording that instructed the Auditor to provide the reporting information to include the affected facility, inmate name and number, and callers' contact information for a returned call. A returned call was received within two hours of the Auditor's completed call. During the site visit, the TDOC PREA Coordinator shared with the Auditor examples of previous calls and messages he has received from third-party calls and emails for various TDOC facilities.

Interviews with random and target group inmates indicated most were aware that reports of sexual harassment and sexual abuse could be reported via a third-party such as a family member, friend, or another inmate while identifying this information is located on the PREA posters throughout the facility.

Staff interviews also confirmed their awareness of third-party reporting options to include the PREA hotline numbers, inmates' family member, friend, or another inmate for reporting acts of sexual abuse and/or sexual harassment.

Based on the review of policy, TDOC website, PREA posters and bulletins posted observed during site visit, confirmation of completed third-party via call to TIP Line, interviews with staff and inmate population, the facility has demonstrated compliance

with all the provisions of this standard.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence Reviewed (documents, interviews, site review):

1. MCCX Completed Pre-Audit Questionnaire (PAQ)
2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART
3. PREA Cards
4. Observation During Site Visit
5. Interviews with:
 - a. MCCX Warden
 - b. TDOC State-wide PREA Coordinator
 - c. Random staff
 - d. Behavioral Health Administrator
 - e. Health Services Administrator

115.61(a) TDOC Index 502.06.2 states, "All staff are required to report immediately to their supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of TDOC, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviews with staff indicated they are aware of their responsibility and duty to report any and all knowledge of PREA allegations. Staff carry a PREA refresher card in their possession identified as the "PREA Action Seps for Allegations' and lists upon staff ensuring the alleged victim is safe and has no contact with the alleged aggressor, staff are to notify the shift supervisor immediately who notifies the Associate Wardens/Warden. The 18 random staff selected for interview indicated they would immediately report to the Shift Commander and complete a documented report of their awareness to include from third-party as soon as possible and always prior to departing from their shift. Non-security staff identified they would report the information to their direct supervisor, security staff within their immediate area who would notify the Shift Commander, or they would personally notify the Shift Commander.

115.61(b) TDOC Index 502.06.2 states staff shall not reveal any information related to

a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. TDOC utilizes the TDOC Distributed Apps and PREA Allegation System (PAS) on their intranet for storage of PREA related information with approved access to limited staff positions. Staff interviewed were aware of the extent in which information of sexual abuse and/or sexual harassment should be shared only with authorized staff necessary to make treatment, investigation and other security and management decisions. The Auditor observed staff operational procedures of the TDOC Distributed Apps that stores PREA related information. The Auditor also observed the medical records department in which the inmates' medical and mental health files are maintained with limited staff accessibility.

115.61(c) TDOC Index 502.06.2 states, "Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse as outlined in this policy and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality at the initiation of services." Interviews confirmed medical and mental health staff are aware of their duties required by this provision and this information is shared with the inmate upon the initiation of services of their limitation of confidentiality and duty to report. Per the Behavioral Health Administrator, and Health Services Administrator, staff are required to disclose the limitation of confidentiality to the inmates each time they are seen. The inmates are required to sign their acknowledgement of the limitation during the initial intake at the Reception Center; however, they are reminded each time services are rendered. The signed consent forms expire annually, and inmates are required to sign a new form. Both indicated regardless they have a duty to report and remind the inmate of their reporting mandate.

115.61(d) Per the MCCX PREA Compliance Manager and MCCX Warden, the facility does not have inmates under the age of 18 years old. The average age range of inmates at MCCX is between the ages of 19 - 82 years old.

Per the TDOC State-wide PREA Coordinator, MCCX does not house individuals under the age of 18 and/or vulnerable adults. However, if an alleged victim is considered a vulnerable adult under a State or local vulnerable persons statute, the Department will report the allegation to the designated State or local services agency under applicable mandatory reporting laws such as Tennessee Department of Human Services (DHS) Adult Protective Services. However, TDOC has received guidance from Adult Protective Services which indicates TDOC may investigate within their facilities.

115.61(e) TDOC 502.06.2 states, Facility staff shall report all allegations of sexual abuse and sexual harassment, including third-party, and anonymous reports, to the OIC Institution Investigator for an investigation. Per the MCCX Warden, all PREA allegations regardless of how they are reported, all are immediately referred to the OIC Institution Investigator for administrative investigations and/or the OIC Special Agent who is authorized to conduct both administrative and criminal investigations.

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

115.62	Agency protection duties
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 1062 378">Evidence Reviewed (documents, interviews, site review):</p> <ol data-bbox="256 412 1214 875" style="list-style-type: none"> <li data-bbox="256 412 971 445">1. MCCX Completed Pre-Audit Questionnaire (PAQ) <li data-bbox="256 479 1214 512">2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART <li data-bbox="256 546 445 580">3. PREA Card <li data-bbox="256 613 520 647">4. Interviews with: <ol data-bbox="256 680 624 875" style="list-style-type: none"> <li data-bbox="256 680 624 714">a. Agency Head Designee <li data-bbox="256 748 405 781">b. Warden <li data-bbox="256 815 485 848">c. Random staff <p data-bbox="256 909 1474 1447">115.62 (a) 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 guidelines (Title 28 CFR Part 115. TDOC 502.06.2 states “If facility staff receives information that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate.” The Auditor utilized a variety of scenarios during interviews with random and specialized staff to include contractors and volunteers. All indicated they would remove the inmate from the area of threat, secure and/or maintain a visual of the inmate while notifying security staff and/or the Shift Commander. Staff, to include contractors and volunteers, are issued and carry a PREA Refresher Training card in their possession which lists the steps to take to protect an inmate. 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 data-bbox="256 1480 1430 1648">The Warden indicated the identified aggressor would be removed from the general population and placed in segregation. He added 60 % of the victims often request protective custody status. However, if the inmate feels safe on the compound, he would be awarded the opportunity to remain.</p> <p data-bbox="256 1682 1461 2007">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 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 data-bbox="256 2040 1422 2074">There were no occurrences reported where an inmate was subject to a substantial</p>

	<p>risk of imminent sexual abuse that required immediate action from staff.</p> <p>Based on the review of policy, PREA Refresher Cards, interviews and analysis, the facility has demonstrated compliance with all the provisions of this standard.</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Case File 4. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. Warden <p>115.63 (a) (b) (c) (d) TDOC Index 502.06.2 states upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Warden of the facility that received the allegation shall notify the head of the facility where the alleged abuse occurred. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The Warden/Superintendent who receives such notification shall ensure that the allegation is investigated in accordance with TDOC policy.</p> <p>The PAQ notes the facility did not receive notification of an inmate reporting he was sexually assaulted and/or abuse at his previous correctional facility that was unreported upon arrival at MCCX. Per the Warden, upon an inmate's report of an unreported allegation of sexual abuse and/or sexual harassment, he or his designee would report the allegation to the Warden or Warden's Designee at the affected facility as soon as possible on the day of receiving the information and always within 72 hours. The notification would be made both verbally and via email.</p> <p>Per the PAQ and interview with the Warden, the facility received one (1) notification in which an inmate reported a sexual abuse allegation after their departure from MCCX to another TDOC facility. A review of the investigative case file confirmed the investigation was initiated in the PREA Allegations System by the OIC Institution Investigator on the day received and completed eight days later.</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</p>

	<p>the TDOC State-wide 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 various the Rape Crisis Centers where the agency has established a MOU.</p> <p>Based on the review of agency policy, the PAQ, investigative case file, and interviews with the TDOC Agency Head Designee, and Warden, the facility has demonstrated compliance with all the provisions of this standard</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. MCCX Index 502.06.2-1 PREA Allegations, Investigations, and SART 4. PREA Response Card 5. Interviews with: <ol style="list-style-type: none"> a. Inmates Who Report Sexual Abuse b. Random Staff Interviews <p>115.64(a) (b) MCCX Index 502.06.2-1 states the staff first responder is required to instruct the alleged victim not to take any action that could destroy physical evidence and immediately notify the shift commander. The alleged victim will be instructed not to shower, wash their hands, brush teeth, change clothes, urinate, defecate, drink, or eat. 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)</p> <p>TDOC Index 502.06.2 states, "If the first staff responder is not a security staff member, he/she is required to instruct the alleged victim not to take any actions that could destroy physical evidence and then immediately notify the shift commander. The alleged victim and abuser shall be instructed not to wash their hands, shower, brush teeth, change clothes, urinate, defecate, drink, or eat. Security shall separate the alleged victim and abuser. Security staff shall preserve and protect any crime</p>

scene until appropriate steps can be taken to collect any evidence. Security staff shall notify the SART.

The Auditor utilized a variety of scenarios during interviews with security and non-security staff to include contractors and volunteers regarding their response as a first responder. The vast majority of those interviewed, were clearly aware of their responsibilities as first responders while stating they would immediately separate the inmates and maintain sight of a victim, implement efforts to preserve a crime scene including advising those inmates involved to not shower, change clothing, brush teeth, eat, drink, or use the toilet and notify the Shift Commander. Although staff have received training as a first responder and are issued a PREA Response Card that lists "PREA Action Steps for Allegations" for an immediate response to an allegation of sexual abuse, based on some staff responses, the Auditor recommended additional refresher PREA training to staff to include security and non-security staff.

Confirmation of refresher PREA training to include first responder duties was given to both security and non-security staff. The refresher PREA training was presented by the security supervisors and the TDOC State-wide PREA Coordinator during the post audit phase. Confirmation of staff training was documented on attendance rosters.

The MCCX PAQ noted 11 sexual abuse allegations were reported during the 12 - month review period. However, 10 investigations were completed and one (1) remained pending. It also noted the number of times the first responder security staff and/or non-security staff responded to the reported occurrence within a time to separate the alleged victim and abuser as zero. This was confirmed during the review of the 11 sexual abuse investigative case files to include the pending investigation. One (1) inmate was transported to the outside medical center for a forensic medical examination due to him alleging he was previously forced to perform oral sex on the three (3) staff at once. Although no physical evidence was identified as available for collection, the inmate was transported to the local hospital for a forensic medical examination. The results of the DNA sample and investigation remained pending during the audit process.

Interviews with four (4) inmates who reported sexual abuse indicated allegations did not include substantiated sexual penetration. The allegations were reported through other means outside of the victims self-reporting. Each indicated they were immediately removed and separated from the alleged aggressor to include staff and were offered medical and mental health services.

Based on the review of agency policies, sexual abuse investigative case files, PREA Response Card, observation during site visit, and interviews, the facility demonstrated compliance with all the provisions of this standard.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. MCCX Index 502.06.2-1 PREA Allegations, Investigations, and SART 3. Interview: <ol style="list-style-type: none"> a. Warden <p>115.65 (a) MCCX Index 502.06.2-1 identifies procedures to follow upon notification of a reported PREA allegation. The policy outlines the responsibilities of the Sexual Abuse Response Team (SART) as a coordinated response team that is comprised of medical and mental health practitioners, facility investigators, and facility security leadership. The team consists of the Associate Warden of Treatment, the Health Services Administrator/Director of Nursing, the Mental Health Administrator/Designee, the Chief of Security /designee, and one of the Institutional Investigators. The policy outlines the response procedures upon a reported allegation of sexual abuse to include those reported within 72 -hours, responsibilities of the first responder, security shift commander, SART response, SANE response, available hospitals with SANE, availability of a PREA Victim Advocate to the alleged victim upon request, investigative procedures that includes the completion of specialized training for the authorized investigators, accountability of the allegations within the PREA Allegation System (PAS), thoroughness of the investigations within the written reports for administrative and criminal investigations, notification of the investigative finding to the victim and the completion of an incident review within 30 days of the substantiated and unsubstantiated investigation.</p> <p>Per an interview with the MCCX Warden, he identified the MCCX Index 502.06.2-1 policy as outlining the written institutional plan 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>Based on a review of the agency policy, interview and analysis, the facility has demonstrated compliance with this standard.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. Tennessee Code Annotated 50-1-207

	<p>3. Interview with:</p> <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. 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. Although there is a historical agreement for the facility, it does not grant protection for staff during any allegation of misconduct.</p> <p>Per the MCCX Warden, he confirmed although the facility does have a historical agreement, it references staff days of work only, and does not grant protection for staff during any allegation of misconduct.</p> <p>Based on a review of the code, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. Documentation of Retaliation Monitoring 4. Interviews with: <ol style="list-style-type: none"> a. Agency Head Designee b. MCCX Warden c. MCCX PCM/Staff Charged with Monitoring Retaliation d. Inmates Who Reported Sexual Abuse <p>115.67 (a) TDOC Index 502.06.2 indicates inmates and staff who are involved in reporting sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other inmates or staff. Appointed members of the facility SART shall monitor staff and inmates for protection from retaliation utilizing PREA Retaliation Review (Inmates) for inmates,</p>

CR-3963, and PREA Retaliation Review (Staff), CR-3982, for staff.

115.67(b) TDOC Index 502.06.2 indicates the facility shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Per interviews with the Agency Head Designee and Warden, there are multiple options available to protect inmates and staff from retaliation. The Agency Head Designee indicated TDOC monitors victims and aggressors for retaliation on a 30-, 60-, and 90-day time frame. In addition, TDOC offers the victim the ability to transfer facilities. Should the victim decide to remain, the aggressor is transferred to another facility. At a minimum the victim and aggressor are listed as incompatible and prohibited from being housed together. Retaliation for cooperation is not tolerated in TDOC. If the individual is an offender, they would be granted protective custody status until the aggressor was removed from the compound and the retaliation could be addressed. If the individual is a staff member, steps are instituted to ensure that retaliation is recognized, and addressed appropriately (i.e. termination of aggressor, staff transfer of retaliator, or reassignment of retaliator).

The MCCX Warden identified measures to protect inmates include monitoring at 30-day intervals for a minimum of 90 days and longer if needed. Inmates are monitored for any unjustifiable housing changes while checking with the count room officer, unjustifiable work assignment changes, and an increase in discipline. He added he reviews all incidents reported daily in addition to other assigned staff who are responsible for tracking the daily activities. In regard to staff being monitored, a core group of staff would meet with the staff member daily to discuss any concerns to include monitoring interaction with other staff and the inmate population, and monitoring for unreasonable write ups, and denial of requested leave. An investigation would be conducted on any staff and/or inmate identified as participating in acts of retaliation towards others and would receive applicable discipline.

115.67(c) (d) (e) TDOC Index 502.06.2 states, 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 inmate or staff. The policy states for at least 90 days following a report of sexual abuse, the Department shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse. Departmental monitoring shall involve looking for any changes that may suggest possible retaliation by inmates or staff. Institutional SART members shall act promptly to remedy any such retaliation. TDOC Index 502.06.2 also states If an offender who is being monitored for retaliation transfers to another facility whose primary purpose is to house TDOC inmates, the PREA Coordinator from the sending facility shall notify the PREA Coordinator at the receiving facility of the required monitoring. The receiving facility will be responsible for conducting the monitoring and forwarding the required PREA Retaliation Review (Inmate) for inmates, CR-3963, to the sending facility for placement in the PREA investigative file. Should the

offender transfer to another facility prior to completing the 90-day cycle of monitoring, the original sending facility shall be notified by the original receiving facility so that notification of the monitoring requirement can be sent to the new facility by the original sending facility so the process can begin again with no break in monitoring for the offender. The retaliation monitoring shall continue beyond 90 days if the initial monitoring indicates a continuing need. This monitoring shall include, but not be limited to inmate disciplinary reports; inmate housing or programming changes; or negative performance reviews or reassignments of staff.

The MCCX PREA Compliance Manager was interviewed as a staff member who conducts retaliation monitoring. She confirmed staff meets with each inmate identified as a victim and aggressor at 30-, 60-, and 90-day intervals to discuss any concerns while documenting the retaliation monitoring form. This information is shared with other SART members during the monthly SART meetings for further review and discussion while addressing any concerns. The retaliation monitoring process includes the review of unjustifiable changes in an inmate housing, program assignments, disciplinary sanctions, program placement scoring, job assignment, and interaction with other inmates and staff. The retaliation monitoring will exceed 90 days if needed.

Regarding the retaliation monitoring of required staff, each would also be monitored at 30-, 60-, and 90-day intervals. Staff are monitored for unreasonable negative manners, such as shift changes, post assignment, evaluation, declined for special assignment/promotion/academy, receipt of unreasonable disciplinary action, cancellation, or changes of vacation time and/or unexplained actions taken towards them. Additionally, monitoring will continued as needed.

The review of 10 completed sexual abuse investigations confirmed eight (8) received an investigative finding of substantiated and/or unsubstantiated. The remaining two (2) unfounded investigative findings were concluded within two weeks of the reported allegation and did not require retaliation monitoring. Additionally, one (1) substantiated sexual abuse investigation was initiated after the inmate's release from TDOC custody. Therefore, retaliation monitoring was not applicable. Documentation of completed retaliation monitoring was completed at 30-day intervals for 90 days for each of the remaining identified victims and aggressors to include staff and were documented as meeting the standard provisions. There were zero circumstances where retaliation monitoring exceeded 90 days.

Interviews were conducted with four (4) inmates who reported sexual abuse with an investigative finding of substantiated. Each inmate indicated staff met with them at a minimum monthly for 90 days to discuss any concerns they may have such as retaliation from staff and/or the inmate population. All indicated they have not experienced any negative concerns in which they could relate to their involvement in the sexual abuse investigations.

The tracking portion of the form identifies housing changes, programming changes, disciplinary record, etc., as items to monitor, and provides an area for reporting at 30 days, 60 days, final 90 days, and space for extended monitoring if required. It also

	<p>includes a column for the retaliation monitor to include notations regarding negative interactions with staff or inmates. There were zero instances where the victim and/or aggressor required retaliation monitoring beyond 90 days.</p> <p>Based on the review of policies, PREA investigative case files, completed retaliation monitoring forms completed pursuant to the standard provisions, interviews and analysis, the facility has demonstrated compliance with all provisions of this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 4. Interviews with: <ol style="list-style-type: none"> a. Warden b. Staff Who Supervise Segregation <p>115.68 (a) TDOC Index 502.06.2 indicates that any use of restrictive housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of this policy and coordinated by the unit management team. Protective Services Investigative Routing, CR-3241, shall clearly indicate the basis of concern for the inmate’s safety and the reason why no alternative means of separation can be arranged. 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. This housing assignment shall not ordinarily exceed a period of 30 days.</p> <p>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 is restricted, the facility shall document which opportunities have been limited, the duration of the limitations and the reasons for such limitations that should be documented on LCDG Contact Notes.</p> <p>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</p>

	<p>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.</p> <p>Per the PAQ and interviews with the Warden, and staff who supervise segregation, involuntary segregation is never used for any inmates who report sexual abuse and/or those inmates who are at a high risk of being sexual abused. Zero were placed in segregation during the 12-month review period. The Warden indicated inmates at high risk are vetted and the aggressor would be removed from the general population and placed in involuntary segregation pending an investigation. The victim, just as all inmates may request protective custody at any time.</p> <p>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. However, all inmates who are placed in segregation are awarded the same activities and programs as those inmates within the general population but within limitations to include education, recreation, showers, medical and mental health services, mail, telephone access, legal, leisure and religious services material, and grooming services due to security concerns within restrictive housing units.</p> <p>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. The review did identify inmates were placed in segregation solely for the introduction of contraband into the facility and/or the request for protective custody due to gang related activities.</p> <p>Based on the review of agency policy, interviews with the Warden and staff who supervise segregation, PREA investigative case files, and analysis, the facility has demonstrated compliance with this standard.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Index 107.02 Office of Investigations and Conduct Operational Procedures 4. PREA Investigative Case Files 5. Interviews with:

- a. OIC Special Agent and OIC Institution Investigator
- b. MCCX Warden
- c. State-wide PREA Coordinator
- d. MCCX PREA Compliance Manager

115.71(a) TDOC 502.06.2 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.

TDOC Index 107.2 identified the agency have an Investigation Unit (IU) that is a specialized law enforcement unit of the TDOC which conducts both administrative criminal investigations of offenses relative to and/or affecting the TDOC.

Interviews with both the OIC Special Agent and OIC Institution Investigator indicated normally, the initiation of the investigation is immediately upon notification of the allegation. Although the completion of the investigation can vary depending on the circumstances of the allegations and other factors, all are required to be completed in a timely manner. All reported allegations are investigated in the same manner regardless of whether it was reported via a third party, anonymously, verbally and/or in writing.

Twenty-one reported allegations of sexual abuse and/or sexual harassment was reported during the 12-month review period. Of those 21 cases, 20 were completed as an administrative investigation and one (1) remained pending. The Auditor selected 16 investigative case files for review. The review supported the investigations were completed as soon as on the day of being reported and/or not longer than eight days of being reported. Each of the investigative case files contained written statements by the alleged victim, alleged aggressors, identified witnesses, 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.

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. The

OIC Institution Investigator is a member of the SART and conduct administrative investigations of alleged sexual abuse and sexual harassment. However, if the case appears criminal in nature, the Regional OIC Special Agent is notified and continues with the investigation. Administrative investigations are typically completed by the OIC Institution Investigator. The review of the selected 16 investigative case files supports each investigation and was completed by an OIC Investigator who completed specialized training pursuant to standard 115.34. in which training certifications of completion for the following courses of the OIC Institution Investigators were identified as the following: "Conducting Sexual Abuse Investigations in a Confinement Setting;" "presented through the National Correctional Institute. OIC Special Agents who are authorized to conduct criminal investigations complete mandatory training through the Tennessee Police Training Academy, Tennessee Bureau of Investigations, and the Tennessee Law Enforcement Academy in addition to the aforementioned NIC course.

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. The review of the selected 16 investigative case files confirmed the OIC Investigators utilized all available evidence and data that included the review of video, collection of witness statements, review inmate telephone calls, letters, inmate rosters, inmate and applicable staff interviews, review grievances, review the history between the victim and aggressor, review disciplinary sanctions, and medical services provided as applicable. As identified during interviews with the OIC Investigators. There was one (1) allegation of sexual abuse that met the mandate of physical evidence collection of DNA sampling during the 12-month review period. The inmate was transported to the local hospital for mouth swabs. The results and investigation completion remained pending during the post audit process.

115.71(d) TDOC Index 502.06.2 states when the quality of evidence appears to support criminal prosecution, the Department shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. An interview with the OIC Special Agent indicated she would communicate with the County District Attorney's Office while discussing the case and evidence collected for their viewpoint regarding possible prosecution.

115.71(e) TDOC Index 502.06.2 states, "The credibility of a victim, suspect, or witness, shall be assessed on an individual basis, and shall not be determined by the person's status as inmate or staff. Inmates who allege sexual abuse shall not be required to submit to a polygraph examination or other truth telling devices as a condition for proceeding with the investigation of such an allegation." Investigators interviewed stated that credibility of an alleged victim, suspect, or witness is considered on an individual basis while based solely on the evidence collected. Additionally, OIC Special Agent and OIC Facility Investigator indicated neither would under any circumstance require an alleged victim of sexual abuse and/or sexual

harassment to submit to a polygraph examination. The review of the 16 PREA investigative case files supported there was no indication that an alleged victim was requested to participate in a 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 indicates administrative investigations shall include an effort to determine whether staff actions or failures to act facilitated the abuse and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative findings. A review of administrative investigations and sexual abuse incident reviews demonstrated the investigators and SART team members include a review to determine the effect of staff actions and/or failures as it pertains to the reported allegation. An interview with both the OIC Institution Investigator and the OIC Special Agent confirmed they include detailed information in the investigative report if staff 's actions or lack of responsibilities contributed to facilitating the abuse. The review of the investigative case files included a review of available video that included staff actions for applicable staff on inmate sexual abuse investigations. Documentation of PREA case files, medical, mental health and inmate risk screening is stored electronically. Accessibility is given to authorized staff only upon approval and the issuing of credentials for login. Files are securely stored electronically, and hard copies are secured in file cabinets within secured offices with accessible only to staff assigned to the respective investigative departments.

115.71(g) TDOC 502.06.2 states criminal investigations shall be documented in a written report which contains a thorough description of physical, testimonial, and documentary evidence. One staff member on inmate sexual abuse investigation was referred for criminal prosecution but was declined by the District Attorney's Office.

115.71(h) TDOC Index 502.06.2 states, "Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution. Per an interview with the OIC Special Agent, cases are referred for criminal prosecution pending probable cause of the investigative finding. Five (5) staff on inmate sexual abuse allegations were determined as substantiated. However, only one (1) was referred for criminal prosecution based only on the allegations reported by the inmate only, no additional evidence was supported. This case was declined for criminal prosecution by the District Attorneys' Office.

115.71(i) TDOC Index 502.06.2 states that such investigative records shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five additional years. This practice was confirmed by the OIC Institution Investigator and OIC Special Agent. Administrative investigative case files are maintained in the 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 states that the departure of the alleged abuser or victim from the employment or control of the facility or Department shall not provide a basis for terminating an investigation. Interviews with both the OIC Institution

	<p>Investigator and OIC Special Agent in Charge confirmed although staff may resign during an investigation, the investigation continues to include the arrest and prosecution of staff when applicable. The review of the 16 investigative case files, supported one (1) staff was placed on administrative leave, refused to report to the facility for an interview and refused to respond to the OIC Investigator’s request for phone calls and/or interview while living outside the state of Tennessee. The staff member was terminated from employment with TDOC, and the investigation was determined as substantiated based on the testimonial provided by the inmate and evidence of recorded calls between the inmate and staff.</p> <p>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 MCCX Warden, TDOC State-wide PREA Coordinator, OIC Special Agent, MCCX PREA Compliance Manager and OIC Facility Investigators in addition to the review of the 16 investigative case files. Therefore, provisions (k) and (l) are not applicable.</p> <p>Based on the review of policy, 16 investigative case files, interviews and analysis, the facility has demonstrated compliance with all provisions of this Standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. PREA Investigative Case Files 4. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent <p>115.72(a) TDOC Index 502.06.2 states, “The Department shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse are substantiated.” A review of the investigation documents indicates the Department does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse and/or sexual harassment are substantiated. Per interviews with the OIC Special Agent and OIC Institution Investigator a preponderance of evidence is the standard necessary to substantiate an administrative allegation of sexual abuse or sexual harassment.</p>

	<p>The review of 16 investigative case files supported the preponderance of evidence was utilized to determine the investigative findings for each of the 16 administrative investigations.</p> <p>Based on the review of agency policy, documents, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC PREA Status Notification CR-3984 4. Interviews with: <ol style="list-style-type: none"> a. OIC Institution Investigator and OIC Special Agent b. Warden c. Inmates Who Reported Sexual Abuse <p>115.73(a) TDOC Index 502.06.2 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. Interviews with the Office of Investigations and Conduct Investigators confirmed at the conclusion of each PREA investigation, the victim is notified of the investigative findings by staff assigned to the facility OIC Investigators. The PAQ identified the number of criminal and/or administrative investigations of alleged inmate sexual abuse allegations completed by the agency/facility in the past 12 months as ten (10). Each of the alleged victims was identified through notified verbally or in writing, of the results of the investigative findings. Confirmation of the alleged victims’ notification was documented on the Inmate PREA Allegation Status Notification forms. Per interviews with the OIC Investigators, the initial notification to the victim may be made during the interview process based on the evidence received. Written notification to the inmate is delivered as an official document and served to the inmate by a member a member of the investigative department. Interviews conducted with four (4) inmates who reported sexual abuse indicated they were met by staff who informed them of the investigative findings while they were asked to document their signature as acknowledgement of the notification. In addition to the review of the ten (10) sexual</p>

abuse investigative files, the Auditor also reviewed six (6) sexual harassment investigative files. The review confirmed 15 inmates identified as victims were notified of the investigative findings. One (1) inmate identified in a staff on inmate sexual abuse investigation was previously released from TDOC custody prior to the initiation of the investigation. One sexual abuse case remained pending.

Per an interview with the MCCX Warden, the MCCX Facility Investigators and/or Unit Management team are assigned to provide the inmate with the investigative findings of completed investigations.

115.73 (b) The PAQ noted the agency requests relevant information from the outside investigative entity in order to inform the inmate of the outcome of the investigation for sexual abuse investigations. The PAQ also noted zero inmate sexual abuse in the facility was completed by an outside agency during the 12-month review period. 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 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 review of the five (5) substantiated staff on inmate investigative case files identified one (1) inmate was released prior to the initiation of the investigation. The remaining four (4) inmates received notification of the following: 1) The employee is no longer posted within the inmates' unit; 2) The employee is no longer employed at the facility.

115.73(d) TDOC Index 502.06.2 indicates that following an investigation into an inmate's allegation that he or she suffered sexual abuse in a facility, the Department shall inform the inmate in writing: a) whenever the facility learns that an alleged abuser has been indicted on a charge related to sexual abuse within the facility; b) when the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The facility reported one (1) inmate on inmate sexual abuse allegation during the 12-month review period. The investigation was determined as unsubstantiated.

115.73(e) TDOC Index 502.06.2 states that all notifications shall be done in writing using Inmate PREA Allegation Status Notification, CR-3984, and the inmate shall acknowledge by signature that he/she has received such notification. The notification 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. The PAQ noted the number of notifications to inmates that were provided pursuant to this standard as 20. This number included sexual abuse and sexual harassment investigations. The Auditor requested 16 of the 20 completed

	<p>investigative case files for confirmation of the inmates' notification of the investigative findings. One (1) inmate was released from TDOC custody prior to the initiation of the investigation; therefore, notification was not applicable. The remaining 15 inmates were noted as receiving the notification of the investigative findings via their signature and/or through a second staff member serving as a witness of the inmate's refusal to sign.</p> <p>Based on the review of agency policy, investigative case files, documentation of inmates' notification of the investigative findings, interviews and analysis, the facility has demonstrated compliance with this standard.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Employee Code of Conduct 4. PREA Investigative Case Files 5. Imposed Discipline and Termination Notifications <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 states staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual harassment, or PREA policies. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual touching only after conclusion of investigation. Sanctions shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of the Department's sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.</p>

	<p>Two (2) TDOC staff were terminated based on substantiated staff on inmate sexual abuse investigations and one TDOC (1) staff received a three-day suspension based on a substantiated staff on inmate sexual harassment investigative finding. The referral for criminal prosecution and/or to relevant licensing bodies for the staff identified in the substantiated investigations were not applicable.</p> <p>Based on the review of agency policies, PREA investigative case files, documentation of staff discipline to include termination and suspension, the facility is compliant with all provisions of this standard.</p>
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115.77 Corrective action for contractors and volunteers	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. TDOC Index 115.01 Standards for Volunteers and Coordination of Community Involvement Need to upload this policy 4. TDOC Code of Conduct 5. PREA Investigative Case Files 6. Contractor's Removal Letter 7. Interview with: <ol style="list-style-type: none"> a. Warden <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 states that any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies and if found to have engaged in sexual abuse or sexual harassment of an inmate shall be prohibited from further contact with any inmate.</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 an interview with the MCCX Warden, access would be restricted to volunteers and contractors from entering all TDOC facilities and allowance on TDOC property upon identified as an aggressor in a sexual harassment and/or sexual abuse allegation to include during the investigative process. Notification would be made to their contracting agency through the human resource department and an investigation would be initiated. Criminal prosecution and reporting to relevant licensing bodies would be applied as applicable. However, this notification would be made by their contracting agency.</p> <p>Per a review of the PAQ, and investigative case files, entry clearance was immediately terminated by the Warden for three (3) contract employees based on substantiated staff on inmate sexual abuse investigative findings. Documentation of each contract staff prohibited allowance on state property was presented for review and noted to be issued on the day of the reported allegations. A report of the occurrence to relevant licensing bodies was not applicable.</p> <p>There were zero reported allegations of sexual harassment and/or sexual abuse alleged report against a volunteer during the review period.</p> <p>Based on the review of agency policies, PREA case files, prohibited from state property notifications, and interview, the facility is compliant with all provisions of this standard.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1.MCCX Completed Pre-Audit Questionnaire (PAQ) 2.TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3.TDOC Index 502.05 Definitions of Disciplinary Offenses 4. PREA Investigative Case Files 5. Interview with:

a. Warden

b. Behavioral Health Administrator

115.78(a) TDOC Index 502.06 states, "Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Per the MCCX PAQ, review of PREA Allegation Report Log and review of 16 investigative case files there were zero substantiated administrative and/or criminal inmate on inmate sexual abuse and/or sexual harassment investigative findings during the review period.

115.78(b) & (c) 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). TDOC Index 502.06.2 states that sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. The Warden confirmed an inmate's mental health status would be considered when imposing sanctions for policy violation to include sexual abuse and/or sexual harassment allegations. 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 16 sexual abuse and sexual harassment investigation in addition to a review to the PREA Allegation Report, identified the following three inmate on inmate reported allegations. The investigations were determined as the following: One (1) inmate on inmate sexual abuse investigation as unsubstantiated; one inmate on inmate sexual harassment investigation determined as unsubstantiated and one inmate on inmate sexual harassment was determined as unfounded. There were zero substantiated inmate on inmate sexual abuse and/or sexual harassment investigative findings during the 12 - month review period.

115.78(d) TDOC Index 502.06.2 states, If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Per an interview with the Behavioral Health Administrator, an inmate identified as an aggressor during a substantiated sexual abuse investigation would normally be seen within 24 hours. Individual services are offered that includes evaluating the inmate for suicidal tendencies in addition to other concerns. If the inmate is not currently on the mental health case log, the inmate is offered to accept continued mental health services. Inmates identified as sex offenders may be referred to a Sexual Offender Treatment Program at the TDOC DeBerry Special Needs Facility but have the option to decline as they are not required to participate.

115.78(e) TDOC Index 502.06.2 states an inmate may be disciplined for sexual

	<p>contact with staff only upon finding that the staff member did not consent to such contact." The review of the five (5) substantiated staff on inmate sexual abuse and one (1) substantiated staff on inmate sexual harassment investigations confirmed neither victim (inmate) received disciplinary sanctions for their involvement.</p> <p>115.78(f) TDOC Index 502.06.2 states, "For the purpose of disciplinary action, a report sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if the investigation does not establish evidence sufficient to substantiate the allegation." The PREA case review indicated of the six (6) unfounded sexual abuse/sexual harassment investigative findings, zero inmates received disciplinary sanctions for falsely reporting an incident or lying while reporting and/or during an investigation during the 12-month review period.</p> <p>115.78(g) TDOC Index 502.06.2 states, "Any prohibition on inmate-on-inmate sexual activity shall not consider consensual sexual activity to constitute sexual abuse." Per an interview with the Warden, the facility does not consider consensual sexual activity between inmates to be sexual abuse. There were zero reported acts of consensual sexual activity reported that constituted sexual abuse during the 12-month review period.</p> <p>Based on a review of agency policies, allegation report log, investigative case files, and interviews, the facility is compliant with all provisions of the standard.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. TDOC 113.84 Clinical Assessments, Mental Health Appraisals, and Psychological Testing 4. Observation During Site Visit/Electronic Storage/ File Room Storage 5. PREA Mental Health Referrals 6. Interviews with: <ol style="list-style-type: none"> a. Chief Counselor b. Behavioral Health Administrator

c. Inmates Who Disclosed Prior Victimization During PREA Screening

115.81 (a) (b) (c) TDOC Index 502.06.3 states that, "If the screening process indicates that an inmate has experienced prior sexual victimization or has perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a referral to a medical and/or behavioral health provider within 14 days of the screening. TDOC Index 113.84 states that each mental health appraisal conducted as part of the initial classification or reclassification process shall be documented on Mental Health Intake Appraisal, CR-3772. The PAQ indicated that 100% of inmates that reported prior sexual victimization were offered a follow-up meeting with a mental health provider. Per an interview with the Chief Counselor, all inmates identified during the intake screening and/or follow-up assessments identified as having a history of prior sexual victimization and/or prior sexual aggression, mental health referrals are documented and forward to the mental health staff. These individuals are normally seen within three to four days and always within 14 days of the submitted referral.

Per the PAQ, in the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. This number included those inmates who were also identified as a victim of sexual abuse, at risk of victimization and at risk of being an aggressor. The Auditor review of the TDOC Institutional Health Services Referrals (CR-3431) for ten (10) inmates identified as an aggressor and/or at-risk of being an aggressor and ten (10) inmates identified as having a prior history of sexual victimization and/or at risk of sexual victimization during their risk screening. The review confirmed all inmates were referred to mental health and were seen within 14 days of the submitted referrals. This practice was also explained during an interview with the Behavioral Health Administrator. Interviews with four (4) inmates who identified with a prior history of sexual abuse indicated they were offered mental health services and seen within a week of the referral to include those inmates who stated they were already on the mental health case load.

115.81(c) MCCX is not a jail.

115.81(d) TDOC Index 502.06.3 indicates that any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and behavioral health practitioners and other staff, as necessary, to make informed treatment plans and security and management decisions, including housing, bed, work, education, and programs assignments, or as otherwise required by Federal, State, or local law. Per an interview with the Chief Counselor, the specific details related to sexual victimization or abusiveness is maintained in the Distribute App and within secured file cabinets within the unit management offices, and records office with limited access to authorized staff only. Staff have access to the identification of victims and abusers as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, that includes Counselors, and the MCCX PREA Coordinator/ Associate Warden Treatment. The Auditor was granted access to review the Distribute App that confirmed the electronic storage of inmate risk screening accessible to

	<p>authorized staff through personal login identification. Medical and mental health documentation is stored within secured medical files maintained in the medical department records office accessible to assigned staff. Limited information is stored electronically.</p> <p>115.81(e) TDOC Index 502.06.3 states that Medical and Behavioral Health providers shall obtain informed consent from inmates before reporting about prior sexual victimization that did not occur in the institutional setting. Additionally, interviews with both medical and mental health staff verified staff would obtain informed consent from inmates before reporting any knowledge or suspicion of sexual abuse that did not occur in a correctional setting. However, staff do have a mandatory duty to report. The facility does not house inmates under the age of 18 years.</p> <p>Based on a review of agency policies, mental health referrals, observation during site visit, confirmation of secure electronic storage, secured file areas, and timely completion of submitted mental health referral, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
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115.82 Access to emergency medical and mental health services	
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.3 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. TDOC Index 113.30 Administrative Policies and Procedures Access to Health Care 4. National PREA Resource Center Specialized Training: PREA Medical and Mental Care Standards 5. Interviews with: <ol style="list-style-type: none"> a. Behavioral Health Administrator b. Health Services Administrator c. Random Staff d. Inmates Who Reported Sexual Abuse <p>115.82(a) TDOC Index 502.06.3 states victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and behavioral health</p>

providers, according to their professional judgment, in accordance with Policy #113.30. If no qualified medical or behavioral health providers are on duty at the time of a report or recent abuse is made, correctional officers are trained to render first aid as needed. Once the victim is safe and the scene is secure if medical attention is deemed necessary for stabilization, the security shift supervisor shall notify the medical member of SART or their Designee. Medical care should be limited to stabilizing the victim for transport. Medical and behavioral health providers shall follow operational protocols regarding evidence preservation. All inmates alleged to be victims of sexual abuse shall automatically be referred to behavioral health staff utilizing the referral process.

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.

Behavioral Health and the Health Services staff are required to complete the training curriculum "Specialized Training: PREA Medical and Mental Health Care Standards Notification of Curriculum Utilization December 2013 presented by the National PREA Resource Center is utilized as the training curriculum for TDOC medical and mental health specialized training. The lesson plan consists of four (4) modules: Module 1 - Detecting and Assessing Sign of Sexual Abuse and Harassment; Module 2- Reporting and the PREA Standard; Module 3 - Effective and Professional Responses; Module 4 - The Medical Forensic Examination and Forensic Evidence Preservation. This training provides an agency policy that outlines medical and mental health services to be provided to victims of sexual abuse.

An interview with the MCCX Health Services Administrator 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. Services provided are within policy and upon the inmate return to the facility, medical staff would follow the recommendations made by the SANE/SAFE and/or attending doctor at the local hospital and the facility doctor. He further stated the staff utilizes their professional judgment within policy laws when determining appropriate medical treatment.

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 Monday - Friday, however they are scheduled for on-call duty and report to the facility as needed. Victims of sexual abuse are normally seen within 24 hours of the reported allegation and at the latest are seen the following workday. He further stated the nature of scope of services provided are based on staff professional judgement in determining a treatment plan. Interviews with four (4) inmates identified in reported sexual abuse investigations, confirmed they were immediately seen by medical and mental health staff.

115.82(b) TDOC Index 502.06.3 states, "If no qualified medical staff are on duty at the time of a report of a recent abuse, a correctional officer trained to render first aid may help as needed". Medical staff are on duty 24/7 daily at MCCX and medical services are provided as needed. Per the MCCX Behavioral Health Administrator, staff are normally scheduled Monday - Friday but are scheduled on call duty as needed. The nature and scope of the services provided to the inmates are based on their education, and professional judgement. All staff selected for interviews were aware that medical staff would be notified of reported PREA allegations and response immediately. Their description of actions taken include notifying the Shift Commander who would notify medical staff and the inmate would be escorted to the medical department. The review of the sexual abuse investigations confirmed the applicable inmates were offered both medical and mental health services at the initiation of the sexual abuse investigation. One inmate was previously released from TDOC custody prior to the reported allegation and one (1) victim had previously transferred to another TDOC facility prior to reporting the allegation 11 days later.

115.82(c) TDOC Index 502.06.3 indicates that inmate victims of sexual abuse, while incarcerated, shall be 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. MCCX is designated as a male only facility, therefore access to emergency contraception is not applicable. However, according to the Health Services Administrator, 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 review of an ongoing sexual abuse investigative case file confirmed one (1) was transported to an outside medical facility for oral swab testing. The results remained pending in addition to requested documentation from the local hospital. Due to the reporting date and length of time, testing for various transmitted infections was not applicable at the facility level during the site visit. Per the Behavioral Health Administrator, the victim would be seen within 24 hours and offered treatment based on clinical team meetings for needed services. Documentation of applicable medical treatment at the local hospital and MCCX medical staff in addition to mental health services was presented for review that included the confirmation of accepted and refusals by the inmates.

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 Health Services Administrator 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 at the local hospital.

Based on the review of agency policies, documentation, sexual abuse investigative case files, interviews and analysis, the facility is compliant with all provisions of this standard.

<p>115.83</p>	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.03 Medical, Behavioral Health, Victim Advocacy, and Community Support Services for PREA Victims 3. TDOC Index 113.30 Administrative Policies and Procedures Access To Health Care 4. National PREA Resource Center Specialized Training: PREA Medical and Mental Care Standards 5. Medical/Mental Health Logs 6. Interviews with: <ol style="list-style-type: none"> a. Health Services Administrator b. Behavioral Health Administrator c. Inmates who reported sexual assault/abuse <p>115.83(a) TDOC Index 502.06.3 and TDOC Index #113.30 addresses the requirements of this standard. Pursuant to TDOC Index 502.06.3 the facility shall offer medical and behavioral health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lock-up or juvenile facility. The policy outlines services required in the event of sexual abuse.</p> <p>TDOC Index #113.30 states Inmates with 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>Additionally, both medical and mental health completes 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.</p> <p>Interviews with four (4) inmates who reported sexual abuse allegation/identified in sexual abuse occurrences and the review of eleven (11) sexual abuse investigative case files confirmed the alleged victims were offered both medical and mental health treatment.</p>
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115.83(b) TDOC Index 502.06.3 indicates that the evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans and when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. TDOC facilities offer follow-up services within the correctional facilities. Interviews with both the medical and mental health supervisors, a victim of sexual abuse would be offered follow-up services throughout their assignment at the facility in addition to their transfer to other TDOC facilities as the inmate's medical and mental health treatment will continue. Upon an inmate's release from TDOC custody into the community, Case Managers within the departments arrange for continued treatment services within the inmate's release area. The Case Managers maintain a listing 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.

115.83(c) TDOC 502.06.3 indicates the facility shall provide such victims with medical and behavioral health services consistent with the community level of care. An interview with the Behavioral Health Administrator (BHA) and the Health Services Administrator 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. Per the BHA staff provide more one on one interaction when providing services with the inmate population.

115.83(d) & (e) MCCX houses male inmates. Therefore, provisions d and e are not applicable.

115.83(f) TDOC 502.06.3 states 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 the PAQ and review of the sexual abuse investigative case files, one (1) inmate received a forensic medical examination via oral swab, the results of test and remained pending. Treatment for sexual transmitted infections prophylaxis remained pending per medical requirements.

115.83(g) TDOC Index 502.06.3 states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Per mental health and medical staff interviews, the victim would not incur any financial cost for treatment services. Per the PAQ and review of the sexual abuse investigative case files, zero inmates required and/or received medical and/or mental health services from within the local community. All medical and mental health services were provided by the appropriate staff at MCCX. Zero inmates were held responsible for the financial cost of services rendered.

115.83(h) TDOC Index 502.06.3 states 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. An interview with the Behavioral Health Administrator, inmates reported to have committed sexual abuse are considered a

	<p>priority and an evaluation would normally be completed within 24 hours to include for suicidal and/or homicidal thoughts. Inmates have the option of whether to complete the evaluation, available services and/or treatment plans.</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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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06.2 PREA Allegations, Investigations, and SART 3. MCCX Sexual Abuse Incident Review Reports 4. Interviews with: <ol style="list-style-type: none"> a. Warden b. MCCX PREA Compliance Manager c. Incident Review Team Member <p>115.86 (a)(b)(c) TDOC 502.06.2 states, the facility shall conduct a Sexual Abuse Incident Review Report, CR-3985, at the conclusion of every sexual abuse investigation, including investigations in which the allegation has not been determined as substantiated, unless the allegation has been determined to be unfounded. Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include the Warden/Superintendent/designee, Associate Warden of Treatment/Deputy Superintendent/Assistant Warden at privately managed facilities, facility and OIC Institution Investigator, line supervisor, and medical/mental health professionals. These individuals are members of the Sexual 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>During the 12-month review period, there were five (5) substantiated and three (3) unsubstantiated sexual abuse investigative findings. Documentation supports that an incident review was completed within 30 days of each investigative finding. The incident Reviews were documented as completed by members of the Sexual Assault Response Team (SART) that included but were not limited to the following positions:</p>

MCCX PREA Compliance Manager, MCCX Facility Investigator; Mental Health Professional; Line Supervisor; Medical Professional, and MCCX PREA Coordinator/ Associate Warden.

115.86(d) (e) TDOC 502.06.2 requires that the 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 (a-c) and any recommendations for improvement and submit such report to the Warden/Superintendent.

The MCCX PREA Coordinator/Associate Warden of Treatment also serves as a member of the Incident Review team. He indicated applicable Incident Reviews are scheduled monthly during the monthly SART meetings and are always completed within 30 days of a substantiated and/or unsubstantiated sexual abuse investigation. The review team reviews the information collected throughout the investigation in an effort to determine any factors that could have contributed to the reported allegation. During the meeting, the team review the area in which the incident was reported to have occurred to ensure no barriers exist that could have contributed to the act, the need of mirror and/or camera installation, and whether staff were in the proper performance of their duties assigned. Camera and mirror placement have been installed based on various incident reviews conducted.

The Auditor reviewed the sexual abuse Incident Review reports for the substantiated and unsubstantiated investigative findings that confirmed the SART members documented their assessment review in monitoring technology, review of the area in the facility where the incident allegedly 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 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 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. However, the Auditor advised the MCCX Warden, MCCX PREA Coordinator/Associate Warden Treatment and MCCX PREA Compliance, that although they identify the review of the various areas during the incident reviews, additional specific information regarding their conversation and interaction during the review should be noted on the reports.

Per the Warden, the facility's Incident Review Team is composed of members of the facility's Sexual Abuse Response Team who meets monthly to discuss and review all substantiated and unsubstantiated sexual abuse investigations within 30 days of the

	<p>completed investigation. The SART does consist of supervisory staff as outlined within the standard. The SART make an effort to determine any factors that could have contributed to the act, and possible recommendations and necessary changes that could be implemented to prevent further actions to include staffing level, and the installation of additional cameras, and mirrors.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
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115.87	Data collection
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. 2021-2022 Annual SSV PREA Report 4. 2022 SVV Documentation for Private Contract Facilities 5. Department of Justice Requested Submission 6. Interview: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator <p>115.87(a) TDOC Index 502.06 states that staff shall collect accurate uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. TDOC shall aggregate the incident-based sexual abuse data at least annually. Per an interview with the State-wide-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.</p> <p>115.87(b) TDOC Index 502.06 indicates that the TDOC shall aggregate the incident-based sexual abuse data at least annually. The State-wide-PREA Coordinator shall ensure that data collected is securely retained. The State-wide-PREA Coordinator shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training.</p> <p>115.87(c) The State-wide 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</p>

	<p>Survey of Sexual Violence.</p> <p>115.87(d) TDOC Index 502.06 states, that TDOC shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews.</p> <p>115.87(e) TDOC Index 502.06 states, State-wide-PREA Coordinator shall ensure that data collected is securely retained. TDOC shall make all aggregated sexual abuse data, from TDOC facilities and private facilities with which it contracts, readily available to the public at least annually through the TDOC website. Copies of SVV reports to include substantiated sexual abuse allegations within private contracted facilities were submitted for review.</p> <p>115.87(f) TDOC 502.06 indicates that a report prepared by the State-wide-PREA Coordinator shall be prepared utilizing the Department of Justice annual format. The Auditor was provided with a copy of the 2022 SSV-2 that supported the report and was submitted timely to the Department of Justice as dated October 6, 2022. Per the State-wide PREA Coordinator, the most recent request for data from the Department of Justice was received on October 17, 2023. The report was submitted on November 4, 2023. Confirmation of the SSV Submission Verification to the Department of Justice was provided.</p> <p>Based on the review of policies, incident reviews, interviews and analysis, the facility is compliant with all provisions of this standard.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. TDOC Agency Website 4. Annual PREA Report for 2021 - 2022 5. Interviews with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator b. Agency Head Designee c. MCCX PREA Compliance Manger

115.88(a) (b) (c) (d) TDOC Index 502.06 addresses 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. 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 PREA Report is prepared by the TDOC State-wide 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.

Per the MCCX PREA Compliance Manager, she aids the agency in the review of data collected and aggregated pursuant to 115.87, by ensuring the information requested by the TDOC State -wide PREA is accurate and submitted timely.

TDOC State-wide PREA Coordinator confirmed the agency does review 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 offenders. He 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 do not contain sensitive information that needs to be redacted, as such information is excluded and would not be included in the report.

The Auditor reviewed the agency's website and verified that the 2021 - 2022 Annual Report was signed by the Interim Commissioner and published and made available to the public. The Annual Report included a comparison of 2020 - 2021 and 2021 - 2022. The report was dated October 6, 2022. The report is well written and addresses the requirement of this standard.

Based on a review of policy, website, Annual Report, interviews and analysis, the

	agency is compliant with all provisions of this standard.
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Reviewed (documents, interviews, site review):</p> <ol style="list-style-type: none"> 1. MCCX Completed Pre-Audit Questionnaire (PAQ) 2. TDOC Index 502.06 PREA Implementation, Education, and Compliance 3. Agency website 4. Annual PREA Report for 2021-2022 5. Interview with: <ol style="list-style-type: none"> a. TDOC State-wide PREA Coordinator <p>115.89 (a) (b) (c) (d) TDOC Index 502.06 governs the mandate of the standard. The directive indicates the TDOC PREA Coordinator shall ensure that data collected is securely retained. The TDOC is responsible for completing an Annual Report and when approved by the Commissioner it is made available to the public through the Department’s public website. The report should redact information that would present a clear and specific threat to the safety and security of a prison before publication indicating the nature of the redacted information and related personal identifiers shall be removed prior to being made public. Securely maintain incident-based and aggregate data ensuring only authorized personnel have access to the information. The TDOC State-wide PREA Coordinator shall maintain sexual abuse data for at least 10 years after the date of the initial collection.</p> <p>Per an interview with the TDOC State-wide PREA Coordinator, data is securely maintained for at least 10 years in a computerized system and accessible to authorized staff only. The Auditor reviewed the TDOC website at https://www.tn.gov/correction/sp/prison-rape-elimination-act.html and confirmed the publishing of the 2021-2022 Annual Report was accessible for viewing by the public. Personal identifiers were excluded from the report.</p> <p>Based on the review of policy, website, 2021- 2022 Annual Report, staff interview and analysis, the TDOC agency and facility is compliant with all provisions of this standard.</p>

115.401	Frequency and scope of audits
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>TDOC Index 502.06 PREA Implementation, Education, and Compliance was reviewed and meets the requirement of this standard. The directive requires the PREA Coordinator to ensure that Department PREA-related activities comply with federal PREA standards in the following areas, Audits, and Auditing and corrective action. This is the second year of the fourth audit cycle for MCCX. The Agency oversees 11 facilities and the agency website posted each of the facility’s PREA audit reports posted for all facilities during the past audit cycle. The Auditor was provided with all requested documentation to include extensive files throughout the audit process to support a conclusion of compliance with PREA the standards. The documentation review included a 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. The Auditor conducted an excess of the required number of staff and inmates based on the population and all were knowledgeable of the agency’s zero tolerance of sexual abuse and how to report to include staff and inmates assigned to the MCCX. Additionally, the Auditor was given full access to tour all areas while being provided private offices/areas to conduct staff and inmate interviews and review documentation.</p> <p>Confirmation of the Audit Notice posting was verified as posted December 20, 2023, as by photographs presented to the Auditor. Inmates confirmed their observation of the notice of audit posted throughout the complex that noted the procedure to submit confidential correspondence to the Auditor. Per an interview with the mailroom staff, inmates were allowed to forward confidential correspondence to the Auditor in the same manner as mail addressed to legal counselor. The Auditor received one (1) written correspondence from the inmate population regarding his cooperation during an alleged sexual abuse at another TDOC facility in 2021. The inmate was selected for a random interview. There was no additional request by staff or inmate to be interviewed by the Auditor.</p>

<p>115.403</p>	<p>Audit contents and findings</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<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 www.tn.gov/correction/sp/prisonrape-elimination-act.html contained the final 15 previous PREA reports completed for TDOC to include four (4) contract facilities. Final reports were published on the agency website within 90 days of issuance to include those facilities that are contracted by the TDOC. Based on the above, the facility has demonstrated substantial compliance with this</p>

	standard.
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Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

(f)		
	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.)	yes